990 err

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2019
Open to Public Inspection

A F	or th	e 2019	calendar year, or tax year beginning	07	/01, 2019 ,	and ending			06	5/30 , 20	20		
			C Name of organization					D Employer idea	ntifica	ation numb	er		
B c	heck if a	pplicable:	THE PEW CHARITABLE TRU	STS				56-230	714	7			
	Addre	ess	Doing business as										
	7	e change	Number and street (or P.O. box if mail is n	ot delivered to street addres	ss)	Room/suite		E Telephone number					
	+	l return	2005 MARKET STREET			2800		(215) 575-9050					
	-	return/	City or town, state or province, country, ar	nd ZIP or foreign postal cod	e			(223) 37					
	termi Amer	nated nded	PHILADELPHIA, PA 19103			G Gross receipts	Φ.	1 796	237	913			
	retur Appli	n cation	F Name and address of principal officer:	SUSAN K. URAH	JNT			H(a) Is this a grou			Yes	X No	
	pend	ing	2005 MARKET STREET, ST			חת 1010	2	subordinates'	?	\vdash			
_	_							H(b) Are all subord			Yes	No	
		empt st	(1)) (insert no.)	4947(a)(1)	or 527	7			list. (see instr	uctions)		
_			WWW.PEWTRUSTS.ORG			T -		H(c) Group exemp					
				Association Other	<u> </u>	L Year of	format	ion: 2002 M :	State	of legal dor	micile:	PA	
Pa	art I	Su	mmary										
	1		describe the organization's mission or										
Se			ROVING PUBLIC POLICY, IN	FORMING THE PU	BLIC, A	ND INVIG	ORAT	ING					
nar		CIV	IC LIFE										
Governance	2			scontinued its operation	•				S	ı			
တိ	3	Numb	er of voting members of the governing b	oody (Part VI, line 1a)					3			13.	
ფ	4	Numb	er of independent voting members of th	e governing body (Part	VI, line 1b)				4			12.	
ij	5	Total	number of individuals employed in caler	ndar year 2019 (Part V, I	line 2a)				5		1,	085.	
Activities &	6	Total	number of volunteers (estimate if necessa	ary)					6			90.	
ĕ	7a		unrelated business revenue from Part VII						7a		635,	441.	
	b	Net ur	nrelated business taxable income from F	orm 990-T, line 39					7b	-:	384,	330.	
						_		Prior Year		Curr	ent Ye	ar	
a	8	Contri	ibutions and grants (Part VIII, line 1h)	1	COPY	FOR	3	18,855,08	2.	304,	627,	698.	
Revenue	9		am service revenue (Part VIII, line 2g)		PUBLIC INS			429,44	6.		407,	645.	
eve	10		ment income (Part VIII, column (A), lines		PUBLIC IN	SPECTION		35,351,33	9.	40,	819,	706.	
~	11		revenue (Part VIII, column (A), lines 5, 6)	-		1,053,09	2.		910,	707.	
	12		revenue - add lines 8 through 11 (must e				3	55,688,95	9.	346,	765,	756.	
	13		s and similar amounts paid (Part IX, colur	•			1	36,947,52	3.	142,	114,	349.	
	14		its paid to or for members (Part IX, colum						0.			0.	
'n	4.5		es, other compensation, employee benef				1	28,269,42	2.	134,	315,	489.	
Expenses	16 a		ssional fundraising fees (Part IX, column					143,745.			318,	747.	
ē	h		fundraising expenses (Part IX, column (D		892,009								
ш	17		expenses (Part IX, column (A), lines 11a	,,				78,282,13	3.	74,	803,	479.	
			expenses. Add lines 13-17 (must equal F					43,642,82				064.	
			nue less expenses. Subtract line 18 from					12,046,13		-4,			
-Se	19	IVEVE	ide less expenses. Subtract line to from	IIIIC IZ				ning of Current Y	_		of Yea		
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)					96,392,21					
\sse	21		liabilities (Part X, line 26)					96,975,51		412,			
ng t	22							99,416,69		887,			
	rt II		ssets or fund balances. Subtract line 21 t gnature Block	ITOM line 20	<u> </u>			<i>55</i> , 110,05	٠.	001,	202,		
			of perjury, I declare that I have examined this	return including accomp	anving sched	ules and statem	nents a	and to the hest of	my	knowledge	and he	lief it is	
true	e, corre	ect, and	complete. Declaration of preparer (other than	officer) is based on all info	rmation of whi	ich preparer has	s any kr	nowledge.	,	Milowiougo	una 50		
								04/0	9/2	0.21			
Sig	n	5	Signature of officer					Date		.021			
He	re		SUSAN K. URAHN		PRESTD	ENT & CE	\circ						
		_	ype or print name and title		TREBID								
			**	Preparer's signature		Date		Ch	:4	PTIN			
Paic	i		SLEE ARMSTRONG	,			/20	Check 21 self-employe	"	P0028	8838	3	
Pre	parer		. CD AND DISCONDES TITE			U±/U9	· / ∠ U						
Use	Only		,		. 10100	Firm's EIN ▶ 36-6055558 Phone no 215-561-4200							
Mar	, the		saddress ▶2001 MARKET STREET, SUITE iscuss this return with the preparer			<u> </u>		1 110110 1101					
_			Reduction Act Notice, see the separate	,	natiuctions)	<u>'</u>						No (2019)	
1 01	- ape	IWUIK	neudolion Act Nolice, see the separate	: แาอน นบนบทอ.						LOUI		(2019)	

Page 2 Form 990 (2019)

Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
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.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
	prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
5	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
_	
4a	(Code:) (Expenses \$219,491,479. including grants of \$64,826,907.) (Revenue \$116,250.) IMPROVING PUBLIC POLICY. WE STUDY AND PROMOTE NONPARTISAN POLICY
	SOLUTIONS FOR PRESSING AND EMERGING PROBLEMS AFFECTING THE
	AMERICAN PUBLIC AND THE GLOBAL COMMUNITY.
	AMERICAN PUBLIC AND THE GLOBAL COMMUNITY.
4b	(Code:) (Expenses \$ 50,761,352. including grants of \$ 42,100,000.) (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.
4	/O-1-
4C	(Code:) (Expenses \$41,691,947. including grants of \$35,187,442) (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 & NEEDIEGI CIIIZENS.
4d	Other program services (Describe on Schedule O.) ATTACHMENT 1
	(Expenses \$\frac{1}{291,395.}\)
4-	Total program convice expenses > 311 944 778

Form 990 (2019) Page **3**

Par	Checklist of Required Schedules		Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		162	No
1	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		3.5
_	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
•	complete Schedule D, Part III	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	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	_		
. •	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	l		37
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	X	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
ī	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		Х
122	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		21
12 a	Schedule D, Parts XI and XII.	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	1.24		
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		v	
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47	Х	
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	27	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX column (A) line 12 If "Vas " complete Schedule I. Parts I and II.	21	X	

Form 990 (2019) Page 4

Part	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	х	
24.5	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
_	through 24d and complete Schedule K. If "No," go to line 25a	24a	X	37
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	235		
20				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			77
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
·	"Yes," complete Schedule L, Part IV	28c		Х
20		29	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	21	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			3.5
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
~	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	000		
00	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	30		
31		27		v
00	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	X	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

Form **990** (2019)

Page 5 Form 990 (2019)

Par	tV 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			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 1,085			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country ▶ <u>ATTACHMENT 2</u>			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
vu	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
J	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		Х
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
C	required to file Form 8282?	7c		Х
A	If "Yes," indicate the number of Forms 8282 filed during the year			
	g , , ,	7e		Х
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
·	sponsoring organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
_	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	Х	
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 13 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X 3 supervision of officers, directors, trustees, or key employees to a management company or other person?.... 4 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Χ 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X Х 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes Χ 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, Χ 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . Χ 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Χ Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Х 12b rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c X 13 13 Did the organization have a written whistleblower policy?.......... X 14 14 Did the organization have a written document retention and destruction policy?..... 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? 15a X Χ 15b 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 Χ 16a 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 Section C. Disclosure ATTACHMENT List the states with which a copy of this Form 990 is required to be filed ▶_ 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Other (explain on Schedule O) Own website 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records ► LINDA BARTLETT 901 E STREET NW WASHINGTON, DC 20004

Form **990** (2019)

20

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **Independent Contractors**

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	box,	Position not check more than one k, unless person is both an cer and a director/trustee)				an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) REBECCA W. RIMEL	49.00										
PRESIDENT & CEO	1.00	Х		Х				1,239,530.	0.	56,276.	
(2) SUSAN K. URAHN	50.00							, ,			
EVP, CHIEF PROGRAM OFFICER	0.				X			682,599.	0.	47,013.	
(3)LINDA BARTLETT	50.00										
SVP, FINANCE AND CFO	0.			Х				501,071.	0.	60,047	
(4)JANICE BOGASH	50.00										
SVP, CHIEF ADMIN OFFICER	0.				Х			486,864.	0.	56,381	
(5) SALLY A. O'BRIEN	48.00										
SVP INSTITUTIONAL PARTNERSHIPS	2.00				Х			478,482.	0.	45,953	
(6) MELISSA SKOLFIELD	50.00										
SVP, COMMUNICATIONS	0.				Х			431,743.	0.	58,955	
(7)R. JAMES G. MCMILLAN	48.00										
SVP, GENERAL COUNSEL/CORP SEC	2.00			Х				443,510.	0.	42,217	
(8) TAMERA LUZZATTO	50.00										
SVP, GOVERNMENT RELATIONS	0.					Х		401,764.	0.	38,500	
(9) THOMAS DILLON	50.00										
VP & HEAD OF ENVIRONMENT	0.					Х		333,146.	0.	69,416	
(10) MICHAEL THOMPSON	50.00										
VP & HEAD OF GOVT. PERFORMANCE	0.					Х		333,399.	0.	64,011	
(11) THOMAS WATHEN	50.00										
VP, ENVIRONMENT	0.					Х	L	293,388.	0.	64,667	
(12) LESTER BAXTER	50.00										
VP, STRATEGY	0.					Х		290,325.	0.	63,772	
(13) SARAH SENNO	49.50										
VP, FINANCE AND TREASURER	.50			Х				227,030.	0.	55,577	
(14) SANDY FORD PEW	3.00								<u></u>		
DIRECTOR	0.	X						22,000.	0.	0	

Form **990** (2019)

6727RI 700P 4/9/2021

Page 8 Form 990 (2019)

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	yee	es,	and H	ligl	hest Compensat	ed Employees (d	continued)
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and Institutional	s per	ition more	e than or/truste	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		ee	trustee			nsate				
15) JAMES S. PEW DIRECTOR	3.00	Х				0.		22,000.	0.	0
16) JOSEPH N. PEW V	3.00								_	
DIRECTOR	0.	X						21,000.	0.	0
17) MARY CATHARINE PEW, M.D.	3.00	,						21 000		0
DIRECTOR	0.	X						21,000.	0.	0
18) R. ANDERSON PEW	3.00	3.7						10 000	0	0
DIRECTOR	3.00	X						19,000.	0.	0
19) ARISTIDES W. GEORGANTAS	$\frac{3.00}{0.}$							10 000	0	0
DIRECTOR	3.00	X						19,000.	0.	
20) J. HOWARD PEW II DIRECTOR	+							10 000	0	0
	3.00	X						18,000.	0.	
21) DORIS PEW SCOTT	$\frac{3.00}{0.}$							10 000	0	0
DIRECTOR	3.00	X						18,000.	0.	
22) ROBERT H. CAMPBELL DIRECTOR AND BOARD CHAIR	+	,		.,				11 000	0.	0
	3.00	X		Х				11,000.	0.	0
23) SUSAN W. CATHERWOOD DIRECTOR	0.	Х						7,000.	0.	0
24) HENRY P. BECTON, JR. DIRECTOR	3.00	Х						0	0.	0
25) CHRISTOPHER JONES	3.00									
DIRECTOR	0.	X						0	0.	0
1b Sub-total							\blacktriangleright	6,320,851.	0.	722,785.
c Total from continuation sheets to Part VII, S	ection A						\blacktriangleright	0.	0.	0.
d Total (add lines 1b and 1c)							▶	6,320,851.	0.	722,785.
2 Total number of individuals (including but not				d ab	OOV	e) who	re	ceived more than	\$100,000 of	
reportable compensation from the organizatio	n ▶	359								1 1
 3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched 4 For any individual listed on line 1a, is the organization and related organizations gradicities. 	ule J for suc sum of rep eater than	ch ind oortab \$15	lividu de c 50,00	با <i>اها</i> ارmo 00?	pen <i>If</i>	sation "Yes	aı ""	nd other compens	sation from the le J for such	Yes No
 individual. Did any person listed on line 1a receive or for services rendered to the organization? If "Y 	accrue co	mpen	satio	on f	ron	n any	un	related organization	on or individual	5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 115

Form **990** (2019)

Page 9

Part VIII Statement of Revenue

		Check if Schedule O contains a response	onse or note to any				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns 1a					
ď	b	Membership dues 1b					
Ě	С	Fundraising events 1c					
ar /	d	Related organizations 1d	282,148,631.				
ij	е	Government grants (contributions) 1e					
Si	f	All other contributions, gifts, grants,					
ē		and similar amounts not included above . 1f	22,479,067.				
5	g	Noncash contributions included in					
and Other Similar Amounts		lines 1a-1f 1g	\$ 665,570.				
ਭ (h	Total. Add lines 1a-1f	▶	304,627,698.			
			Business Code				
}	2a	901 E ST RENTAL REVENUE	531120	284,745.	284,745.		
<u>e</u>	b	CONFERENCE CENTER REVENUE	532000	6,650.	6,650.		
en	С	CONTRACT REVENUE	813000	116,250.	116,250.		
se.	d						
Revenue	е						
-	f	All other program service revenue					
	g	Total. Add lines 2a-2f	▶	407,645.			
	3	Investment income (including dividends	, interest, and				
		other similar amounts)		26,851,988.			26,851,988
	4	Income from investment of tax-exempt bor	d proceeds . 🕨	0.			
	5	Royalties		470.			470
		(i) Real	(ii) Personal				
	6a	Gross rents 6a 228,464	•				
	b	Less: rental expenses 6b 114,160					
	С	Rental income or (loss) 6c 114,304					
	d	Net rental income or (loss)		114,304.			114,304
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a 1,463,325,715	•				
ne	b	Less: cost or other basis					
venue		and sales expenses 7b 1,449,357,997	•				
O	С	Gain or (loss)					
Other R	d	Net gain or (loss)		13,967,718.			13,967,718
ĭ h	8a	Gross income from fundraising					
0		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	0.				
	b	Less: direct expenses 8b					
	С	Net income or (loss) from fundraising event	s ▶	0.			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities	s ▶	0.			
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
	b	Less: cost of goods sold					
	С	Net income or (loss) from sales of inventory		0.			
			Business Code				
ne	11a	PARKING GARAGE REVENUE - MGMT CO	812930	769,425.		635,441.	133,984
ē	b	REALIZED FOREIGN CURRENCY GAIN	900099	26,369.			26,369
Şe,	С	WORKERS COMP DIVIDEND	900099	139.			139
Revenue	d	All other revenue					
,	е	Total. Add lines 11a-11d	▶	795,933.			
	12	Total revenue. See instructions		346,765,756.	407,645.	635,441.	41,094,972

Part IX Statement of Functional Expenses

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

360	Check if Schedule O contains a response or note to any line in this Part IX								
<u></u>			(B)						
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
	Grants and other assistance to domestic organizations		САРСПОСО	general expenses	САРСПОСО				
•	and domestic governments. See Part IV, line 21	133,726,047.	133,726,047.						
2	Grants and other assistance to domestic								
_	individuals. See Part IV, line 22	0.							
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16	8,388,302.	8,388,302.						
4	Benefits paid to or for members	0.							
5	Compensation of current officers, directors,	5 104 000	1 500 040	2 051 100	521 050				
	trustees, and key employees	5,104,282.	1,522,040.	3,051,192.	531,050.				
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and	0.							
_	persons described in section 4958(c)(3)(B)	98,795,148.	81,757,306.	13,549,902.	3,487,940.				
	Other salaries and wages	70,773,140.	01,737,300.	13,343,302.	3,407,740.				
8	Pension plan accruals and contributions (include	10,553,236.	8,688,713.	1,518,560.	345,963.				
^	section 401(k) and 403(b) employer contributions)	11,809,851.	9,541,970.	1,793,071.	474,810.				
	Other employee benefits	8,052,972.	6,503,809.	1,258,458.	290,705.				
10	Payroll taxes	3,00=,01=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	Management	0.							
	Legal	984,543.	237,724.	746,588.	231.				
	Accounting	420,637.		420,637.					
	Lobbying	2,684,509.	2,684,509.						
	Professional fundraising services. See Part IV, line 17	318,747.			318,747.				
	Investment management fees	1,726,807.		1,726,807.					
	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O.)	17,830,973.	15,791,743.	1,912,030.	127,200.				
12	Advertising and promotion	2,504,898.	2,504,548.		350.				
13	Office expenses	3,631,258.	3,237,097.	318,775.	75,386.				
14	Information technology	13,870,197.	11,869,979.	1,627,719.	372,499.				
15	Royalties	0.	4,688,376.	757 011	160 460				
16	Occupancy	5,608,655. 5,878,712.	5,630,287.	757,811. 138,964.	162,468.				
17	Travel	5,0/0,/12.	5,030,207.	130,904.	109,401.				
18	Payments of travel or entertainment expenses	129,495.	129,495.						
40	for any federal, state, or local public officials	2,404,530.	1,984,004.	369,800.	50,726.				
19	Conferences, conventions, and meetings	5,274,213.	4,347,576.	729,885.	196,752.				
20 21	Interest	0.	, = = : , 3 : 3 :	, 000 .					
22	Depreciation, depletion, and amortization	8,113,763.	6,779,807.	1,027,133.	306,823.				
23	Insurance	463,969.	94,547.	365,143.	4,279.				
24	Other expenses. Itemize expenses not covered		_						
	above (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
•	HONORARIA	420,474.	420,474.						
_	PMTS FOR OFFICIALS UNDER \$1K	98,426.	98,426.						
•	DUES AND SUBSCRIPTIONS	1,433,804.	1,317,999.	79,186.	36,619.				
c	PARKING GARAGE	1,276,971.		1,276,971.					
	All other expenses	46,645.	211 044 770	46,645.	6 000 000				
_	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	351,552,064.	311,944,778.	32,715,277.	6,892,009.				
20	organization reported in column (B) joint costs								
	from a combined educational campaign and fundraising solicitation. Check here								
	following SOP 98-2 (ASC 958-720)	0.							
		0.			Form 990 (2010)				

Form 990 (2019) Page **11**

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this R	Part X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	932,946.	1	816,396.
	2	Savings and temporary cash investments	3,993,102.	2	2,489,272.
	3	Pledges and grants receivable, net	24,502,252.	3	26,238,122.
	4	Accounts receivable, net	402,601.	4	304,831.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	0.
ţ	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
As	9	Prepaid expenses and deferred charges	3,357,057.	9	3,610,466.
	-	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 262,479,985.			
	b	Less: accumulated depreciation		10c	190,791,105.
	11	Investments - publicly traded securities	1,059,539,395.	11	1,064,995,452.
	12	Investments - other securities. See Part IV, line 11	0.	12	0.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	7,622,338.	15	9,976,460.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,296,392,214.	16	1,299,222,104.
	17	Accounts payable and accrued expenses	15,834,262.	17	16,282,515.
	18	Grants payable	165,714,700.	18	166,358,523.
	19	Deferred revenue		19	0.
	20	Tax-exempt bond liabilities	148,133,155.	20	142,539,861.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	1,416,629.
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Ē		controlled entity or family member of any of these persons	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	_	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	66,522,528.	25	85,421,635.
	26	Total liabilities. Add lines 17 through 25	396,975,518.	26	412,019,163.
es		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	843,000,578.	27	834,445,705.
Fund Balances	27 28	Net assets with donor restrictions.	56,416,118.	28	52,757,236.
Б	20		30,410,110.	28	32,737,230.
r Fu		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
s or	29	Capital stock or trust principal, or current funds		29	
Assets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	899,416,696.	32	887,202,941.
	33	Total liabilities and net assets/fund balances	1,296,392,214.	33	1,299,222,104.
					Form 990 (2019)

Form **990** (2019)

Page **12** Form 990 (2019)

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		46,7		
2	Total expenses (must equal Part IX, column (A), line 25)	2		51,5		
3	Revenue less expenses. Subtract line 2 from line 1	3		-4,7		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8	99,4		
5	Net unrealized gains (losses) on investments	5		6,8	45,0	08.
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 on Schedule O)	9		14,2	72,4	55.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	8	87,2	02,9	41.
Part	·					
	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	xplair	ın			
	Schedule O.					3.5
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	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	ted o	n a			
	separate basis, consolidated basis, or both: Separate basis Separate basis Separate basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	_		2c	Х	
	the audit, review, or compilation of its financial statements and selection of an independent accounts			20		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	kpiain	OH			
2.0		th in	tho			
sa		u1 1/1	uie	3a		Х
h		erac	the			
D	· · · · · · · · · · · · · · · · · · ·	_		3b		
	As a result of a federal award, was the organization required to undergo an audit or audits as set for Single Audit Act and OMB Circular A-133?	ergo	the	3a 3b		Х

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.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization THE PEW CHARITABLE TRUSTS Employer identification number 56-2307147

Pa	rt I	Reason for Public Cha	rity Status (All o	organizations must c	omplet	e this pa	art.) See instructions	
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ).)	
3		A hospital or a cooperative	hospital service o	rganization described	n sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st	tate:					
5		An organization operated f	for the benefit of	a college or universit	y owne	d or ope	rated by a governme	ntal unit described in
		section 170(b)(1)(A)(iv). (C						
6		A federal, state, or local go	J			•	,,,,,,,	
7	Х	An organization that norma	ally receives a sub	stantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public
		described in section 170(b)		·				
8		A community trust describe	-		-			
9		An agricultural research org	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	I in conjunction with a	land-grant college
		or university or a non-land-	grant college of ag	riculture (see instruct	ions). E	nter the i	name, city, and state of	f the college or
		university:						
10		An organization that norma receipts from activities rela support from gross investmacquired by the organizatio	ted to its exempt finent income and un nent income and un n after June 30, 19	unctions - subject to on the state of the subject to one of the subject to the subject to the subject to one of the subject to one o	certain e able inco (a)(2). (0	exception ome (less Complete	s, and (2) no more that s section 511 tax) from Part III.)	n 331/3% of its
11		An organization organized	•	•	•		, ,, ,	
12		An organization organized	•	•				
		of one or more publicly su						
		Check the box in lines 12a t	•	• •			•	
а	L	Type I. A supporting orga	•	•	•		• ,,	,, , , , ,
		the supported organization				ajority of	the directors or truste	es of the
	Г	supporting organization.	-					()
b	L	Type II. A supporting org	•				· · ·	
		control or management of		=	tne sam	e person	is that control or man	age the supported
_	Г	organization(s). You must	•		ممالممد	ti	n with and functional	lu into aroto d with
С	L	☐ Type III functionally integ						iy integrated with,
	Г	its supported organization		· ·				tad arganization(a)
d	_	Type III non-functionally that is not functionally interest.			-			- ' '
		requirement (see instruct			-			an allenliveness
е	Г	Check this box if the orga		-				I. Typo III
C	_	functionally integrated, or						i, Type iii
f	Fn	ter the number of supported	• •			Jigariizai	ion.	
a		ovide the following information	_					
		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
	•		, ,	(described on lines 1-10	,	ur governing	support (see	other support (see
				above (see instructions))	Yes	ment?	instructions)	instructions)
(A)								
(B)								
(C)								
(D)								
(E)								
Tota	al							

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

Schedule A (Form 990 or 990-EZ) 2019 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							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	694,845,000.	308,831,757.	290,454,131.	318,855,082.	304,627,698.	1,917,613,668.	
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	694,845,000.	308,831,757.	290,454,131.	318,855,082.	304,627,698.	1,917,613,668.	
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)						1,466,256,473.	
6	Public support. Subtract line 5 from line 4						451,357,195.	
	tion B. Total Support	(-) 0045	(1-) 0040	(-) 0047	(4) 0040	(-) 0040	(0 T-+-l	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
7 8	Amounts from line 4. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	14,798,377.	21,407,836.	28,730,978.	318,855,082. 29,225,318.	304,627,698. 27,080,922.	121,243,431.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	144,710.	503,318.	314,790.	182,536.	160,492.	1,305,846.	
11	Total support. Add lines 7 through 10						2,040,162,945.	
12	Gross receipts from related activities, etc. (s	see instructions) .				12	4,038,694.	
13	First five years. If the Form 990 is forganization, check this box and stop here	<u> </u>		d, third, fourth,	or fifth tax yea	ar as a section	501(c)(3) ▶	
Sec	tion C. Computation of Public Sup							
14	Public support percentage for 2019 (li		•			14	22.12%	
15	Public support percentage from 2018					15	22.96 %	
16a	33 1/3% support test - 2019. If the org	•		•		•		
	box and stop here. The organization quantum and the stop here.							
b	331/3% support test - 2018. If the org							
47-	this box and stop here. The organization			_				
1/a	7a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b	10%-facts-and-circumstances test - 2 15 is 10% or more, and if the orga Explain in Part VI how the organization supported organization	2018. If the organization meets on meets the "	ganization did no the "facts-and facts-and-circum	ot check a box -circumstances estances" test.	on line 13, 16 test, check th The organizatio	a, 16b, or 17a, nis box and st on qualifies as a	and line op here. a publicly	
18	Private foundation. If the organization instructions						▶□	

Schedule A (Form 990 or 990-EZ) 2019 Page 3

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support					, 	
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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					<u> </u>	
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					<u> </u>	
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	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.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	or the organiza	tion's first, seco	nd, third, fourth.	, or fifth tax v	ear as a section	501(c)(3)
	organization, check this box and stop here .	· ·	•		•		` ` ` `
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2019 (line 8,			mn (f))		15	%
16	Public support percentage from 2018 Scheo					16	%
	tion D. Computation of Investment						
17	Investment income percentage for 2019 (lin			13, column (f))		17	%
18	Investment income percentage from 2018 S					18	%
	331/3% support tests - 2019. If the org						
. J u	17 is not more than 331/3%, check this						
b	331/3% support tests - 2018. If the orga			•		•	
	line 18 is not more than 331/3%, check				•		
20	Private foundation. If the organization d		•	•			

Schedule A (Form 990 or 990-EZ) 2019 Page 4

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.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, t determine whether the organization had excess business holdings.)

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Part	N Supporting Organizations (continued)		\ <u>'</u>	
			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)	44.		
	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 Part VI .	11c		
Secti	on B. Type I Supporting Organizations		V	NIa
			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 the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
Casti	•	3		
	on E. Type III Functionally Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	itrucu	ons).	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instruc		
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
2	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
3 a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
~	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Page 6 Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	ization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 (expla	in in Part VI). See
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	y integra	ated Type III supporting	g organization (see
instructions).			

Schedule A (Form 990 or 990-EZ) 2019 Page **7**

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organia	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 2019 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-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019 Page **8**

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

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 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 22.12 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

Schedule A (Form 990 or 990-EZ) 2019

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

PROJECTS SEEK, 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 73 PERCENT OF PROPOSALS INTO FULLY

EXECUTED GRANTS IN FISCAL YEAR 2020.

- 3. SOURCES OF SUPPORT. PEW IS SUPPORTED BY A DIVERSE AND REPRESENTATIVE GROUP OF DONORS. DURING FISCAL YEAR 2020, PEW RECEIVED GRANTS AND CONTRIBUTIONS FROM 51 DONORS, INCLUDING INDIVIDUALS, PUBLIC CHARITIES, PRIVATE FOUNDATIONS, AND CORPORATIONS. APPROXIMATELY 61 PERCENT OF THESE DONORS WERE NEW CONTRIBUTORS TO PEW, AND APPROXIMATELY 33 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

Schedule A (Form 990 or 990-EZ) 2019 Page **8**

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

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 2020, PEW RELEASED 65 RESEARCH REPORTS AND SPONSORED 64 CONFERENCES AND SEMINARS ON SUBJECTS SUCH AS TRENDS IN ANTIBIOTIC RESISTANCE, CONSUMER FINANCE, 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 NONPROFITS; OR

					ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCOME					
DESCRIPTION	2015	2016	2017	2018	2019	TOTAL
EMPLOYEE PARKING REVENUE	144,710.	168,049.	159,067.	175,306.	133,984.	781,116.
OTHER REVENUE		134.				134.
REALIZED FOREIGN CURRENCY G/L		335,135.	155,723.	-49,565.	26,369.	467,662.
GAIN FROM INSURANCE CLAIM				56,795.		56,795.
WORKERS COMP DIVIDEND					139.	139.
TOTALS	144,710.	503,318.	314,790.	182,536.	160,492.	1,305,846.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

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

2019

Employer identification number Name of the organization THE PEW CHARITABLE TRUSTS 56-2307147 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 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** \mid X \mid 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, 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 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) (2019)

Employer identification number 56-2307147

			56-230/14/
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
1_		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	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
5		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_		\$\$	Person X Payroll Noncash (Complete Part II for

noncash contributions.)

Employer identification number 56-2307147

art I Contr	/LA	7-3	/-N
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$	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 I	Contributors (see instructions). Use duplicate copie		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$ 300,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$ 1,000,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$ 3,543,826.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$ 998,354.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 56-2307147

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
19		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
20		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
21		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
22		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
23		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
24		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 56-2307147

			30 2307117
Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30			Person X Payroll

Noncash (Complete Part II for noncash contributions.)

5,944,200.

\$

Employer identification number

			56-230/14/
Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33		\$\$	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		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35		\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36		\$ 2,569,775.	Person X Payroll Noncash

(Complete Part II for noncash contributions.)

Employer identification number

			56-2307147
Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37		\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38		\$\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39		\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
40		\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41		\$ 18,522,574.	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.)

Name of organization THE PEW CHARITABLE TRUSTS

Employer identification number 56-2307147

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
17	INVESTMENT SECURITIES		
		\$665,570.	01/23/2020
(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
		\$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization THE PEW CHARITABLE TRUSTS **Employer identification number** 56-2307147 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I

(e) Transfer of gift

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "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 under section 501(h)): Complete Part II-A. Do not complete Part II-B.

• Section 50 f(c)(5) organizations	s that have NOT filed Form 3700 (electi	on under section 50 f(f))). Complete Fart II-b. Do no	it complete Fart II-A.
If the organization answered "Yes,' Tax) (see separate instructions), the	" on Form 990, Part IV, line 5 (Proxy en	Tax) (see separate in	nstructions) or Form 990-l	EZ, Part V, line 35c (Prox
 Section 501(c)(4), (5), or (6) org 				
Name of organization			Employer ide	ntification number
THE PEW CHARITABLE TRU	STS		56-230'	7147
Part I-A Complete if the	organization is exempt under	section 501(c) or	is a section 527 orgai	nization.
1 Provide a description of the	e organization's direct and indirect p	political campaign ac	ctivities in Part IV. (see ir	nstructions for
definition of "political campa	aign activities")			
2 Political campaign activity e	expenditures (see instructions)		\$	
	I campaign activities (see instruction			
Part I-B Complete if the	organization is exempt under s	section 501(c)(3).		
1 Enter the amount of any ex	cise tax incurred by the organization	n under section 495	5, , , , , ▶\$	
2 Enter the amount of any ex	cise tax incurred by organization m	anagers under secti	on 4955 ► \$	
3 If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		. Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C Complete if the	organization is exempt under	section 501(c), ex	cept section 501(c)(3	5).
1 Enter the amount directly e	expended by the filing organization	for section 527 ex	empt function	
activities			▶\$	
	ng organization's funds contributed			
527 exempt function activit	ties			
	enditures. Add lines 1 and 2. Ent			
	le Form 1120-POL for this year?			Yes No
5 Enter the names, addresses	s and employer identification numb	er (EIN) of all section	on 527 political organiza	ations to which the filing
	its. For each organization listed, en			
	tributions received that were prom			
	ind or a political action committee (1	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds. If none, enter -0	contributions received and promptly and directly
			Tarias: Il Tioris, Silior 5 :	delivered to a separate
				political organization. If
				none, enter -0
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
		I		

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

Sch	edule C (Form 990 or 990-EZ) 2019	THE PE	W CHARIT	TABLE TRUSTS		56-	2307147 Page 2
	Complete if the org section 501(h)).	anizatio	on is exen	npt under sectior	501(c)(3) and	l filed Form 5768 (el	
A				affiliated group (and excess lobbying expe		ach affiliated group me	mber's name,
В	Check ▶ if the filing organiz	ation che	cked box A	A and "limited contro	ol" provisions ap	oly.	
		on Lobb	ying Expend	ditures		(a) Filing organization's totals	(b) Affiliated group totals
b c d	Total lobbying expenditures to in Total lobbying expenditures to in Total lobbying expenditures (ad I Other exempt purpose expenditures) Total exempt purpose expenditures.	nfluence d lines 1a ures ures (ado	a legislative a and 1b) l lines 1c an	e body (direct lobbyi	ng)		
t	Lobbying nontaxable amount. columns.						
	If the amount on line 1e, column (a	or (b) is:		<u> </u>	is:		
	Not over \$500,000			amount on line 1e.			
	Over \$500,000 but not over \$1,000	00,000 \$100,000 plus 15% of the excess over \$500,000.					
	Over \$1,000,000 but not over \$1,50			us 10% of the excess			
	Over \$1,500,000 but not over \$17,0	000,000	\$225,000 plus 5% of the excess over \$1,500,000.				
	Over \$17,000,000		\$1,000,000				
_	Grassroots nontaxable amount	`	,				
	Subtract line 1g from line 1a. If						
	Subtract line 1f from line 1c. If z						
j	If there is an amount other th						
	reporting section 4911 tax for the						. Yes No
	(Comp oversite tions that			aging Period Under			mana balaw
	(Some organizations that			te instructions for l	-		imns below.
		Lobb	ying Exper	nditures During 4-Ye	ear Averaging Pe	eriod	
	Calendar year (or fiscal year beginning in)	(a)	2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2019

d Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).						
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)			
	cription of the lobbying activity.	Yes	No		Amou	nt	
1	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:	37					
а	Volunteers?	X					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	X				11	703
С	Media advertisements?	X					, 703
d	Mailings to members, legislators, or the public?	X			1		342
е	Publications, or published or broadcast statements?	X					210
f	Grants to other organizations for lobbying purposes?	X					288
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X			/ -		915
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X				,,,,,
i :	Other activities?				4,9	88,	611
j 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		<u> </u>		
za b	If "Yes," enter the amount of any tax incurred under section 4912						
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ectio	n		
	501(c)(6).						
					-	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures fro						
Pa	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" answered "Yes."	OR (E) Pai	T III-A	, line 3	, IS	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou	ınts (of				
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	of th	ne				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible le	obbyir	ng	_			
_	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
	Supplemental Information ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d arou	ın liet	\· Dart	II_A lin	oc 1	and
	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.	u giot	יפוו קג), i ait	II-7A, IIII	C3 1	anu
_ (0	33 mondono), and rath 2, mo 11, 1100, complete the part of any additional members						
SEI	PAGE 4						

Schedule C (Form 990 or 990-EZ) 2019

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.

Department of the Treasury

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

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

Employer identification number THE PEW CHARITABLE TRUSTS 56-2307147 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 19,374,327. 3 Aggregate value of grants from (during year) 178,962,546. Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 X | Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose X Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a а 2b 2c Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: ▶ \$

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

Page 2 Schedule D (Form 990) 2019

Using the organization's acquisition, accession, and other records, check any of the following that make significant use of it collection items (check all that apply): a Public exhibition b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in PaxIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
Public exhibition By Scholarly research Cypreservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in PaxIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in PaXIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
 Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in PaXIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in PaXIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form
000 Part V line 21
990, Part X, line 21.
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not
included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Amount
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? X Yes N
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII
Part V Endowment Funds.
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back
1a Beginning of year balance
b Contributions
c Net investment earnings, gains,
and losses
d Grants or scholarships
e Other expenditures for facilities
and programs
f Administrative expenses
g End of year balance
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment %
b Permanent endowment >%
c Term endowment ▶%
The percentages on lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes N
organization by.
(i) Unrelated organizations 3a(i)
(ii) Related organizations
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value
(investment) (other) depreciation 1a Land 90,000,000. 90,000,000
b Buildings 131,480,103. 37,644,137. 93,835,966
c Leasehold improvements 3,266,838. 2,132,730. 1,134,108
d Equipment. 37,733,044. 31,912,013. 5,821,033
e Other
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Page 3 Schedule D (Form 990) 2019

Part VII	Investments - Other Securities.		Dart IV line 44h Coe Ferre 000	Dant V. Ha - 40
	Complete if the organization answered			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
(1) Financia	al derivatives			
	held equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII				
	Complete if the organization answered	l "Yes" on Form 990	, Part IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation	on:
(1)			,	
(2)				
(3)				
(4)				
<u>(5)</u>				
(6)				
(7)				
(8)				
(9)	(h) must sweet Fermi 000 Best V and (B) line 40)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.	l "Voo" on Form 000	Dort IV line 11d See Form 000	Dort V line 15
	Complete if the organization answered		n, Part IV, line 11d. See Form 990,	
	(a) De	scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B) l	ine 15.)	<u></u> ▶	
Part X	Other Liabilities.			
	Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11e or 11f. See Form	n 990, Part X,
	line 25.			
1.	(a) Descrip	tion of liability		(b) Book value
(1) Feder	al income taxes			
(2) OPER	ATING LEASE LIABILITIES			3,334,857.
(3) TENA	NT SECURITY DEPOSITS			21,317.
	REST RATE SWAPS			42,183,295.
	UED PENSION OBLIGATION			39,882,166.
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)			85,421,635.
	or uncertain tax positions. In Part XIII, provide the			
∠. Liability To	n uncertain tax positions. In Fait Alli, provide the	text of the foothore to	me organization's illiancial statements tha	at reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

PAGE 41

Schedule D (Form 990) 2019 Page 4

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	357,908,698.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	12,872,649.
3	Subtract line 2e from line 1	3	345,036,049.
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 1,726,807.		
b	Other (Describe in Part XIII.)	4-	1,729,707.
C	Add lines 4a and 4b	4c 5	346,765,756.
5 Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	_	310,703,730.
rait	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		783,677,260.
1	Total expenses and losses per audited financial statements	1	763,077,200.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments 2b Other losses 2c 427,588,244	-	
C	Other 10330311111111111111111111111111111111		
d	Other (Describe in Lar Alli.)	2e	432,343,637.
e	Add lines 2a through 2d	3	351,333,623.
3 4	Subtract line 2e from line 1		, ,
4 a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,726,807.		
a b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	218,441.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.).	5	351,552,064.
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F		
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
SEE	PAGE 5		

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	2D

REVENUE OF CONSOLIDATED SUBSIDIARY		4,331,711
NET PERIODIC BENEFIT COST OTHER THA	AN SERVICE COST	1,625,426
UNREALIZED FOREIGN EXCHANGE GAIN		70,504
ר	TOTAL	6,027,641
SCHEDULE D, PART XI, LINE 4B		
SUB-TENANT EXPENSES (RECLASS)		(69,289)
EXPENSES RELATED TO 901 E NON-501(C	C)(3)/LIKE-MINDED	
TENANTS (RECLASS)		(44,871)
PARKING GARAGE SALES TAX (RECLASS)		117,060
3	TOTAL	2,900

Part XIII Supplemental Information (contin	nued)		
SCHEDULE D, PART XII, LINE 2C			
CHANGE IN FAIR VALUE OF BENEFICIAL	INTEREST IN TRUSTS	411,090,751	
CHANGE IN FAIR VALUE OF INTEREST R.	ATE SWAPS	12,481,856	
OTHER CHANGES IN POSTRETIREMENT BE	NEFITS	4,015,637	
	TOTAL	427,588,244	
SCHEDULE D, PART XII, LINE 2D			
EXPENSES OF CONSOLIDATED SUBSIDIAR	Y	48,895,767	
INTERCOMPANY TRANSACTIONS ELIMINAT	ED IN CONSOLIDATION	(42,100,000)	
SUB-TENANT EXPENSES (RECLASS)		69,289	
EXPENSES RELATED TO 901 E NON-501(C)(3)/LIKE-MINDED		
TENANTS (RECLASS)		44,871	
REVERSAL OF PRIOR YEAR GRANT EXPEN	SE	(2,154,534)	
	TOTAL	4,755,393	
SCHEDULE D, PART XII, LINE 4B			
NET PERIODIC BENEFIT COST OTHER TH.	AN SERVICE COST	(1,625,426)	
PARKING GARAGE SALES TAX (RECLASS)		117,060	
,	TOTAL	(1,508,366)	

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Form 990, Part IV, line 14b.

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

Employer identification number

56-2307147 THE PEW CHARITABLE TRUSTS General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I

	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No									
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.									
3	Activities per Region. (The following Part I, line 3 table can be duplicated if additional space 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)	EAST ASIA AND THE PACIFIC	0.	0.	INVESTMENTS		34,000.				
(2)	EUROPE	0.	0.	INVESTMENTS		160,000.				
(3)	CENTRAL AMERICA/CARIBBEAN	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	27,000.				
(4)	CENTRAL AMERICA/CARIBBEAN	0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLOWS	735,000.				
(5)	EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	413,000.				
(6)	EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	HEALTH IMPACT	9,000.				
(7)	EAST ASIA AND THE PACIFIC	2.	5.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	1,494,000.				
(8)	EAST ASIA AND THE PACIFIC	2.	14.	PROGRAM SERVICES	WILDERNESS PROTECTION	1,045,000.				
(9)	EUROPE	0.	0.	PROGRAM SERVICES	BROADBAND RESEARCH	32,000.				
<u>(10)</u>	EUROPE	0.	0.	PROGRAM SERVICES	CONSERVATION SCIENCE	17,000.				
<u>(11)</u>	EUROPE	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	1,385,000.				
<u>(12)</u>	EUROPE	0.	0.	PROGRAM SERVICES	EVIDENCE INITIATIVE	277,000.				
<u>(13)</u>	EUROPE	0.	0.	PROGRAM SERVICES	GOVERNMENT MANAGEMENT	20,000.				
<u>(14)</u>	EUROPE	0.	0.	PROGRAM SERVICES	HEALTH CARE PRODUCTS	4,000.				
<u>(15)</u>	EUROPE	0.	0.	PROGRAM SERVICES	HEALTH IMPACT	7,000.				
<u>(16)</u>	EUROPE	0.	0.	PROGRAM SERVICES	HEALTH PROGRAMS	33,000.				
<u>(17)</u>		0.	4.	PROGRAM SERVICES	PARTNERSHIPS & SUPPORT	463,000.				
3a	Subtotal	4.	23.			6,155,000.				
b	Total from continuation									
	sheets to Part I	3.	37.			15,256,302.				
С	Totals (add lines 3a and 3b)	7.	60.			21,411,302.				

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

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

THE PEW CHARITABLE TRUSTS

Employer identification number 56-2307147

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990 Part IV line 14h

	rollinggo, Faltiv, line 14t	J.						
	For grantmakers. Does the orgother assistance, the grantees' award the grants or assistance?	eligibility for t			tion criteria used to	X Yes No		
	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.							
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space 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	(f) Total expenditures for and investments in the region		
(1)	EUROPE	2.	29.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	5,156,000.		
(2)	EUROPE	0.	0.	PROGRAM SERVICES	RESULTS FIRST	12,000.		
(3)	MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	5,000.		
(4)	MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	INFORMATION PROGRAM	5,000.		
(5)	MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	1,000.		
(6)	NORTH AMERICA	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	66,000.		
(7)	NORTH AMERICA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	336,000.		
(8)	NORTH AMERICA	0.	0.	PROGRAM SERVICES	RESULTS FIRST	2,000.		
(9)	NORTH AMERICA	0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLOWS	8,000.		
(10)	NORTH AMERICA	0.	0.	PROGRAM SERVICES	STATE CAMPAIGNS	20,000.		
(11)	RUSSIA AND NEIGHBORING STATES	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	2,000.		
. ,								
(12)	SOUTH AMERICA	0.	0.	PROGRAM SERVICES	CONSERVATION SCIENCE	5,000.		
` /								
(13)	SOUTH AMERICA	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	78,000.		
(,						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(14)	SOUTH AMERICA	0.	0.	PROGRAM SERVICES	HEALTH IMPACT	2,000.		
(· * /		0.	<u> </u>			2,000.		
(15)	SOUTH AMERICA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	471,000.		
(13)	DOUTH AMERICA	0.	0.	INCOMMI DERVICES	INOIDCITING OCEAN DIFE	4/1,000.		
(1E)	COURT AMERICA		2	DDOCDAM CEDVICES	COUCLADO AND DELLOWS	0.000		
(16)	SOUTH AMERICA	0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLOWS	9,000.		
/4 - \		_	_					
(17)	SOUTH AMERICA	1.	8.	PROGRAM SERVICES	WILDERNESS PROTECTION	670,000.		
3 2	Subtotal					I .		

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

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Total from continuation sheets to Part I Totals (add lines 3a and 3b)

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Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

Name	of the organization				Employer identific	cation number
THE	PEW CHARITABLE TRUSTS				56-23071	47
Par	General Information o Form 990, Part IV, line 14b		Outside the	United States. Compl	ete if the organization	answered "Yes" or
1	For grantmakers. Does the orgother assistance, the grantees' award the grants or assistance?	eligibility for t	he grants or	assistance, and the selec	ction criteria used to	X Yes No
2	For grantmakers. Describe in Foutside the United States.	Part V the org	anization's pro	ocedures for monitoring t	the use of its grants ar	nd other assistance
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	pace 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)	SOUTH ASIA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	1,000.
(2)	SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	5,000.
(3)	SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	14,000.
(4)	CENTRAL AMERICA/CARIBBEAN	0.	0.	GRANTMAKING		143,813.
(5)	EAST ASIA AND THE PACIFIC	0.	0.	GRANTMAKING		5,119,660.
(6)	EUROPE	0.	0.	GRANTMAKING		750,817.
(7)	NORTH AMERICA	0.	0.	GRANTMAKING		1,626,877.
(8)	SOUTH AMERICA	0.	0.	GRANTMAKING		647,135.
(9)	SUB-SAHARAN AFRICA	0.	0.	GRANTMAKING		100,000.
<u>(10)</u>						
<u>(11)</u>						
<u>(12)</u>						
<u>(13)</u>						
<u>(14)</u>						
<u>(15)</u>						
<u>(16)</u>						
<u>(17)</u>						
3a b	Subtotal Total from continuation					

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

Schedule F (Form 990) 2019

sheets to Part I c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2019

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990										
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
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)			CENTRAL AMERICA AND THE	POLICY	43,813.	WIRE					
(2)			CENTRAL AMERICA AND THE	POLICY	100,000.	WIRE					
(3)			EAST ASIA/PACIFIC	POLICY	872,080.	ACH					
(4)			EAST ASIA/PACIFIC	POLICY	141,760.	ACH					
(5)			EAST ASIA/PACIFIC	POLICY	10,925.	ACH					
(6)			EAST ASIA/PACIFIC	POLICY	251,564.	WIRE					
(7)			EAST ASIA/PACIFIC	POLICY	565,175.	ACH					
(8)			EAST ASIA/PACIFIC	POLICY	676,565.	WIRE					
(9)			EAST ASIA/PACIFIC	POLICY	10,699.	WIRE					
(10)			EAST ASIA/PACIFIC	POLICY	100,000.	WIRE					
(11)			EAST ASIA/PACIFIC	MATCHING GIF	16,657.	WIRE					
(12)			EAST ASIA/PACIFIC	SPONSORSHIP	6,603.	WIRE					
(13)			EAST ASIA/PACIFIC	POLICY	1,070,087.	WIRE					
(14)			EAST ASIA/PACIFIC	POLICY	103,900.	WIRE					
(15)			EAST ASIA/PACIFIC	POLICY	50,018.	ACH					
(16)			EAST ASIA/PACIFIC	POLICY	609,540.	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
	Enter total number of other organizations or entities

Schedule F (Form 990) 2019

Part II			ations or Entities Outsi eived more than \$5,000. F					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	53,550.	ACH			
(2)			EAST ASIA/PACIFIC	POLICY	165,000.	WIRE			
(3)			EAST ASIA/PACIFIC	POLICY	36,280.	WIRE			
(4)			EAST ASIA/PACIFIC	POLICY	100,000.	WIRE			
(5)			EAST ASIA/PACIFIC	POLICY	50,000.	WIRE			
(6)			EAST ASIA/PACIFIC	POLICY	100,000.	ACH			
(7)			EAST ASIA/PACIFIC	POLICY	29,257.	WIRE			
(8)			EAST ASIA/PACIFIC	POLICY	100,000.	WIRE			
(9)			EUROPE/ICELAND/GREENLAND	POLICY	31,255.	WIRE			
(10)			EUROPE/ICELAND/GREENLAND	POLICY	40,000.	WIRE			
(11)			EUROPE/ICELAND/GREENLAND	POLICY	52,960.	WIRE			
(12)			EUROPE/ICELAND/GREENLAND	MATCHING GIF	10,388.	ACH			
(13)			EUROPE/ICELAND/GREENLAND	POLICY	23,949.	WIRE			
(14)			EUROPE/ICELAND/GREENLAND	POLICY	388,131.	WIRE			
(15)			EUROPE/ICELAND/GREENLAND	MATCHING GIF	9,473.	ACH			
(16)			EUROPE/ICELAND/GREENLAND	POLICY	33,862.	WIRE			

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exem	pt
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	>
	Enter total number of other organizations or entities	•

Schedule F (Form 990) 2019

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990										
	Part IV, line 15, for any r	ecipient who recei	ived more than \$5,000. F	ed more than \$5,000. Part II can be duplicated if additional space is needed.							
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	160,799.	WIRE					
(1)			EUROPE/ICEDAND/GREENDAND	FOLICI	100,755.	WIKE					
(2)			NORTH AMERICA	POLICY	551,541.	WIRE					
(3)			NORTH AMERICA	POLICY	33,600.	WIRE					
(4)			NORTH AMERICA	POLICY	418,713.	WIRE					
(5)			NORTH AMERICA	POLICY	199,936.	WIRE					
(6)			NORTH AMERICA	POLICY	118,683.	WIRE					
(7)			NORTH AMERICA	POLICY	199,904.	WIRE					
(8)			NORTH AMERICA	POLICY	95,000.	WIRE					
(9)			SOUTH AMERICA	POLICY	89,146.	ACH					
(10)			SOUTH AMERICA	POLICY	47,300.	WIRE					
(11)			SOUTH AMERICA	POLICY	333,720.	WIRE					
(12)			SOUTH AMERICA	POLICY	176,969.	WIRE					
(13)			SUB-SAHARAN AFRICA	POLICY	100,000.	WIRE					
(14)											
(15)											
(16)											
2 Ent	er total number of recipient org the IRS, or for which the grantee	e or counsel has prov	vided a section 501(c)(3) e	quivalency lette	er		.		23.		
3 Ent	er total number of other organize	zations or entities					▶		19.		

Schedule F (Form 990) 2019

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (e) Manner of (h) Method of (f) Amount of (g) Description valuation (book, FMV, recipients cash grant cash noncash of noncash disbursement assistance assistance appraisal, other) (1) SCIENTIFIC NORTH AMERICA 9,500. (2) (3) (4) (5) (6) (7) (8) (9) (10)

Schedule F (Form 990) 2019

(11)

(12)

(13)

(14)

(15)

(16)

(17)

(18)

Schedule F (Form 990) 2019 Page 4 Part IV Foreign Forms

ıaıı	1 ordigit 1 ortilis			
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)	Yes	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)	Yes	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)	Yes	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)	Yes	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)	Yes	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

Page 5 Schedule F (Form 990) 2019

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 OR 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 OR TO PROVIDE A BENEFIT TO ANY POLITICAL PARTY OR CANDIDATE; (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 GRANT FUNDS AND PROGRESS TOWARD ACCOMPLISHING THE

Schedule F (Form 990) 2019 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).

PURPOSES OF THE GRANT; (V) TO ALLOW PEW, AT PEW'S DISCRETION AND EXPENSE, TO CONDUCT EVALUATIONS AND AUDIT RECORDS RELATED TO THE GRANTEE'S GRANT-FUNDED ACTIVITIES 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.

Schedule F (Form 990) 2019 Page 5

Part V

Supplemental InformationProvide 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 G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Na T

Name of the organization					Employer Identification	on number
THE PEW CHARITABLE TRUSTS	alata if the argo	oizotion or	owered "	Vaa" on Farm 0	56-2307147	7
Form 990-EZ filers are not re	_			res on Form 9	90, Part IV, line 1	7.
1 Indicate whether the organization rai	<u> </u>			activities Check	all that apply	
	=		_			
u man cononations	6	, — com		non-government g		
b X Internet and email solicitations	f			government grant	S	
c X Phone solicitations	ç	j	cial fundra	ising events		
d X In-person solicitations						
 2a Did the organization have a written or key employees listed in Form 990 b If "Yes," list the 10 highest paid ind compensated at least \$5,000 by the), Part VII) or entit ividuals or entities	y in connec	ction with p	rofessional fundra	ising services?	X Yes No fundraiser is to be
					(v) Amount paid to	
(i) Name and address of individual	MIX A self-site .		ndraiser have	(iv) Gross receipts	(or retained by)	(vi) Amount paid to
or entity (fundraiser)	(ii) Activity		or control of outions?	from activity	fundraiser listed in	(or retained by) organization
		Yes	No		col. (i)	3
1		162	NO			
ATTACHMENT 1						
2						
3						
4						
5						
6						
· ·						
7						
•						
8						
9						
10						
Total	•				318,747.	
Total						it is assemble from
3 List all states in which the organiza registration or licensing.	illon is registered	or licensed	a to solicit	contributions of	nas been nouned	it is exempt from
	TT					
AL, AK, AR, CA, CO, CT, DC, FL, GA, HI		NID OII				
KS, KY, ME, MD, MA, MI, MN, MS, NV, NH OK, OR, PA, RI, SC, TN, UT, VA, WA, WV		, ND, OH,				
OK, OR, PA, RI, SC, IN, UI, VA, WA, WV	, W⊥ ,					

Schedule G (Form 990 or 990-EZ) 2019

Pa	rt l	Fundraising Events. Complet more than \$15,000 of fundra events with gross receipts gre	aising event contributi			
		9 . 0	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
<u>~</u>	3	Less: Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
# Exp	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses				
	10 11	Direct expense summary. Add line Net income summary. Subtract line	es 4 through 9 in coluine 10 from line 3, colu	mn (d)		
Pa			anization answered "\			reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes% No	Yes% No	
	7	Direct expense summary. Add line	es 2 through 5 in colu	mn (d)		
	8	Net gaming income summary. Su	btract line 7 from line	1, column (d)	>	
9 8	ì	Enter the state(s) in which the orgalis the organization licensed to configure (state of the configure of th	anization conducts gar duct gaming activities	in each of these state		Yes No
10a		Were any of the organization's gaming If "Yes," explain:				Yes No

Sched	ule G (Form 990 or 990-EZ) 2019
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	the state of the s
	amount of gaming revenue retained by the third party > \$
С	If "Yes," enter name and address of the third party:
	The state of the s
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ►\$
	Description of services provided ▶
	Director/officer
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2019

IL 60611

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		97,974.	
GRENZEBACH GLIER AND ASSOCIATES 401 N MICHIGAN AVENUE SUITE 2800 CHICAGO	CONSULTING	X		220,773.	

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2019

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-230714	<u> 1</u> 7
Part I General Information on Grants and	Assistanc	е				•	
 Does the organization maintain records to surthe selection criteria used to award the grants Describe in Part IV the organization's proced 	or assistand ures for mor	e? nitoring the use	of grant funds in th	e United States.			X Yes No
Part II Grants and Other Assistance to De Part IV, line 21, for any recipient the		_					es" on Form 990,
(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) ACTION WELLNESS							
1216 ARCH ST PHILADELPHIA, PA 19107	23-2446355	501(C)(3)	210,000.				CIVIC LIFE
(2) AHEDD							
3300 TRINDLE RD CAMP HILL, PA 17011	23-2052524	501(C)(3)	105,000.				CIVIC LIFE
(3) AIDS LAW PROJECT OF PENNSYLVANIA							
1211 CHESTNUT ST PHILADELPHIA, PA 19107	23-2576149	501(C)(3)	150,000.				CIVIC LIFE
(4) ALASKA ESKIMO WHALING COMMISSION							
PO BOX 570 BARROW, AK 99723	92-0081760	501(C)(3)	25,258.				POLICY
(5) ALASKA ESKIMO WHALING COMMISSION							
PO BOX 570 BARROW, AK 99723	92-0081760	501(C)(3)	99,390.				POLICY
(6) ALOHA UNITED WAY							
200 N VINEYARD BLVD HONOLULU, HI 96817	99-0073494	501(C)(3)	11,204.				POLICY
(7) AMERICAN BAR ASSOCIATION							
321 N CLARK STREET CHICAGO, IL 60654	36-0723150	501(C)(6)	41,173.				POLICY
(8) AMERICAN WHITEWATER							
PO BOX 1540 CULLOWHEE, NC 28723	23-7083760	501(C)(3)	40,000.				POLICY
(9) AMERICAN WHITEWATER							
PO BOX 1540 CULLOWHEE, NC 28723	23-7083760	501(C)(3)	20,000.				POLICY
(10) AMIGOS BRAVOS INC							
PO BOX 238 TAOS, NM 87571	85-0363268	501(C)(3)	15,000.				POLICY
(11) AMIGOS BRAVOS INC							
PO BOX 238 TAOS, NM 87571	85-0363268	501(C)(3)	25,000.				POLICY
(12) ANTARCTIC AND SOUTHERN OCEAN COALITION							
1320 19TH ST NW WASHINGTON, DC 20036	52-1287282	501(C)(3)	1,414,209.				POLICY
2 Enter total number of section 501(c)(3) and g		-					
3 Enter total number of other organizations list	ed in the line	1 table				<u> </u>	

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public 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	е				•	
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's process 	ts or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to		_					es" on Form 990,
(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) ANTI-DEFAMATION LEAGUE							
605 THIRD AVE NEW YORK, NY 10158	13-1818723	501(C)(3)	500,000.				CIVIC LIFE
(2) ARIZONA GAME AND FISH DEPARTMENT							
5000 WEST CAREFREE HWY PHOENIX, AZ 85086	86-6004791	STATE OF AZ	15,000.				POLICY
(3) ARIZONA STATE UNIVERSITY FOUNDATION							
5000 W CAREFREE HWY PHEONIX, AZ 85086	86-6051042	501(C)(3)	349,570.				POLICY
(4) ARIZONA STATE UNIVERSITY FOUNDATION							
PO BOX 876011 TEMPE, AZ 85278	86-6051042	501(C)(3)	254,698.				POLICY
(5) ATLANTIC SALMON FEDERATION INC							
PO BOX 807 CALAIS, ME 04619	13-2618801	501(C)(3)	244,452.				POLICY
(6) ATTIC YOUTH CENTER							
255 S 16TH ST PHILADELPHIA, PA 19102	23-3020071	501(C)(3)	180,000.				CIVIC LIFE
(7) AUBURN UNIVERSITY							
310 SAMFORD HALL AUBURN, AL 36849	63-6000724	STATE OF AL	146,746.				POLICY
(8) AUDUBON SOCIETY OF LINCOLN CITY							
310 SAMFORD HALL AUBURN, AL 36849	20-3795649	501(C)(3)	13,750.				POLICY
(9) AUDUBON SOCIETY OF PORTLAND							
5151 NW CORNELL ROAD PORTLAND, OR 97210	93-6026088	501(C)(3)	119,671.				POLICY
(10) BETHESDA PROJECT							
1628-30 SOUTH ST PHILADELPHIA, PA 19146	23-2209338	501(C)(3)	275,000.				CIVIC LIFE
(11) BLUE SPHERE FOUNDATION, INC.							
888 SEVENTH AVE 30TH FL NEW YORK, NY 10019	46-2746860	501(C)(3)	99,100.				POLICY
(12) BOSTON CHILDREN'S HOSPITAL							
300 LONGWOOD AVE BOSTON, MA 02115		501(C)(3)	225,000.				POLICY
2 Enter total number of section 501(c)(3) and	•	•					
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 Instructions for Form 990.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization	·					Employer identificati	on number	
THE PEW CHARITABLE TRUSTS	HE PEW CHARITABLE TRUSTS							
Part I General Information on Grants and	d Assistanc	е				<u> </u>		
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					X Yes No	
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		-			additional space is n		es" on Form 990,	
(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) BOSTON CHILDREN'S HOSPITAL								
300 LONGWOOD AVE BOSTON, MA 02115	04-2774441	501(C)(3)	60,000.				POLICY	
(2) BOYD RESEARCH LLC								
11 KENYON HILL ROAD CAMBRIDGE, NY 12816	82-3684222		89,320.				POLICY	
(3) BROAD STREET MINISTRY								
315 S BROAD ST PHILADELPHIA, PA 19107	20-2760310	501(C)(3)	227,000.				CIVIC LIFE	
(4) CALIFORNIA COUNTIES FOUNDATION								
1100 K ST SACRAMENTO, CA 95814	68-0017965	501(C)(3)	297,822.				POLICY	
(5) CALIFORNIA WILDERNESS COALITION								
PO BOX 11094 OAKLAND, CA 94611	51-0183228	501(C)(3)	82,000.				POLICY	
(6) CAPITAL RECOVERY CENTER								
1000 CHERRY ST. SE OLYMPIA, WA 98501	91-1465297	501(C)(3)	500,000.				POLICY	
(7) CAREER WARDROBE								
1822 SPRING GARDEN ST PHILADELPHIA PA 19130	23-2900156	501(C)(3)	125,000.				CIVIC LIFE	
(8) CARNEGIE ENDOWMENT FOR INTL PEACE								
1779 MASSACHUSETTS AVE WASHINGTON, DC 20036	13-0552040	501(C)(3)	641,020.				POLICY	
(9) CDC FOUNDATION								
600 PEACHTREE ST ATLANTA, GA 30308	58-2106707	501(C)(3)	148,258.				POLICY	
(10) CENTER FOR ADVOCACY RIGHTS OF THE ELDERLY								
1500 JFK BOULEVARD PHILADELPHIA, PA 19102	23-2075900	501(C)(3)	66,000.				CIVIC LIFE	
(11) CENTER FOR EMPLOYMENT OPPORTUNITIES								
50 BROADWAY NEW YORK, NY 10004	13-3843322	501(C)(3)	250,000.				CIVIC LIFE	
(12) CENTER FOR HEALTH PROGRESS								
1779 MASSACHUSETTS AVE WASHINGTON DC 20036	43-2007393	501(C)(3)	94,544.				POLICY	
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole				
3 Enter total number of other organizations list	ted in the line	1 table	<u> </u>			<u> </u>		
For Paperwork Reduction Act Notice, see the Instructi							edule I (Form 990) (2019)	

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants and	d Assistanc	е				'	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	ce?	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_			-		es" 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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CENTER ON BUDGET AND POLICY PRIORITIES							
820 1ST ST NE WASHINGTON, DC 20002	52-1234565	501(C)(3)	50,000.				POLICY
(2) CHESAPEAKE BAY FOUNDATION INC							
1500 JFK BOULEVARD PHILADELPHIA, PA 19102	52-6065757	501(C)(3)	10,000.				POLICY
(3) COLD SPRING HARBOR LABORATORY							
1 BUNGTOWN RD COLD SPRING HARBOR, NY 11724	11-2013303	501(C)(3)	254,487.				POLICY
(4) COLORADO DEPT OF PUBLIC HEALTH AND ENVIRMNT							
4300 CHERRY CREEK DR S DENVER, CO 80246	84-0644739	STATE OF CO	150,000.				POLICY
(5) COLUMBIA UNIVERSITY							
615 W 131 ST NEW YORK, NY 10027	13-5598093	501(C)(3)	225,000.				POLICY
(6) COLUMBIA UNIVERSITY							
615 W 131 ST NEW YORK, NY 10027	13-5598093	501(C)(3)	225,000.				POLICY
(7) COMMUNITY COLLEGE OF PHILADELPHIA FDN							
1700 SPRING GARDEN ST PHILADELPHIA PA 19130	23-2612698	501(C)(3)	225,000.				CIVIC LIFE
(8) COMMUNITY INTEGRATED SERVICES							
4300 CHERRY CREEK DR DENVER, CO 80246	23-2648381	501(C)(3)	180,000.				CIVIC LIFE
(9) COMMUNITY RESOURCES FOR JUSTICE							
355 BOYLSTON ST BOSTON, MA 02116	04-3461434	501(C)(3)	436,879.				POLICY
(10) COMPASS WORKING CAPITAL INC							
89 SOUTH ST STE 804 BOSTON, MA 02111	20-3975100	501(C)(3)	250,000.				CIVIC LIFE
(11) CONSERVATION ALLIANCE							
PO BOX 1275 BEND, OR 97709	94-3100867	501(C)(3)	40,000.				POLICY
(12) CONSERVATION INTERNATIONAL FOUNDATION							
2011 CRYSTAL DR STE 600 ARLINGTON, VA 22202	52-1497470	501(C)(3)	2,294,337.				POLICY
2 Enter total number of section 501(c)(3) and	-	•					
3 Enter total number of other organizations list	ted in the line	1 table					

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information. **Employer identification number** Name of the organization THE PEW CHARITABLE TRUSTS 56-2307147 **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 No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) (g) Description of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) CONSERVATION LAW FOUNDATION 62 SUMMER ST BOSTON, MA 02110 04-6149986 501(C)(3) 131,515. POLICY (2) CONSERVATION SCIENCE PARTNERS 11050 PIONEER TRL TRUCKEE, CA 96161 45-2504981 501(C)(3) 97,061. POLICY (3) CONSERVATION STRATEGY FUND 94-3294843 501(C)(3) 181,300. 1160 G ST ARCATA, CA 95521 POLICY (4) CONSERVATION STRATEGY FUND 1160 G ST ARCATA, CA 95521 94-3294843 501(C)(3) 7,537. POLICY (5) CONSUMER CREDIT COUNSELING SERVICE OF DEL. 1608 WALNUT ST PHILADELPHIA, PA 19103 23-1671903 501(C)(3) 38,000. CIVIC LIFE (6) CORNELL UNIVERSITY 341 PINE TREE ROAD ITHACA, NY 14850 15-0532082 501(C)(3) 32,465 POLICY (7) CORNELL UNIVERSITY 341 PINE TREE ROAD ITHACA, NY 14850 15-0532082 501(C)(3) 118,936 POLICY (8) COUNCIL OF JUVENILE CORRECTIONAL ADMIN 639 GRANITE ST BRAINTREE, ME 02184 04-3237796 501(C)(3) 399.726. POLICY (9) COUNCIL OF STATE GOVERNMENTS 1776 AVE OF THE STATES LEXINGTON, KY 40511 36-6000818 501(C)(3) 300,000. POLICY (10) CRIME VICTIMS CENTER OF CHESTER COUNTY INC 135 W MARKET ST WEST CHESTER, PA 19382 23-2039284 501(C)(3) 163,000. CIVIC LIFE (11) DANA-FARBER CANCER INSTITUTE 04-2263040 501(C)(3) 165,000. 450 BROOKLINE AVE BOSTON, MA 02115 POLICY (12) DANA-FARBER CANCER INSTITUTE 450 BROOKLINE AVE BOSTON, MA 02115 04-2263040 501(C)(3) 200,000 POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17		
Part I General Information on Grants and	d Assistanc	е				•			
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	ce?	of grant funds in the	e United States.			X Yes No		
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.									
(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) DEFENDERS OF WILDLIFE									
1130 17TH ST NW WASHINGTON, DC 20036	53-0183181	501(C)(3)	15,000.				POLICY		
(2) DELAWARE COUNTY COMMUNITY COLLEGE EDUCATION									
1776 AVE OF THE STATES LEXINGTON, KY 40511	23-2143790	501(C)(3)	100,000.				CIVIC LIFE		
(3) DELAWARE COUNTY WOMEN AGAINST RAPE									
135 W MARKET ST WEST CHESTER, PA 19382	23-2011721	501(C)(3)	100,000.				CIVIC LIFE		
(4) DEMOCRACY WORKS INC									
20 JAY ST BROOKLYN, NY 11201	27-2460359	501(C)(3)	500,000.				POLICY		
(5) DEMOCRACY WORKS INC									
20 JAY ST BROOKLYN, NY 11201	27-2460359	501(C)(3)	1,000,000.				POLICY		
(6) DEPAUL USA INC									
PO BOX 756 CHICAGO, IL 60690	35-2338110	501(C)(3)	105,000.				CIVIC LIFE		
(7) DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH									
941 N CAPITOL ST WASHINGTON, DC 20002	53-6001131	GOVT. UNIT	150,000.				POLICY		
(8) DOMESTIC VIOLENCE CENTER OF CHESTER COUNTY									
PO BOX 832 WEST CHESTER, PA 19381	22-2606511	501(C)(3)	145,000.				CIVIC LIFE		
(9) DREXEL UNIVERSITY									
3201 ARCH ST PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	225,000.				CIVIC LIFE		
(10) DRUEDING CENTER									
413 W MASTER ST PHILADELPHIA, PA 19122	23-1532883	501(C)(3)	150,000.				CIVIC LIFE		
(11) DUCKS UNLIMITED									
1 WATERFOWL WAY MEMPHIS, TN 38120	13-5643799	501(C)(3)	1,722,983.				POLICY		
(12) DUCKS UNLIMITED									
941 NORTH CAPITOL ST WASHINGTON, DC 20002	13-5643799	501(C)(3)	8,513,338.				POLICY		
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•							
• Line total number of other organizations is	tea in the lift	i labic				<u> </u>			

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants and	d Assistanc	е				•	
 Does the organization maintain records to surthe selection criteria used to award the grants Describe in Part IV the organization's proced 	s or assistand lures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part IV, line 21, for any recipient the		•					es" on Form 990,
(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) DUKE UNIVERSITY							
324 BLACKWELL ST DURHAM, NC 22701	56-0532129	501(C)(3)	222,834.				POLICY
(2) DUKE UNIVERSITY							
324 BLACKWELL ST DURHAM, NC 22701	56-0532129	501(C)(3)	24,250.				POLICY
(3) ELDERNET OF LOWER MERION AND NARBERTH							
9 S BRYN MAWR AVE BRYN MAWR, PA 19010	23-2005485	501(C)(3)	16,000.				CIVIC LIFE
(4) ELECTRONIC REGISTRATION INFORMATION CENTER							
1155 F ST NW STE 1050 WASHINGTON, DC 20004	45-5389681	501(C)(3)	287,691.				POLICY
(5) ENTERPRISE COMMUNITY PARTNERS INC							
11000 BROKEN LAND PKWY COLUMBIA, MD 21044	52-1231931	501(C)(3)	93,501.				POLICY
(6) ENVIRONMENTAL DEFENSE FUND INCORPORATED							
257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501(C)(3)	478,415.				POLICY
(7) ESPERANZA HEALTH CENTER							
4417 N 6TH ST PHILADELPHIA, PA 19140	23-2480701	501(C)(3)	170,000.				CIVIC LIFE
(8) EVERGREEN STATE COLLEGE							
2700 EVERGREEN PARKWAY NW OLYMPIA, WA 98505	91-0826533	STATE OF WA	303,256.				POLICY
(9) FACE TO FACE							
109 E PRICE ST PHILADELPHIA, PA 19144	23-2862064	501(C)(3)	120,000.				CIVIC LIFE
(10) FAMILY SERVICES OF MONTGOMERY COUNTY PA							
3125 RIDGE PIKE NORRISTOWN, PA 19403	23-1352361	501(C)(3)	180,000.				CIVIC LIFE
(11) FAMILY SERVICES OF MONTGOMERY COUNTY PA							
3125 RIDGE PIKE NORRISTOWN, PA 19403	23-1352361	501(C)(3)	41,000.				CIVIC LIFE
(12) FLORIDA WILDLIFE FEDERATION							
PO BOX 6870 TALLAHASSEE, FL 32314	59-1398265	501(C)(3)	211,820.				POLICY
2 Enter total number of section 501(c)(3) and g3 Enter total number of other organizations list	-	•					

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Name of the organization						Employer identificati	on number
THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants an	d Assistanc	e				'	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	ts or assistand	e?					X Yes No
Part II Grants and Other Assistance to D	Omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990,
Part IV, line 21, for any recipient t	hat received	more than \$5	,000. Part II can b	oe duplicated if a	additional space is n	eeded.	
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) FOOD ANIMAL CONCERNS TRUST							
3525 W PETERSON AVE CHICAGO, IL 60659	36-3172605	501(C)(3)	160,115.				POLICY
(2) FOUNDATION CENTER							
32 OLD SLIP NEW YORK, NY 10005	13-1837418	501(C)(3)	180,000.				CIVIC LIFE
(3) FRIENDS OF NEVADA WILDERNESS							
1360 GREG ST SPARKS, NV 89431	88-0211763	501(C)(3)	53,000.				POLICY
(4) GREATER YELLOWSTONE COALITION							
215 S WALLACE AVE BOZEMAN, MT 59715	81-0414042	501(C)(3)	40,002.				POLICY
(5) HABITAT FOR HUMANITY INTERNATIONAL INC							
285 PEACHTREE CTR AVE ATLANTA, GA 30303	46-0781264	501(C)(3)	74,701.				POLICY
(6) HARVARD UNIVERSITY							
1033 MASSACHUSETTS AVE CAMBRIDGE, MA 02138	04-2013580	501(C)(3)	225,000.				POLICY
(7) HARVARD UNIVERSITY							
1033 MASSACHUSETTS AVE CAMBRIDGE, MA 02138	04-2013580	501(C)(3)	375,762.				POLICY
(8) HAVERFORD SCHOOL							
450 LANCASTER AVE HAVERFORD, PA 19041	23-1352646	501(C)(3)	164,526.				CIVIC LIFE
(9) HIAS COUNCIL MIGRATION SERVICE OF PHILA							
3350 FOOTBRIDGE LN FAYETTEVILLE, NC 28306	23-1405597	501(C)(3)	180,000.				CIVIC LIFE
(10) HIGH COUNTRY CONSERVATION ADVOCATES							
PO BOX 1066 CRESTED BUTTE, CO 81224	84-0772688	501(C)(3)	22,500.				POLICY
(11) HOMELESS ADVOCACY PROJECT							
1429 WALNUT ST PHILADELPHIA, PA 19102	23-2619480	501(C)(3)	120,000.				CIVIC LIFE
(12) HORIZON HOUSE							
120 S 30TH ST PHILADELPHIA, PA 19104	23-1413304	501(C)(3)	180,000.				CIVIC LIFE
2 Enter total number of section 501(c)(3) and	•	•					
3 Enter total number of other organizations lis	ted in the line	1 table					

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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				•	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand lures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					es" on Form 990,
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) HUMAN IMPACT PARTNERS							
304 12TH ST OAKLAND, CA 94607	27-0193587	501(C)(3)	75,000.				POLICY
(2) ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI							
ONE GUSTAVE L LEVY PLACE NEW YORK, NY 10029	13-6171197	501(C)(3)	225,000.				POLICY
(3) IDAHO CONSERVATION LEAGUE							
PO BOX 844 BOISE, ID 83701	82-6042478	501(C)(3)	40,000.				POLICY
(4) IDAHO FISH AND WILDLIFE FOUNDATION INC							
PO BOX 2254 BOISE, ID 83701	82-0439782	501(C)(3)	10,000.				POLICY
(5) IDAHO WILDLIFE FEDERATION							
2208 W FREDERIC ST BOISE, ID 83705	23-7039340	501(C)(3)	20,000.				POLICY
(6) INGLIS FOUNDATION							
2600 BELMONT AVE PHILADELPHIA, PA 19131	23-2326553	501(C)(3)	170,000.				CIVIC LIFE
(7) INTERIM HOUSE							
1500 MARKET ST PHILADELPHIA, PA 19102	23-7271716	501(C)(3)	160,000.				CIVIC LIFE
(8) INTERNATIONAL FUND FOR ANIMAL WELFARE							
290 SUMMER ST YARMOUTH PORT, MA 02675	31-1594197	501(C)(3)	112,276.				POLICY
(9) INTERNATIONAL GAME FISH ASSOCIATION							
300 GULF STREAM WAY DANIA BEACH, FL 33004	23-7231048	501(C)(3)	50,000.				POLICY
(10) INTERNEWS NETWORK							
876 7TH ST ARCATA, CA 95521	94-3027961	501(C)(3)	37,568.				POLICY
(11) IOWA STATE UNIVERSITY							
1800 SOUTH FOURTH ST. AMES, IA 50011	42-1143702	STATE OF IA	225,000.				POLICY
(12) ISLAND CONSERVATION							
2100 DELAWARE AVE SANTA CRUZ, CA 95060	91-1839907	501(C)(3)	761,219.				POLICY
2 Enter total number of section 501(c)(3) and	•	•					
3 Enter total number of other organizations list	ed in the line	1 table	<u> </u>			<u> ▶</u>	

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-2307147	
Part I General Information on Grants and	d Assistanc	е				'	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand lures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					es" on Form 990,
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) JEWISH FAMILY CHILDRENS SER OF PHILA							
2100 ARCH ST 5TH FL PHILADELPHIA, PA 19103	23-1352026	501(C)(3)	66,000.				CIVIC LIFE
(2) JOSEPH J PETERS INSTITUTE							
100 S BROAD ST 17 FL PHILADELPHIA, PA 19110	23-1996523	501(C)(3)	220,000.				CIVIC LIFE
(3) KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES							
555 SOUTH KANSAS AVENUE TOPEKA, KS 66603	48-6029925	STATE OF KS	150,000.				POLICY
(4) KAWERAK							
PO BOX 948 NOME, AK 99762	92-0047009	501(C)(3)	132,667.				POLICY
(5) KLAMATH SISKIYOU WILDLAND CENTER							
PO BOX 102 ASHLAND, OR 97520	93-1246139	501(C)(3)	40,000.				POLICY
(6) LA COMUNIDAD HISPANA							
731 W CYPRESS ST KENNETT SQUARE, PA 19348	23-2041915	501(C)(3)	180,000.				CIVIC LIFE
(7) LAW COLLEGE ASSOC OF THE UNI OF ARIZONA							
PO BOX 210176 TUCSON, AZ 85721	86-6037148	501(C)(3)	65,124.				POLICY
(8) LEGAL SERVICES CORPORATION							
3333 K ST NW 3RD FLOOR WASHINGTON, DC 20007	52-1039060	501(C)(3)	83,732.				POLICY
(9) LIBRARY OF CONGRESS							
101 INDEPENDENCE AVE WASHINGTON, DC 20540	53-6002532	US AGENCY	100,000.				POLICY
(10) LOCAL INITIATIVES SUPPORT CORPORATION							
501 SEVENTH AVE NEW YORK, NY 10018	13-3030229	501(C)(3)	150,000.				CIVIC LIFE
(11) LOUISIANA DEPT OF CHILDREN AND FAMILY SERV							
PO BOX 3776 BATON ROUGE, LA 70821	72-6000800	STATE OF LA	150,000.				POLICY
(12) LUTHERAN SETTLEMENT HOUSE							
1340 FRANKFORD AVE PHILADELPHIA, PA 19125		501(C)(3)	41,000.				CIVIC LIFE
2 Enter total number of section 501(c)(3) and	-	•					
3 Enter total number of other organizations list	ed in the line	1 table	<u> </u>		<u> </u>	<u> ▶</u>	

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

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▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants ar	nd Assistanc	е				•	
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process. 	nts or assistand edures for mor	ce?	of grant funds in th	e United States.			X Yes N
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient		_					es" 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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MASSACHUSETTS EYE AND EAR INFIRMARY							
243 CHARLES ST BOSTON, MA 02114	04-2103591	501(C)(3)	60,000.				POLICY
(2) MASSACHUSETTS GENERAL HOSPITAL							
55 FRUIT ST BOSTON, MA 02114	90-0656139	501(C)(3)	200,000.				POLICY
(3) MASSACHUSETTS INSTITUTE OF TECHNOLOGY							
777 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	30,000.				POLICY
(4) MASSACHUSETTS INSTITUTE OF TECHNOLOGY							
777 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	225,000.				POLICY
(5) MASSACHUSETTS INSTITUTE OF TECHNOLOGY							
777 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	225,000.				POLICY
(6) MEADOWS MENTAL HEALTH POLICY INST TEX							
2800 SWISS AVE DALLAS, TX 75204	46-3992618	501(C)(3)	150,012.				POLICY
(7) MEADOWS MENTAL HEALTH POLICY INST TEX							
2800 SWISS AVE DALLAS, TX 75204	46-3992618	501(C)(3)	2,000,000.				POLICY
(8) MEMORIAL SLOAN-KETTERING CANCER CENTER							
1275 YORK AVE NEW YORK, NY 10065	13-1924236	501(C)(3)	225,000.				POLICY
(9) MEMORIAL SLOAN-KETTERING CANCER CENTER							
1275 YORK AVE NEW YORK, NY 10065	13-1924236	501(C)(3)	225,000.				POLICY
(10) METROPOLITAN AREA NEIGHBORHOOD NUTRITION							
2323 RANSTEAD ST PHILADELPHIA, PA 19103	23-2586142	501(C)(3)	182,000.				CIVIC LIFE
(11) MICHIGAN STATE UNIVERSITY							
426 AUDITORIUM RD EAST LANSING, MI 48824	38-6005984	501(C)(3)	80,004.				POLICY
(12) MICHIGAN STATE UNIVERSITY							
426 AUDITORIUM RD EAST LANSING, MI 48824	38-6005984	501(C)(3)	128,709.				POLICY
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations lis	sted in the line	e 1 table					

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2019

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants an	d Assistanc	е				<u>'</u>	
Does the organization maintain records to s the selection criteria used to award the grant			•				X Yes No
2 Describe in Part IV the organization's proces							
					valoto if the organiz	otion analyses d "V	/oo" on Form 000
Part II Grants and Other Assistance to D		_					es on Form 990,
Part IV, line 21, for any recipient t	nat received	more than \$5,	000. Part II can i	be auplicated if a	· · · · · · · · · · · · · · · · · · ·	ieeaea.	_
(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) MISSISSIPPI STATE DEPARTMENT OF HEALTH							
570 E WOODROW WILSON AVE JACKSON, MS 39215	64-6000775	STATE OF MS	150,000.				POLICY
(2) MONTANA WILDERNESS ASSOCIATION							
107 W LAWRENCE HELENA, MT 59601	51-0198932	501(C)(3)	20,000.				POLICY
(3) MONTANA WILDERNESS ASSOCIATION							
107 W LAWRENCE HELENA, MT 59601	51-0198932	501(C)(3)	25,000.				POLICY
(4) MONTANA WILDERNESS ASSOCIATION							
107 W LAWRENCE HELENA, MT 59601	51-0198932	501(C)(3)	20,000.				POLICY
(5) MONTANA WILDLIFE FEDERATION							
5530 N MONTANA AVE HELENA, MT 59602	81-0303948	501(C)(3)	20,000.				POLICY
(6) MOUNTAIN AREA HEALTH EDUCATION CENTER							
121 HENDERSONVILLE RD ASHEVILLE, NC 28803	56-1071426	501(C)(3)	500,000.				POLICY
(7) MOUNTAIN STUDIES INSTITUTE SAN JUAN							
PO BOX 426 SILVERTON, CO 81433	73-1644103	501(C)(3)	10,000.				POLICY
(8) NATIONAL ASSOCIATION OF BOARDS OF PHARMACY							
1600 FEEHANVILLE DR MT PROSPECT, IL 66014	36-1520565	501(C)(3)	38,250.				POLICY
(9) NATIONAL ASSOC OF STATE MENTAL HEALTH PGM							
3141 FAIRVIEW PK DR FALLS CHURCH, VA 22042	54-1448142	501(C)(3)	40,510.				POLICY
(10) NATIONAL AUDUBON SOCIETY							
225 VARICK ST NEW YORK, NY 10014	13-1624102	501(C)(3)	50,000.				POLICY
(11) NATIONAL CONFERENCE OF STATE LEGISLATURES							
7700 E. FIRST PLACE DENVER, CO 80230	84-0772595	GOVT. INTSTRMNT	427,945.				POLICY
(12) NTL GOVERNORS ASSOC FOR BEST PRACTICES							
444 N CAPITOL ST NW WASHINGTON, DC 20001	23-7391796	501(C)(3)	399,174.				POLICY
2 Enter total number of section 501(c)(3) and	government	organizations list	ted in the line 1 tal	ole		. •	
3 Enter total number of other organizations lis	ted in the line	1 table	<u> </u>		<u> </u>	<u> </u>	
For Paperwork Reduction Act Notice, see the Instruct							nedule I (Form 990) (2019)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

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Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants ar	nd Assistanc	е				•	
 Does the organization maintain records to see the selection criteria used to award the grant of the process. Describe in Part IV the organization's process. 	nts or assistand edures for mor	e?	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient		•					es" on Form 990,
(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) NTL GOVERNORS ASSOC FOR BEST PRACTICES							
444 N CAPITOL ST NW WASHINGTON, DC 20001	23-7391796	501(C)(3)	720,000.				POLICY
(2) NATIONAL JUVENILE DEFENDER CENTER							
1350 CONNECTICUT AVE WASHINGTON, DC 20036	02-0620456	501(C)(3)	150,013.				POLICY
(3) NATIONAL PARKS CONSERVATION ASSOCIATION							
777 6TH ST NW WASHINGTON, DC 20001	53-0225165	501(C)(3)	50,000.				POLICY
(4) NATIONAL PUBLIC RADIO							
1111 N CAPITOL ST NE WASHINGTON, DC 20002	52-0907625	501(C)(3)	500,000.				CIVIC LIFE
(5) NATIONAL TRUST FOR HISTORIC PRESERVATION							
3141 FAIRVIEW PARK FALLS CHRUCH, VA 22042	53-0210807	501(C)(3)	7,348.				POLICY
(6) NATIONAL WILDLIFE FEDERATION							
11100 WILDLIFE CTR DR RESTON, VA 20190	53-0204616	501(C)(3)	23,670.				POLICY
(7) NATIVE AMERICAN RIGHTS FUND							
1506 BROADWAY BOULDER, CO 80302	84-0611876	501(C)(3)	129,895.				POLICY
(8) NATIVE AMERICAN RIGHTS FUND							
1506 BROADWAY BOULDER, CO 80302	84-0611876	501(C)(3)	70,000.				POLICY
(9) NATURE CONSERVANCY							
4245 N. FAIRFAX DR ARLINGTON, VA 22203	53-0242652	501(C)(3)	27,627.				POLICY
(10) NATURE CONSERVANCY							
4245 N. FAIRFAX DR ARLINGTON, VA 22203	53-0242652	501(C)(3)	313,734.				POLICY
(11) NATURE CONSERVANCY							
4245 N. FAIRFAX DR ARLINGTON, VA 22203	53-0242652	501(C)(3)	39,000.				POLICY
(12) NEVADA BIGHORNS UNLIMITED							
PO BOX 21393 RENO, NV 89515	88-0180276	501(C)(3)	15,200.				POLICY
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	•	•					

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
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Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants and	d Assistanc	е				•	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	e?	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		-					es" on Form 990,
(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) NEVADA WILDLIFE FEDERATION INC							
PO BOX 71238 RENO, NV 89570	23-7088184	501(C)(3)	10,000.				POLICY
(2) NEW MEXICO WILDERNESS ALLIANCE							
PO BOX 25464 ALBUQUERQUE, NM 50464	85-0457916	501(C)(3)	71,000.				POLICY
(3) NEW MEXICO WILDLIFE FEDERATION							
121 CARDENAS DR ALBUQUERQUE, NM 87108	85-0160947	501(C)(3)	50,994.				POLICY
(4) NEW YORK UNIVERSITY							
105 E 17TH ST NEW YORK, NY 10003	13-5562308	501(C)(3)	225,000.				POLICY
(5) NEW YORK UNIVERSITY							
105 E 17TH ST NEW YORK, NY 10003	13-5562308	501(C)(3)	52,974.				POLICY
(6) NEW YORK UNIVERSITY							
105 E 17TH ST NEW YORK, NY 10003	13-5562308	501(C)(3)	200,000.				POLICY
(7) NORTH CAROLINA COASTAL FEDERATION INC							
3609 HIGHWAY 24 NEWPORT, NC 28570	58-1494098	501(C)(3)	80,000.				POLICY
(8) NORTH CAROLINA COASTAL FEDERATION INC							
3609 HIGHWAY 24 NEWPORT, NC 28570	58-1494098	501(C)(3)	220,000.				POLICY
(9) NORTHWEST SPORTFISHING INDUSTRY ASSOC							
PO BOX 4 OREGON CITY, OR 97045	93-1107831	501(C)(6)	15,000.				POLICY
(10) NORTHWESTERN UNIVERSITY							
633 CLARK ST EVANSTON, IL 60208	36-2167817	501(C)(3)	225,000.				POLICY
(11) OCEAN UNITE							
3517 W PL NW WASHINGTON, DC 20007	83-3580499	501(C)(3)	166,950.				POLICY
(12) OCEANA							
1350 CONNECTICUT AVE NW WASINGTON, DC 20036	51-0401308	501(C)(3)	25,000.				POLICY
2 Enter total number of section 501(c)(3) and	government	organizations lis	ted in the line 1 tal	ole			
3 Enter total number of other organizations list	ted in the line	1 table		<u> </u>	<u> </u>	<u> </u>	

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants an	d Assistanc	е				•	
 Does the organization maintain records to set the selection criteria used to award the grant Describe in Part IV the organization's process. 	ts or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to De Part IV, line 21, for any recipient to		_					es" 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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) OCEANS INITIATIVE							
2700 NE 91ST ST SEATTLE, WA 98115	90-1015993	501(C)(3)	155,770.				POLICY
(2) OREGON HUNTERS ASSOCIATION							
PO BOX 1706 MEDFORD, OR 97501	04-3853244	501(C)(3)	23,360.				POLICY
(3) OREGON NATURAL DESERT ASSOCIATION							
50 SW BOND ST BEND, OR 97702	94-3098621	501(C)(3)	30,015.				POLICY
(4) OREGON NATURAL DESERT ASSOCIATION							
50 SW BOND ST BEND, OR 97702	94-3098621	501(C)(3)	49,989.				POLICY
(5) OUTDOOR ALLIANCE							
1602 L ST NW STE 615 WASHINGTON, DC 20036	46-3272914	501(C)(3)	40,309.				POLICY
(6) PACIFIC UNIVERSITY							
2043 COLLEGE WAY FOREST GROVE, OR 97116	93-0386892	501(C)(3)	96,000.				POLICY
(7) PARTNERSHIP FOR THE DELAWARE ESTUARY							
110 S POPLAR ST WILMINGTON, DE 19801	51-0375307	501(C)(3)	30,000.				POLICY
(8) PEIRCE COLLEGE							
1420 PINE ST PHILADELPHIA, PA 19102	23-1627436	501(C)(3)	200,000.				CIVIC LIFE
(9) PENN ASIAN SENIOR SERVICES							
6926 OLD YORK RD PHILADELPHIA, PA 19126	20-2643138	501(C)(3)	54,000.				CIVIC LIFE
(10) PENN FOUNDATION, INC.							
807 LAWN AVE SELLERSVILLE, PA 18960	01-0760254	501(C)(3)	175,000.				CIVIC LIFE
(11) PENNSYLVANIA STATE UNIVERSITY							
408 OLD MAIN UNIVERSITY PARK, PA 16802	24-6000376	STATE OF PA	225,000.				POLICY
(12) PEW RESEARCH CENTER							
1615 L ST NW STE 800 WASHINGTON, DC 20036	20-0881724	501(C)(3)	3,100,000.				INFORMATION
2 Enter total number of section 501(c)(3) and	-	•					
3 Enter total number of other organizations lis	ted in the line	1 table	<u> </u>	<u> </u>		<u> </u>	

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

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Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS	E PEW CHARITABLE TRUSTS							
Part I General Information on Grants an	d Assistanc	е				'		
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process. 	ts or assistand	e?			• •		X Yes No	
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient t		_			. •		es" on Form 990,	
(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) PEW RESEARCH CENTER								
1615 L ST NW STE 800 WASHINGTON, DC 20036	20-0881724	501(C)(3)	39,000,000.				INFORMATION	
(2) PHILABUNDANCE								
3616 S GALLOWAY ST PHILADELPHIA, PA 19148	23-2290505	501(C)(3)	162,000.				CIVIC LIFE	
(3) PHILABUNDANCE								
3616 S GALLOWAY ST PHILADELPHIA, PA 19148	23-2290505	501(C)(3)	250,000.				CIVIC LIFE	
(4) PREVENTION POINT PHILADELPHIA INC								
PO BOX 60990 PHILADELPHIA, PA 19133	23-2663699	501(C)(3)	250,000.				CIVIC LIFE	
(5) PROJECT HOME								
1515 FAIRMOUNT AVE PHILADELPHIA, PA 19130	23-2555950	501(C)(3)	351,000.				CIVIC LIFE	
(6) R STREET INSTITUTE								
1050 17TH ST NW WASHINGTON, DC 20036	26-3477125	501(C)(3)	49,500.				POLICY	
(7) RAND CORPORATION								
1776 MAIN ST SANTA MONICA, CA 90407	95-1958142	501(C)(3)	29,972.				POLICY	
(8) REACH MEDICAL PLLC								
402 N CAYUGA ST ITHACA, NY 14850	82-3284560	501(C)(3)	500,000.				POLICY	
(9) REGENTS OF THE UNIVERSITY OF COLORADO								
3100 MARINE STREET BOULDER, CO 80309	84-6000555	STATE OF CO	250,000.				POLICY	
(10) RESOLVE INC								
1255 23RD ST NW WASHINGTON, DC 20037	52-1841035	501(C)(3)	74,049.				POLICY	
(11) RIO ARRIBA COUNTY								
1122 INDUSTRIAL PARK RD ESPANOLA, NM 87522	85-6000240	STATE OF NM	500,000.				POLICY	
(12) ROCKEFELLER UNIVERSITY								
1230 YORK AVE NEW YORK, NY 10065	13-1624158	501(C)(3)	225,000.				POLICY	
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole				
3 Enter total number of other organizations lis	sted in the line	1 table	<u> </u>			. . >		
For Paperwork Reduction Act Notice, see the Instruc							nedule I (Form 990) (2019)	

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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OMB No. 1545-0047 2019

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

Open to Public Inspection

Employer identification number Name of the organization THE PEW CHARITABLE TRUSTS 56-2307147 **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 No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) ROCKEFELLER UNIVERSITY 1230 YORK AVE NEW YORK, NY 10065 13-1624158 501(C)(3) 60,000. POLICY (2) RUTGERS UNIVERSITY 7 WINANTS HALL NEW BRUNSWICK, NJ 08901 22-6001086 STATE OF NJ 225,000. POLICY (3) RUTGERS UNIVERSITY 22-6001086 100,000. 7 WINANTS HALL NEW BRUNSWICK, NJ 08901 STATE OF NJ POLICY (4) SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 N TORREY PINES RD LA JOLLA, CA 92037 95-2160097 501(C)(3) 225,000 POLICY (5) SAN JUAN CITIZENS ALLIANCE PO BOX 2461 DURANGO, CO 81302 84-1447465 501(C)(3) 15,000. POLICY (6) SENIOR COMMUNITY SERVICES 600 SWARTHMORE AVE FOLSOM, PA 19033 23-2036247 501(C)(3) 51,000 CIVIC LIFE (7) SENIORLAW CENTER 1500 JFK BLVD PHILADELPHIA, PA 19102 23-2169936 501(C)(3) 50,000 CIVIC LIFE (8) SITKA CONSERVATION SOCIETY PO BOX 6533 SITKA, AK 99835 92-0096633 501(C)(3) 18,500. POLICY (9) SITKA CONSERVATION SOCIETY PO BOX 6533 SITKA, AK 99835 92-0096633 501(C)(3) 40,000. POLICY (10) SMITHSONIAN INSTITUTION 1000 JEFFERSON DR SW WASHINGTON, DC 20560 53-0206027 501(C)(3) 187,639 POLICY (11) SOCIETY OF ENVIRONMENTAL JOURNALISTS 52-0194031 501(C)(3) 8,000 1629 K ST NW STE 300 WASHINGTON, DC 20006 POLICY (12) SC COASTAL CONSERVATION LEAGUE P.O. BOX 1765 CHARLESTON, SC 29402 57-0887278 | 501(C)(3) 83,206. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificati	on number
THE PEW CHARITABLE TRUSTS						56-230714	:7
Part I General Information on Grants an	d Assistanc	е				'	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proces 	ts or assistand	e?					X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient t		_			additional space is n		es" 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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) STANFORD UNIVERSITY							
3145 PORTER DR PALO ALTO, CA 94304	94-1156365	501(C)(3)	225,000.				POLICY
(2) STANFORD UNIVERSITY							
3145 PORTER DR PALO ALTO, CA 94304	94-1156365	501(C)(3)	85,540.				POLICY
(3) STANFORD UNIVERSITY							
3145 PORTER DR PALO ALTO, CA 94304	94-1156365	501(C)(3)	126,161.				POLICY
(4) STATE OF MICHIGAN - DEPARTMENT OF HEALTH							
PO BOX 48909 LANSING, MI 48909	38-6000134	STATE OF MI	150,000.				POLICY
(5) STATE OF MINNESOTA							
PO BOX 64975 ST. PAUL, MN 55164	41-6007162	STATE OF MN	150,000.				POLICY
(6) STATE OF NEW JERSEY							
PO BOX 729 TRENTON, NJ 08625	21-6000928	STATE OF NJ	150,000.				POLICY
(7) STOWERS INSTITUTE FOR MEDICAL RESEARCH							
1000 E 50TH ST KANSAS CITY, MO 64110	20-2993509	501(C)(3)	200,000.				POLICY
(8) SUPPORTIVE OLDER WOMEN'S NETWORK							
4100 MAIN ST PHILADELPHIA, PA 19127	22-2629856	501(C)(3)	33,000.				CIVIC LIFE
(9) SURREY SERVICES FOR SENIORS							
60 SURREY WAY DEVON, PA 19333	23-2610145	501(C)(3)	44,000.				CIVIC LIFE
(10) SUSTAINABLE FISHERIES PARTNERSHIP FDN							
4348 WAIALAE AVENUE 692 HONOLULU, HI 96816	27-3091938	501(C)(3)	25,445.				POLICY
(11) TAXPAYERS FOR COMMON SENSE							
651 PENNSYLVANIA AVE WASHINGTON, DC 20003	52-1941122	501(C)(3)	40,000.				POLICY
(12) TECH IMPACT							
417 N 8TH ST PHILADELPHIA, PA 19123	74-3062511	501(C)(3)	154,000.				CIVIC LIFE
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations lis	ted in the line	1 table	<u> </u>			<u> </u>	
For Paperwork Reduction Act Notice, see the Instruct							edule I (Form 990) (2019)

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization	ne of the organization							
THE PEW CHARITABLE TRUSTS						56-2307147		
Part I General Information on Grants an	d Assistanc	е				•		
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's process 	ts or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No	
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to		_					es" on Form 990,	
(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) TEMPLE UNIVERSITY								
1805 N BROAD ST PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	116,000.				CIVIC LIFE	
(2) TEXAS A&M AGRILIFE RESEARCH								
400 MITCHEL PKWY COLLEGE STATION, TX 77845	74-6000537	STATE OF TX	60,000.				POLICY	
(3) TEXAS A&M AGRILIFE RESEARCH								
400 MITCHEL PKWY COLLEGE STATION, TX 77845	74-6000537	STATE OF TX	80,000.				POLICY	
(4) TEXAS PUBLIC POLICY FOUNDATION								
901 CONGRESS AVE AUSTIN, TX 78701	74-2524057	501(C)(3)	500,000.				POLICY	
(5) THE CARL SAFINA CENTER INC								
80 N COUNTRY RD EAST SETAUKET, NY 11733	61-1406022	501(C)(3)	100,000.				POLICY	
(6) THE CONNECTICUT AUDUBON SOCIETY								
2325 BURR ST FAIRFIELD, CT 06824	06-0653531	501(C)(3)	72,145.				POLICY	
(7) THE OCEAN FOUNDATION								
1320 19TH ST NW WASHINGTON, DC 20036	71-0863908	501(C)(3)	51,778.				POLICY	
(8) THE OCEAN FOUNDATION								
1320 19TH ST NW WASHINGTON, DC 20036	71-0863908	501(C)(3)	883,558.				POLICY	
(9) THE OCEAN FOUNDATION								
1320 19TH ST NW WASHINGTON, DC 20036	71-0863908	501(C)(3)	375,611.				POLICY	
(10) THE RESEARCH FOUNDATION FOR SUNY								
W 5510 MELVILLE STONY BROOK, NY 11794	14-1368361	501(C)(3)	47,965.				POLICY	
(11) THE RESEARCH FOUNDATION FOR SUNY								
W 5510 MELVILLE STONY BROOK, NY 11794	14-1368361	501(C)(3)	382,628.				POLICY	
(12) THE RESEARCH FOUNDATION FOR SUNY								
W 5510 MELVILLE STONY BROOK, NY 11794	14-1368361	501(C)(3)	75,000.				POLICY	
2 Enter total number of section 501(c)(3) and	•	•						
3 Enter total number of other organizations lis	ted in the line	1 table	<u> </u>		<u> </u>	<u> ▶</u>		

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Schedule I (Form 990) (2019)

9E1288 1.000

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificati	ion number
THE PEW CHARITABLE TRUSTS						56-230714	! 7
Part I General Information on Grants a	nd Assistanc	е				'	
 Does the organization maintain records to the selection criteria used to award the grant Describe in Part IV the organization's process. 	nts or assistand	e?					X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient		_			additional space is n		es" on Form 990,
 (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) THE RESEARCH FOUNDATION FOR SUNY							
W 5510 MELVILLE STONY BROOK, NY 11794	14-1368361	501(C)(3)	12,799.				POLICY
(2) THEODORE ROOSEVELT CONSERVATION PARTNER							
529 14TH ST NW WASHINGTON, DC 20045	04-3706385	501(C)(3)	122,010.				POLICY
(3) THEODORE ROOSEVELT CONSERVATION PARTNER							
529 14TH ST NW WASHINGTON, DC 20045	04-3706385	501(C)(3)	15,027.				POLICY
(4) THOMAS JEFFERSON UNIVERSITY							
601 WALNUT ST PHILADELPHIA, PA 19106	23-1352651	501(C)(3)	60,000.				POLICY
(5) TROUT UNLIMITED							
1777 N KENT ST ARLINGTON, VA 22209	38-1612715	501(C)(3)	40,000.				POLICY
(6) TRUSTEES OF BOSTON COLLEGE							
140 COMMONWEALTH CHESTNUT HILL, MA 02467	04-2103545	501(C)(3)	49,532.				POLICY
(7) TWIN HARBORS WATERKEEPER							
PO BOX 751 COSMOPOLIS, WA 98537	84-1941740	501(C)(3)	42,000.				POLICY
(8) UNITED WAY OF ANCHORAGE							
701 W 8TH AVENUE ANCHORAGE, AK 99501	92-0027948	501(C)(3)	22,057.				POLICY
(9) UNIVERSIDAD POLITECNICA DE PUERTO RICO							
PO BOX 192017 SAN JUAN, PR 00917	66-0362666	501(C)(3)	375,117.				POLICY
(10) UNIVERSITY OF ALASKA							
PO BOX 755140 FAIRBANKS, AK 99775	92-6000147	STATE OF AK	25,000.				POLICY
(11) UNIVERSITY OF CALIFORNIA, BERKELEY							
200 CALIFORNIA HALL BERKELEY, CA 94720	94-6002123	STATE OF CA	225,000.				POLICY
(12) UNIVERSITY OF CALIFORNIA, BERKELEY							
200 CALIFORNIA HALL BERKELEY, CA 94720	94-6002123	STATE OF CA	225,000.				POLICY
2 Enter total number of section 501(c)(3) and	d government	organizations lis	sted in the line 1 tal	ole		 •	
3 Enter total number of other organizations li	sted in the line	1 table	<u> </u>		<u> </u>	. .	
For Paperwork Reduction Act Notice, see the Instruc							nedule I (Form 990) (2019)

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9E1288 1.000

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants an	d Assistanc	е				•	
 Does the organization maintain records to set the selection criteria used to award the grant in Part IV the organization's process. 	ts or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient to		•					es" on Form 990,
(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) UNIVERSITY OF CALIFORNIA, DAVIS							
1 SHIELDS AVE DAVIS, CA 95616	94-6036494	STATE OF CA	60,000.				POLICY
(2) UNIVERSITY OF CALIFORNIA, DAVIS							
1 SHIELDS AVE DAVIS, CA 95616	94-6036494	STATE OF CA	615,018.				POLICY
(3) UNIVERSITY OF CALIFORNIA, LOS ANGELES							
10920 WILSHIRE BLVD LOS ANGELES, CA 90024	95-6006143	STATE OF CA	60,000.				POLICY
(4) UNIVERSITY OF CALIFORNIA, SAN FRANCISCO							
550 16TH ST SAN FRANCISCO, CA 94143	94-6036493	STATE OF CA	225,000.				POLICY
(5) UNIVERSITY OF CALIFORNIA, SAN FRANCISCO							
550 16TH ST SAN FRANCISCO, CA 94143	94-6036493	STATE OF CA	225,000.				POLICY
(6) UNIVERSITY OF CALIFORNIA, SAN FRANCISCO							
550 16TH ST SAN FRANCISCO, CA 94143	94-6036493	STATE OF CA	285,000.				POLICY
(7) UNIVERSITY OF CHICAGO							
6054 S DREXEL AVE CHICAGO, IL 60637	36-2177139	501(C)(3)	60,000.				POLICY
(8) UNIVERSITY OF COLORADO							
1380 LAWRENCE ST DENVER, CO 80204	84-6000555	STATE OF CO	60,000.				POLICY
(9) UNIVERSITY OF MARYLAND							
2020 HORNS POINT RD CAMBRIDGE, MD 21613	52-6002033	STATE OF MD	53,094.				POLICY
(10) UNIVERSITY OF MASSACHUSETTS							
333 SOUTH ST SHREWSBURY, MA 01545	04-3167352	STATE OF MA	225,000.				POLICY
(11) UNIVERSITY OF MIAMI							
PO BOX 248106 CORAL GABLES, FL 33124	59-0624458	501(C)(3)	100,000.				POLICY
(12) UNIVERSITY OF MINNESOTA							
100 CHURCH ST SE MINNEAPOLIS, MN 55455	41-6007513	STATE OF MN	225,000.				POLICY
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17				
Part I General Information on Grants and	Part I General Information on Grants and Assistance										
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No				
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.											
(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) UNIVERSITY OF MINNESOTA											
100 CHURCH ST SE MINNEAPOLIS, MN 55455	41-6007513	STATE OF MN	25,000.				POLICY				
(2) UNIVERSITY OF MINNESOTA											
100 CHURCH ST SE MINNEAPOLIS, MN 55455	41-6007513	STATE OF MN	500,000.				POLICY				
(3) UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL											
104 AIRPORT DR CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	149,257.				POLICY				
(4) UNIVERSITY OF PENNSYLVANIA											
3451 WALNUT ST PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	688,001.				CIVIC LIFE				
(5) UNIVERSITY OF PITTSBURGH											
116 ATWOOD ST STE 201 PITTSBURGH, PA 15213	25-0965591	501(C)(3)	225,000.				POLICY				
(6) UNIVERSITY OF TEXAS SW MEDICAL CENTER											
5323 HARRY HINES BLVD DALLAS, TX 75390	75-6002868	STATE OF TX	200,000.				POLICY				
(7) UNIVERSITY OF THE ARTS											
320 S BROAD ST PHILADELPHIA, PA 19102	23-1639911	501(C)(3)	13,562,000.				CIVIC LIFE				
(8) UNIVERSITY OF UTAH											
201 PRESIDENTS CR SALT LAKE CITY, UT 84112	87-6000525	STATE OF UT	55,160.				POLICY				
(9) UNIVERSITY OF UTAH											
201 PRESIDENTS CR SALT LAKE CITY, UT 84112	87-6000525	STATE OF UT	200,000.				POLICY				
(10) UNIVERSITY OF VIRGINIA											
PO BOX 400224 CHARLOTTSVILLE, VA 22904	54-6001796	501(C)(3)	5,000,000.				POLICY				
(11) UNIVERSITY OF WASHINGTON											
PO BOX 359505 SEATTLE, WA 98195	91-6001537	STATE OF WA	225,000.				POLICY				
(12) UNIVERSITY OF WASHINGTON											
PO BOX 359505 SEATTLE, WA 98195	91-6001537	STATE OF WA	225,000.				POLICY				
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•									

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	56-2307147	
Part I General Information on Grants ar	nd Assistanc	е				-		
1 Does the organization maintain records to s	substantiate th	ne 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								
Part II Grants and Other Assistance to I	Domestic Or	ganizations a	nd Domestic Gov	vernments. Con	polete if the organiz	ation answered "Y	'es" on Form 990.	
Part IV, line 21, for any recipient		•						
		T	1	<u> </u>			(Is) Decrease of second	
(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) UNIVERSITY OF WASHINGTON								
PO BOX 359505 SEATTLE, WA 98195	91-6001537	STATE OF WA	22,915.				POLICY	
(2) UNIVERSITY OF WYOMING								
1000 E UNIVERSITY AVE LARAMIE, WY 82071	83-6000331	STATE OF WY	51,894.				POLICY	
(3) URBAN INSTITUTE								
2100 M ST NW WASHINGTON, DC 20037	52-0880375	501(C)(3)	102,357.				POLICY	
(4) VIRGINIA DEPARTMENT OF HEALTH								
PO BOX 2448 RICHMOND, VA 21318	54-6001775	STATE OF VA	150,000.				POLICY	
(5) VIRGINIA POVERTY LAW CENTER INC								
919 E MAIN ST STE 610 RICHMOND, VA 23219	54-1093402	501(C)(3)	145,000.				POLICY	
(6) W E UPJOHN UNEMPLOYMENT TRUSTEE								
300 S WESTNEDGE AVE KALAMAZOO, MI 49007	38-1360419	501(C)(3)	222,831.				POLICY	
(7) WASHINGTON - DEPARTMENT OF HEALTH								
PO BOX 47890 OLYMPIA, WA 98504	91-1444603	STATE OF WA	150,000.				POLICY	
(8) WASHINGTON UNIVERSITY IN ST. LOUIS								
700 ROSEDALE AVE ST LOUIS, MO 63112	43-0653611	501(C)(3)	500,000.				POLICY	
(9) WASHINGTON WILD								
305 N 83RD ST SEATTLE, WA 98103	91-1102692	501(C)(3)	35,000.				POLICY	
(10) WHITEHEAD INST. FOR BIOMEDICAL RESEARCH								
NINE CAMBRIDGE CENTER CAMBRIDGE, MA 02142	06-1043412	501(C)(3)	60,000.				POLICY	
(11) WILD CONNECTIONS INC								
2168 PHEASANT PL COLORADO SPGS, CO 80909	14-1899876	501(C)(3)	30,000.				POLICY	
(12) WILD CONNECTIONS INC								
2168 PHEASANT PL COLORADO SPGS, CO 80909	14-1899876	501(C)(3)	40,000.				POLICY	
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble		. •		
3 Enter total number of other organizations lis	sted in the line	1 table	<u> </u>	<u></u>	<u> </u>	. . >		
For Paperwork Reduction Act Notice, see the Instruc				<u>. </u>			nedule I (Form 990) (2019)	

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Department of the Treasury

Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Employer identification number Name of the organization THE PEW CHARITABLE TRUSTS 56-2307147 **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 No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) WILD SALMON CENTER 721 NW 9TH AVE STE 300 PORTLAND, OR 97209 94-3166095 501(C)(3) 20,000. POLICY (2) WILDERNESS SOCIETY 1615 M ST NW WASHINGTON, DC 20036 53-0167933 501(C)(3) 30,000. POLICY (3) WILDERNESS WORKSHOP PO BOX 1442 CARBONDALE, CO 81623 74-1900412 501(C)(3) 13,000. POLICY (4) WISTAR INSTITUTE 1,000,000 3601 SPRUCE ST PHILADELPHIA, PA 19104 23-6434390 501(C)(3) CIVIC LIFE (5) WOMEN AGAINST ABUSE 100 S BROAD ST PHILADELPHIA, PA 19101 23-1984838 501(C)(3) 200,000. CIVIC LIFE (6) WOMEN'S OPPORTUNITIES RESOURCE CENTER 2010 CHESTNUT ST PHILADELPHIA, PA 19103 23-2741508 501(C)(3) 200,000 CIVIC LIFE (7) WOODROW WILSON INTL CENTER FOR SCHOLARS 1300 PENNSYLVANIA AVE WASHINGTON, DC 20004 52-1067541 501(C)(3) 150,767 POLICY (8) WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037 52-1693387 501(C)(3) 625,170 POLICY (9) WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037 52-1693387 501(C)(3) 545,450 POLICY (10) WYOMING OUTDOOR COUNCIL 262 LINCOLN LANDER, WY 82520 83-0259411 501(C)(3) 21,600. POLICY (11) WYOMING WILDERNESS ASSOCIATION 38-3667856 501(C)(3) 20,003. PO BOX 6588 SHERIDAN, WY 82801 POLICY (12) WYOMING WILDLIFE FEDERATION PO BOX 1312 LANDER, WY 82520 23-7002578 | 501(C)(3) 53,000. 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.

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS	E PEW CHARITABLE TRUSTS							
Part I General Information on Grants ar	nd Assistanc	е				•		
1 Does the organization maintain records to s	substantiate th	ne amount of the	e grants or assista	nce, the grantees	s' 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								
Part II Grants and Other Assistance to I	Domestic Or	ganizations a	nd Domestic Gov	vernments. Com	polete if the organiz	ation answered "Y	'es" on Form 990.	
Part IV, line 21, for any recipient		•						
		T	1	 	·		(Is) Decrease of second	
(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) YALE UNIVERSITY								
105 WALL ST NEW HAVEN, CA 06520	06-0646973	501(C)(3)	225,000.				POLICY	
(2) YOUTHBUILD PHILADELPHIA CHARTER SCHOOL								
1231 N BROAD ST PHILADELPHIA, PA 19122	23-2728467	501(C)(3)	250,000.				CIVIC LIFE	
(3) YUKON RIVER DRAINAGE FISHERIES ASSOC								
PO BOX 100498 ANCHORAGE, AK 99510	92-0135445	501(C)(3)	27,900.				POLICY	
(4) AMERICAS VETDOGS K9 CORPS								
371 E JERICHO TURNPIKE SMITHTOWN, NY 11787	20-8814368	501(C)(3)	100,000.				DAF GRANT	
(5) BLUE STAR SERVICE DOGS INC								
PO BOX 830 HAMBURG, MI 48139	27-2228933	501(C)(3)	100,000.				DAF GRANT	
(6) BRIGHAM AND WOMEN'S HOSPITAL								
10 VINING ST BOSTON, MA 02115	04-2921338	501(C)(3)	3,299,782.				DAF GRANT	
(7) BUCK INSTITUTE FOR RESEARCH ON AGING								
8001 REDWOOD BLVD NOVATO, CA 94945	94-3030609	501(C)(3)	1,500,000.				DAF GRANT	
(8) COLUMBIA UNIVERSITY								
615 W 131 ST NEW YORK, NY 10027	13-5598093	501(C)(3)	1,500,000.				DAF GRANT	
(9) GOLD STAR TEEN ADVENTURES								
3350 FOOTBRIDGE LN FAYETTEVILLE, NC 28306	90-0998030	501(C)(3)	200,000.				DAF GRANT	
(10) K9S FOR WARRIORS INC								
114 CAMP K9 RD PONTE VEDRA, FL 32081	27-2219467	501(C)(3)	100,000.				DAF GRANT	
(11) LANSING COMMUNITY COLLEGE FOUNDATION								
309 N WASHINGTON SQ LANSING, MI 48933	38-2372751	501(C)(3)	100,000.				DAF GRANT	
(12) SCHOOL OF LEADERSHIP - AFGHANISTAN								
470 ATLANTIC AVE BOSTON, MA 02210	80-0967564	501(C)(3)	1,500,000.				DAF GRANT	
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble		. •		
3 Enter total number of other organizations lis	sted in the line	1 table	<u> </u>	<u> </u>	<u> </u>	. . >		
For Paperwork Reduction Act Notice, see the Instruc							nedule I (Form 990) (2019)	

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificati	ion number
THE PEW CHARITABLE TRUSTS						56-230714	! 7
Part I General Information on Grants and	d Assistanc	е				•	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's process 	s or assistand	e?					X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		-			additional space is n		es" on Form 990,
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) THE STATION FOUNDATION							
1627 W MAIN ST STE 258 BOZEMAN, MT 59715	45-2928042	501(C)(3)	100,000.				DAF GRANT
(2) ALBERT AND MARY LASKER FOUNDATION							
405 LEXINGTON AVENUE NEW YORK, NY 10174	13-1680062	501(C)(3)	13,454.				MATCHING GIFT
(3) ALLEN-STEVENSON SCHOOL							
132 EAST 78TH STREET NEW YORK, NY 10075	13-1623878	501(C)(3)	15,000.				MATCHING GIFT
(4) AMARA							
5907 MLK JR WAY S SEATTLE, WA 98118	91-0577487	501(C)(3)	25,000.				MATCHING GIFT
(5) AMERICAN PHILOSOPHICAL SOCIETY							
104 S 5TH ST PHILADELPHIA, PA 19106	23-1353269	501(C)(3)	7,750.				MATCHING GIFT
(6) AMERICAN UNIVERSITY							
4400 MASSACHUSETTS AVE WASHINGTON, DC 20016	53-0196549	501(C)(3)	9,878.				MATCHING GIFT
(7) ASHA-JYOTHI							
13760 HENRY POND CT CHANTILLY, VA 20151	02-0658463	501(C)(3)	20,000.				MATCHING GIFT
(8) BISHOP GADSDEN EPISCOPAL RETIRE COMM							
1 BISHOP GADSDEN WAY CHARLESTON, SC 29412	57-0337132	501(C)(3)	10,000.				MATCHING GIFT
(9) BREAD & ROSES COMMUNITY FUND							
100 S. BROAD ST PHILADELPHIA, PA 19102	23-2047297	501(C)(3)	11,300.				MATCHING GIFT
(10) BROAD STREET MINISTRY							
315 S BROAD ST PHILADELPHIA, PA 19107	20-2760310	501(C)(3)	6,224.				MATCHING GIFT
(11) CAPITAL AREA FOOD BANK FOUNDATION							
4900 PUERTO RICO AVE WASHINGTON, DC 20017	27-2446583	501(C)(3)	22,745.				MATCHING GIFT
(12) CAREVIEW COMMUNITY CHURCH							
77 S UNION AVE LANSDOWNE, PA 19050	23-2836510	501(C)(3)	12,354.				MATCHING GIFT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tab	ole		>	
3 Enter total number of other organizations list	•	•					
For Paperwork Reduction Act Notice, see the Instruct							nedule I (Form 990) (2019)

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Employer identification number

THE PEW CHARITABLE TRUSTS 56-2307147 **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 No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of 1 (a) Name and address of organization (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) CATALOGUE FOR PHILANTHROPY GREATER WA. 10 G ST NE STE 600 WASHINGTON, DC 20002 20-5494704 501(C)(3) 23,950. MATCHING GIFT (2) CHRISTODORA INC 1 EAST 53RD STREET NEW YORK, NY 10022 13-5562192 501(C)(3) 7,500. MATCHING GIFT (3) CHURCH OF SAINT LUKE & THE EPIPHANY 501(C)(3) 6,000. 330 S 13TH ST PHILADELPHIA, PA 19107 23-1413660 MATCHING GIFT (4) CHURCH OF THE ADVENT ANGLICAN 3251 MT. PLEASANT ST WASHINGTON, DC 20010 23-2301401 501(C)(3) 8,480 MATCHING GIFT (5) COMMUNITY OF HOPE AME CHURCH 4650 REISTERSTOWN RD BALTIMORE, MD 21215 20-5174473 501(C)(3) 13,711. MATCHING GIFT (6) COMMUNITY PASSAGEWAYS 7728 RAINIER AVE S SEATTLE, WA 98118 81-3806946 501(C)(3) 20,000 MATCHING GIFT (7) CORIELL INSTITUTE FOR MEDICAL RESEARCH 403 HADDON AVENUE CAMDEN, NJ 08103 21-0672684 501(C)(3) 7,500 MATCHING GIFT (8) CORNELL UNIVERSITY 377 PINE TREE ROAD ITHACA, NY 14850 15-0532082 501(C)(3) 15,100. MATCHING GIFT (9) CORONADO HOSPITAL FOUNDATION 1100 ORANGE AVE CORONADO, CA 92118 95-3872442 501(C)(3) 79,000. MATCHING GIFT (10) CROSSCUT MOUNTAIN SPORTS CENTER 1013 SOUTH BLACK AVENUE BOZEMAN, UT 59715 81-1818317 501(C)(3) 22,500. MATCHING GIFT (11) CULTURAL VISTAS INC 13-6199596 501(C)(3) 5,870 233 BROADWAY NEW YORK, NY 10279 MATCHING GIFT (12) DECATUR ELEMENTARY PTA 615.5 P.O. BOX 15289 SEATTLE, WA 98115 82-0726731 | 501(C)(3) 7,500 MATCHING GIFT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-23071	47
Part I General Information on Grants ar	nd Assistanc	е				•	
 Does the organization maintain records to set the selection criteria used to award the grant Describe in Part IV the organization's process. 	nts or assistand dures for mo	ce?	of grant funds in th	e United States.			X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient		•					es" 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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) DELAWARE VALLEY TORAH INSTITUTE							
31 MAPLE AVE CHERRY HILL, NJ 08002	22-3689784	501(C)(3)	10,000.				MATCHING GIFT
(2) DIOCESE OF NEW JERSEY							
808 W STATE ST TRENTON, NJ 08618	21-0634592	501(C)(3)	7,346.				MATCHING GIFT
(3) DOCTORS WITHOUT BORDERS USA							
333 SEVENTH AVE NEW YORK, NY 10001	13-3433452	501(C)(3)	9,000.				MATCHING GIFT
(4) DOWNEAST RAIL HERITAGE PRESERVATION							
P.O. BOX 621 ELLSWORTH, ME 04605	16-1714124	501(C)(3)	30,000.				MATCHING GIFT
(5) EARTHJUSTICE							
50 CALIFORNIA ST SAN FRANCISCO, CA 94111	94-1730465	501(C)(3)	7,700.				MATCHING GIFT
(6) EASTSIDE JEWISH COMMONS							
3439 NE SANDY BLVD1700 PORTLAND, OR 97232	82-5520534	501(C)(3)	10,000.				MATCHING GIFT
(7) FAIRFAX YOUTH INC							
10021 BLUE COAT DR FAIRFAX, VA 22030	45-2851348	501(C)(3)	12,500.				MATCHING GIFT
(8) FISHER HOUSE FOUNDATION							
111 ROCKVILLE PIKE ROCKVILLE, MD 20850	11-3158401	501(C)(3)	11,056.				MATCHING GIFT
(9) FRESH START SURGICAL GIFTS							
2011 PALOMAR AIRPORT RD CARLSBAD, CA 92011	87-0749239	501(C)(3)	19,000.				MATCHING GIFT
(10) GIVEDIRECTLY INC							
PO BOX 3221 NEW YORK, NY 10008	27-1661997	501(C)(3)	5,370.				MATCHING GIFT
(11) GOOD SHEPHERD LUTHERAN CHURCH							
2139 NEW YORK AVE BROOKLYN, NY 11210	11-1817275	501(C)(3)	5,804.				MATCHING GIFT
(12) GRACE PRESBYTERIAN CHURCH							
637 INDIANA AVE WASHINGTON, DC 20004	20-3151770	501(C)(3)	22,700.				MATCHING GIFT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble		 •	
3 Enter total number of other organizations lis	sted in the line	e 1 table	<u> </u>		<u> </u>	<u> </u>	

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Name of the organization						Employer identification number	
THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants an	d Assistanc	е				•	
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process. 	ts or assistand	e?					X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient to		_			additional space is n		es" 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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GRAND AVENUE BAPTIST CHURCH							
612 24TH ST AMES, IA 50010	71-6083127	501(C)(3)	12,000.				MATCHING GIFT
(2) HOMES FOR OUR TROOPS							
6 MAIN ST TAUNTON, MA 02780	54-2143612	501(C)(3)	15,084.				MATCHING GIFT
(3) INTERNATIONAL RESCUE COMMITTEE							
122 E 42ND ST NEW YORK, NY 10168	13-5660870	501(C)(3)	10,574.				MATCHING GIFT
(4) KANSAS STATE UNIVERSITY FOUNDATION							
1800 KIMBALL AVE MANHATTAN, KS 66502	48-0667209	501(C)(3)	7,000.				MATCHING GIFT
(5) MARYLAND YOUTH BALLET INC							
926 ELLSWORTH DR SILVER SPRING, MD 20910	52-0943959	501(C)(3)	6,112.				MATCHING GIFT
(6) MCLEAN PRESBYTERIAN CHURCH							
1020 BALLS HILL RD MC LEAN, VA 22101	54-0957095	501(C)(3)	19,000.				MATCHING GIFT
(7) METRO AREA NBHOOD NUTRITION ALLIANCE							
420 N 20TH ST PHILADELPHIA, PA 19130	23-2586142	501(C)(3)	6,825.				MATCHING GIFT
(8) MONTGOMERY CHILD CARE ASSOCIATION							
3204 TOWE OAK BLVD ROCKVILLE, MD 20852	52-0880656	501(C)(3)	6,450.				MATCHING GIFT
(9) NRIVA INC							
PO BOX 410843 ST LOUIS, MO 63141	26-1923816	501(C)(3)	10,000.				MATCHING GIFT
(10) NURSE FAMILY PARTNERSHIP							
1900 GRANT ST 4TH FL DENVER, CO 80203	20-0234163	501(C)(3)	14,000.				MATCHING GIFT
(11) OUR LADY QUEEN OF PEACE CHURCH							
3800 ELY PL SE WASHINGTON, DC 20019	53-0213313	501(C)(3)	12,310.				MATCHING GIFT
(12) PHILABUNDANCE							
3616 S GALLOWAY ST PHILADELPHIA, PA 19148	23-2290505	501(C)(3)	12,254.				MATCHING GIFT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations lis	sted in the line	1 table	<u> </u>			<u></u> . >	
For Paperwork Reduction Act Notice, see the Instruc							nedule I (Form 990) (2019)

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

Go to www.hs.gov/i ormsso for the latest information.

THE PEW CHARITABLE TRUSTS 56-2307147 **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 No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of 1 (a) Name and address of organization (b) EIN (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) PHILADELPHIA FOUNDATION 1835 MARKET ST PHILADELPHIA, PA 19103 23-1581832 501(C)(3) 5,800 MATCHING GIFT (2) PHILADELPHIA OUTWARD BOUND CENTER 3401 RESERVOIR DR PHILADELPHIA, PA 19122 56-2472884 501(C)(3) 13,800. MATCHING GIFT (3) PLANNED PARENTHOOD ASSOC WASHINGTON DC 53-0204621 501(C)(3) 1225 4TH STREET, NE WASHINGTON, DC 20002 23,486. MATCHING GIFT (4) PRAJNA 13619 BECKINGHAM DR HERNDON, VA 20171 82-4549345 501(C)(3) 5,900 MATCHING GIFT (5) RESTORE CHRISTIAN CHURCH PO BOX 1503 JACKSONVILLE, NC 28541 81-3141927 501(C)(3) 15,000. MATCHING GIFT (6) SAINT LUKES EPISCOPAL CHURCH TRINITY PARISH 6030 GROSVENOR LN BETHESDA, MD 20814 52-0681145 501(C)(3) 7,500 MATCHING GIFT (7) SAINT PAULS CHURCH AT CHESTNUT HILL 22 CHESTNUT HILL AVE PHILADELPHIA, PA 19118 23-1352475 501(C)(3) 6,000 MATCHING GIFT (8) ST CONSTANTINE GREEK ORTHODOX CHURCH DC 701 NORWOOD RD SILVER SPRING, MD 20905 53-0204595 501(C)(3) 40,000 MATCHING GIFT (9) SAVE OUR WILD SALMON COALITION 811 1ST AVE STE 305 SEATTLE, WA 98104 91-1673170 501(C)(3) 8,000. MATCHING GIFT (10) SEXUAL MINORITY YOUTH ASSISTANCE LEAGUE 410 7TH ST SE WASHINGTON, DC 20003 52-1394900 501(C)(3) 5,500 MATCHING GIFT (11) SHREWSBURY PARISH CHURCH 45-5412991 501(C)(3) 8,000 12824 SHREWSBURY RD KENNEDYVILLE, MD 21645 MATCHING GIFT (12) SHRINE OF THE MOST BLESSED SACRAMENT 3630 OUESADA ST NW WASHINGTON, DC 20015 53-0208375 501(C)(3) 10,100. MATCHING GIFT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Employer identification number

THE PEW CHARITABLE TRUSTS							56-2307147				
Part I General Information on Grants and	d Assistanc	е				'					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	ce?	of grant funds in the	e United States.			X Yes No				
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.											
(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) SOKA GAKKAI INTERNATIONAL-USA, INC.											
606 WILSHIRE BLVD SANTA MONICA, CA 90401	95-2265667	501(C)(3)	19,550.				MATCHING GIFT				
(2) SOME INC											
60 O ST NW WASHINGTON, DC 20001	23-7098123	501(C)(3)	5,617.				MATCHING GIFT				
(3) ST MARKS EPISCOPAL CHURCH											
PO BOX 337 PERRYVILLE, MD 21903	23-7420705	501(C)(3)	7,145.				MATCHING GIFT				
(4) ST. MARY'S EPISCOPAL CHURCH											
36 ARDMORE AVE ARDMORE, PA 19003	23-1352469	501(C)(3)	24,000.				MATCHING GIFT				
(5) TEMPLE EMANUEL											
10101 CONNECTICUT AVE KENSINGTON, MD 20895	52-0642790	501(C)(3)	5,475.				MATCHING GIFT				
(6) THE BEMENT SCHOOL											
PO BOX 8 DEERFIELD, MA 01342	04-2234135	501(C)(3)	32,122.				MATCHING GIFT				
(7) THE OPERA COMPANY OF PHILADELPHIA											
1420 LOCUST ST PHILADELPHIA, PA 19102	23-1504706	501(C)(3)	10,000.				MATCHING GIFT				
(8) TIDES FOUNDATION											
PO BOX 29903 SAN FRANCISCO, CA 94129	51-0198509	501(C)(3)	13,616.				MATCHING GIFT				
(9) TRINITY CHURCH											
6151 CENTRAL AVE INDIANAPOLIS, IN 46220	42-1638522	501(C)(3)	10,840.				MATCHING GIFT				
(10) UNITED PENTECOSTAL CHURCH INTERNATIONAL INC											
36 RESEARCH PARK SAINT CHARLES, MO 63304	43-0679185	501(C)(3)	7,648.				MATCHING GIFT				
(11) UNITED WAY OF GREATER PHILA AND SOUTHERN NJ											
1709 B FRANKLIN PKWY PHILADELPHIA, PA 19103	23-1556045	501(C)(3)	18,750.				MATCHING GIFT				
(12) UNITED WAY OF PALM BEACH COUNTY											
477 ROSEMARY AVE W PALM BEACH, FL 33401	59-0683258	501(C)(3)	6,000.				MATCHING GIFT				
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			<u> </u>				
3 Enter total number of other organizations list	ted in the line	1 table	<u> </u>			<u> </u>					

JSA

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047 2019

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants and	d Assistanc	е				•	
1 Does the organization maintain records to se	ubstantiate th	ne amount of the	e grants or assista	nce, the grantees	s' eligibility for the grant	s or assistance, and	
the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D					aplata if the organiz	ation answered "V	os" on Form 000
		•					es on Form 990,
Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can I	be duplicated if a	<u> </u>	ieeaea.	_
(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) UNIVERSITY OF GEORGIA FOUNDATION							
394 S MILLEDGE AVE ATHENS, GA 30605	58-6033837	501(C)(3)	10,100.				MATCHING GIFT
(2) UNIVERSITY OF VIRGINIA ALUMNI ASSOC							
PO BOX 400314 CHARLOTTESVLE, VA 22904	54-0485595	501(C)(3)	5,600.				MATCHING GIFT
(3) WASHINGTON COLLEGE							
300 WASHINGTON AVE CHESTERTOWN, MD 21620	52-0591691	501(C)(3)	10,000.				MATCHING GIFT
(4) WGBH EDUCATIONAL FOUNDATION							
1 GUEST ST BOSTON, MA 02135	04-2104397	501(C)(3)	21,414.				MATCHING GIFT
(5) WOODMERE ART MUSEUM							
9201 GERMANTOWN AVE PHILADELPHIA, PA 19118	23-1381459	501(C)(3)	37,500.				MATCHING GIFT
(6) WORLD CENTRAL KITCHEN INCORPORATED							
1342 FLORIDA AVE NW WASHINGTON, DC 20009	27-3521132	501(C)(3)	10,681.				MATCHING GIFT
(7) YOUTH SENTENCING & REENTRY PROJECT							
1528 WALNUT ST PHILADELPHIA, PA 19102	47-1153595	501(C)(3)	19,650.				MATCHING GIFT
(8) ARCTIC RESEARCH CONSORTIUM OF THE UNITED ST							
3535 COLLEGE RD STE 101 FAIRBANKS, AK 99709	92-0137088	501(C)(3)	20,000.				SPONSORSHIP
(9) CALIFORNIA COUNTIES FOUNDATION							
1100 K ST STE 101 SACRAMENTO, CA 95814	68-0017965	501(C)(3)	15,000.				SPONSORSHIP
(10) CONSUMER FEDERATION OF AMERICA							
1620 I ST NW WASHINGTON, DC 20006	52-0880625	501(C)(3)	10,000.				SPONSORSHIP
(11) COUNCIL OF STATE CHAMBERS OF COMMERCE							
515 KING ST ALEXANDRIA, VA 22314	35-0827885	501(C)(6)	25,000.				SPONSORSHIP
(12) ENVIRONMENTAL GRANTMAKERS ASSOCIATION							
475 RIVERSIDE DR RM 900 NEW YORK, NY 10115	20-8817646	501(C)(3)	20,000.				SPONSORSHIP
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble			
3 Enter total number of other organizations list	ted in the line	1 table	<u></u>	<u> </u>	<u> </u>	<u></u> .▶	
For Paperwork Reduction Act Notice, see the Instruct							nedule I (Form 990) (2019)

JSA

9E1288 1.000

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-230714	1 7
Part I General Information on Grants an	d Assistanc	е				•	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	ts or assistand dures for mo	ce?	of grant funds in th	e United States.			X Yes No
Part II Grants and Other Assistance to Deart IV, line 21, for any recipient to		_					es" on Form 990,
(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) GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS							
1725 DESALES ST NW WASHINGTON, DC 20036	01-0669150	501(C)(3)	18,000.				SPONSORSHIP
(2) GRANTMAKERS IN HEALTH							
1100 CONNECTICUT AVE WASHINGTON, DC 20036	13-3206571	501(C)(3)	8,500.				SPONSORSHIP
(3) JOHN JAY COLLEGE FOUNDATION							
524 W 59TH ST NEW YORK, NY 10019	13-3683676	501(C)(3)	7,500.				SPONSORSHIP
(4) NATIONAL ASSOCIATION OF BLACK JOURNALISTS							
1100 KNIGHT HALL COLLEGE PARK, MD 20742	52-1266959	501(C)(3)	13,000.				SPONSORSHIP
(5) NATIONAL ASSOCIATION OF COUNTIES							
660 N CAPITOL ST WASHINGTON, DC 20001	53-0190321	501(C)(4)	25,000.				SPONSORSHIP
(6) NATIONAL BLACK CAUCUS OF STATE LEGISLATORS							
444 N CAPITOL ST NW WASHINGTON, DC 20001	52-1218832	501(C)(3)	10,000.				SPONSORSHIP
(7) NATIONAL CONFERENCE OF STATE LEGISLATURE							
7700 E. FIRST PLACE DENVER, CO 80230	84-0772595	GOVT. INTSTRMNT	10,000.				SPONSORSHIP
(8) NATIONAL LIEUTENANT GOVERNORS ASSOCIATION							
71 CAVALIER BLVD FORT WRIGHT, KY 41011	61-1227811	501(C)(3)	10,000.				SPONSORSHIP
(9) NCSL FOUNDATION							
7700 E 1ST PLACE DENVER, CO 80230	74-2232576	501(C)(3)	12,500.				SPONSORSHIP
(10) POLITICO LLC							
1000 WILSON BLVD ARLINGTON, VA 22209	27-4022975		75,000.				SPONSORSHIP
(11) RESTORE AMERICA'S ESTUARIES							
2300 CLARENDON BLVD ARLINGTON, VA 22201	54-1965304	501(C)(3)	10,000.				SPONSORSHIP
(12) SOCIETY OF ENVIRONMENTAL JOURNALISTS							
1629 K ST NW STE 300 WASHINGTON, DC 20006	52-0194031	501(C)(3)	10,000.				SPONSORSHIP
2 Enter total number of section 501(c)(3) and	government	organizations lis	ted in the line 1 tal	ole		 •	328.
3 Enter total number of other organizations lis	ted in the line	1 table	<u> </u>	<u> </u>	<u> </u>	<u> </u>	5.

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

Schedule I (Form 990) (2019)

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					

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

FORM 990, SCHEDULE I, PART I, LINE 2 AND PART II

PEW'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES BY UNRELATED ORGANIZATIONS 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

Schedule I (Form 990) (2019)

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					

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

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

Schedule I (Form 990) (2019)

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					

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

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

BENEFIT TO ANY POLITICAL PARTY OR CANDIDATE; (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 REASONABLE BASIS THROUGHOUT THE TERM OF THE GRANT, 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 AUDIT RECORDS RELATED TO THE GRANTEE'S GRANT FUNDED ACTIVITIES, 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.

Schedule I (Form 990) (2019)

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

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 MAY ALSO EXERCISE OVERSIGHT

Schedule I (Form 990) (2019)

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					

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

OVER THE GRANTEE THROUGH 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 TO SECTION 501(C)(3) ORGANIZATIONS

(EXCEPT FOR PRIVATE NONOPERATING FOUNDATIONS). MATCHING GIFTS TO

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

PEW DOES NOT REQUIRE RECIPIENTS OF MATCHING GIFTS OR SPONSORSHIPS TO

REPORT ON THE USE OF THESE FUNDS.

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

THE PEW CHARITABLE TRUSTS

Inspection Employer identification number

56-2307147

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Y Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		37	
•	explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line		X	
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			37
_	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			v
•	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	_		
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

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	f 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)	985,380.	0.	254,150.	33,600.	22,676.	1,295,806.	0.		
1 PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.		
SUSAN K. URAHN	(i)	645,922.	0.	36,677.	33,600.	13,413.	729,612.	0.		
2EVP, CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.		
LINDA BARTLETT	(i)	472,067.	0.	29,004.	29,993.	30,054.	561,118.	0.		
3SVP, FINANCE AND CFO	(ii)	0.	0.	0.	0.	0.	0.	0.		
JANICE BOGASH	(i)	458,360.	0.	28,504.	33,600.	22,781.	543,245.	0.		
SVP, CHIEF ADMIN OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.		
SALLY A. O'BRIEN	(i)	447,997.	0.	30,485.	33,600.	12,353.	524,435.	0.		
5 ^{SVP} INSTITUTIONAL PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.		
MELISSA SKOLFIELD	(i)	402,287.	0.	29,456.	33,600.	25,355.	490,698.	0.		
6 COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.		
R. JAMES G. MCMILLAN	(i)	413,306.	0.	30,204.	33,600.	8,617.	485,727.	0.		
7 ^{SVP} , GENERAL COUNSEL/CORP SEC	(ii)	0.	0.	0.	0.	0.	0.	0.		
TAMERA LUZZATTO	(i)	372,546.	0.	29,218.	33,600.	4,900.	440,264.	0.		
8 GOVERNMENT RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.		
THOMAS DILLON	(i)	324,128.	0.	9,018.	33,600.	35,816.	402,562.	0.		
9 ^{VP & HEAD OF ENVIRONMENT}	(ii)	0.	0.	0.	0.	0.	0.	0.		
MICHAEL THOMPSON	(i)	326,009.	0.	7,390.	33,123.	30,888.	397,410.	0.		
10 VP & HEAD OF GOVT. PERFORMANCE	(ii)	0.	0.	0.	0.	0.	0.	0.		
THOMAS WATHEN	(i)	267,759.	0.	25,629.	33,600.	31,067.	358,055.	0.		
11 VP, ENVIRONMENT	(ii)	0.	0.	0.	0.	0.	0.	0.		
LESTER BAXTER	(i)	278,678.	0.	11,647.	33,600.	30,172.	354,097.	0.		
12 ^{VP, STRATEGY}	(ii)	0.	0.	0.	0.	0.	0.	0.		
SARAH SENNO	(i)	205,858.	0.	21,172.	27,194.	28,383.	282,607.	0.		
13 VP, FINANCE AND TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.		
	(i)									
14	(ii)									
	(i)									
15	(ii)									
	(i)									
16	(ii)									

Schedule J (Form 990) 2019

Part | 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

THE CEO WAS REIMBURSED \$341 FOR A CAR SERVICE. THIS BENEFIT WAS TREATED AS TAXABLE COMPENSATION TO THE CEO AND INCLUDED IN HER FORM W-2. THE SVP, INSTITUTIONAL PARTNERSHIPS WAS PROVIDED A CAR SERVICE FOR A PERIOD OF TWO WEEKS AT A COST OF \$1,731 WHICH WAS TREATED AS TAXABLE COMPENSATION 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 FOUR HOURS. IF TOTAL FLIGHT TIME
EXCEEDS FOUR 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 FOUR HOURS, PEW PROVIDES FIRST CLASS ACCOMMODATIONS
AND DOES NOT TREAT THE COST OF THE UPGRADE AS TAXABLE INCOME. DURING THE
CALENDAR YEAR, THREE DIRECTORS WERE PROVIDED WITH FIRST CLASS AIR TRAVEL
FOR PEW BUSINESS TRIPS BECAUSE BUSINESS CLASS ACCOMMODATIONS WERE NOT
AVAILABLE.

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

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 2019 FORM W-2.

Department of the Treasury

Internal Revenue Service

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.

Name of the organization

OMB No. 1545-0047

2019

Open to Public

Inspection

Employer identification number

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

THE	PEW CHARITABLE TRUSTS										56-2	23072	147		
Part	t Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issu	ed (e) I	ssue price	(f) De	(f) Description of purpose			efeased	(h) beha issa	alf of	(i) Poo financ	
										Yes	No	Yes	No	Yes	No
A DI	ISTRICT OF COLUMBIA	536001131	2548392M4	03/26/20	08 18	0,000,000.	SEE PART VI				Х		Х		Х
В														<u> </u>	
_															
<u>C</u>										-				<u> </u>	
_															
D Par	t II Proceeds														
Гаі	Floceeus					Α		В		•					
1	Amount of bonds retired									<u>, </u>				-	
2	Amount of bonds legally defeased														
3	Total proceeds of issue				180,	436,751									
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					900,000									
10	Capital expenditures from proceeds				179,	536,751	•								
11	Other spent proceeds														
12	Other unspent proceeds				2.0	0.0									
13	Year of substantial completion				20								—		
14	Were the bonds issued as part of a refund	ling ignue of to	v ovomnt h	anda (ar	Yes	No	Yes	No	Yes	No		Yes	+	No	
14	if issued prior to 2018, a current refunding issue	•	•	` '		X									
15	Were the bonds issued as part of a refun												-		
	issued prior to 2018, an advance refunding issue					x									
16	Has the final allocation of proceeds been made?	· · · · · · · · · · · · · · · · · · ·				X							+		
17	Does the organization maintain adequate I														
	final allocation of proceeds?			•		X									

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

Schedule K (Form 990) 2019

Page 2

Schedule K (Form 990) 2019

Part	Private Business Use	PEW CHARITABLE TRUSTS									
			Α	I	В		C	Г	<u> </u>		
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No		
	which owned property financed by tax-exempt bonds?	1	X								
2	Are there any lease arrangements that may result in private business use of							ļ			
	bond-financed property?										
	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							ļ			
	counsel to review any management or service contracts relating to the financed property?										
	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							ļ			
	outside counsel to review any research agreements relating to the financed property?										
	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		%		%		%		<u>%</u>		
	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		%		%		%		%		
	Total of lines 4 and 5		%		%		%		<u> </u>		
	Does the bond issue meet the private security or payment test?		X								
	Has there been a sale or disposition of any of the bond-financed property to a							ļ			
	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		%		%		%		<u>%</u>		
	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations										
	sections 1.141-12 and 1.145-2?										
	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?	ı	X								
Part	IV Arbitrage		_								
			A		В				<u> </u>		
	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and		No	Yes	No	Yes	No	Yes	No		
	Penalty in Lieu of Arbitrage Rebate?	1	X								
	If "No" to line 1, did the following apply?										
	Rebate not due yet?										
	Exception to rebate?										
	No rebate due?										
	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?	X	1		1		1		1		

Schedule K (Form 990) 2019

JSA

Schedule K (Form 990) 2019 Page 3 Arbitrage (continued) Part IV С Α В D No Yes No Yes No Yes No Yes 4a Has the organization or the governmental issuer entered into a qualified Χ hedge with respect to the bond issue?............ d Was the hedge superintegrated?..... e Was the hedge terminated?...... 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? **6** Were any gross proceeds invested beyond an available temporary period? Χ 7 Has the organization established written procedures to monitor the requirements of section 148? Χ **Procedures To Undertake Corrective Action** Part V Α В С D Yes No Yes No Yes No Yes No Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions Part VI

Page 4

Schedule K (Form 990) 2019

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

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

PLUS \$436,751 OF ACCRUED INTEREST.

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.

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE PEW CHARITABLE TRUSTS

Employer identification number

56-2307147

Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles.							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		1.	665,570.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received	-	-		20			
	which the organization completed F	orm 8283,	Part IV, Donee Acknowledg	ement	29		V	Na
20-	During the year did the argenizate		hu aantribution anu nrana	which appeared in Doubline	o 1 through		Yes	NO
30a	During the year, did the organizat				_			ĺ
	28, that it must hold for at least the					30a		Х
h	to be used for exempt purposes for If "Yes," describe the arrangement i		olding period?			Jua		
	-		tongo naligy that require	on the review of any	nonotondord			ĺ
3 I	Does the organization have a			-		31	Х	
322	contributions? Does the organization hire or use					31		
JZd	contributions?	-		•		32a		Х
h	If "Yes," describe in Part II.					JEA		
	If the organization didn't report an	amount in o	column (c) for a type of pro-	nerty for which column (a)	is checked			
	describe in Part II.	amount in C	oralini (o) for a type of pro	porty for willon column (a,	is officiated,			

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Schedule M (Form 990) 2019

Schedule M (Form 990) (2019) Page **2**

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART 1, COLUMN (B)

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN (B).

SCHEDULE M, LINE 9

AS PER IRS INSTRUCTIONS, PEW TREATS EACH GIFT OF MULTIPLE SHARES OF A

SINGLE SECURITY AS A SINGLE CONTRIBUTION AND DOES NOT TREAT EACH

INDIVIDUAL SHARE AS A SEPARATE CONTRIBUTION.

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.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number 56-2307147

THE PEW CHARITABLE TRUSTS

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, FINANCE AND CHIEF

FINANCIAL OFFICER; SENIOR VICE PRESIDENT, GENERAL COUNSEL AND CORPORATE

SECRETARY; AND THE PRESIDENT AND CEO; AS WELL AS OUTSIDE INDEPENDENT

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, FINANCE AND CHIEF FINANCIAL OFFICER; THE SENIOR DIRECTOR, LEGAL AFFAIRS AND DEPUTY GENERAL COUNSEL; 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, FINANCE AND CHIEF FINANCIAL OFFICER 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:

(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 COMPENSATION

COMMITTEE FOR REVIEW AND CONSIDERATION, TOGETHER WITH WRITTEN OPINIONS

56-2307147

Employer identification number Name of the organization THE PEW CHARITABLE TRUSTS

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). THE COMMITTEE REVIEWS THE COMPENSATION CONSULTANT'S ANALYSES AND OPINIONS AT A MEETING, IN WHICH THE CONSULTANT PARTICIPATES AND RESPONDS TO QUESTIONS, AND RECOMMENDS ANY PROSPECTIVE COMPENSATION ADJUSTMENTS TO THE FULL BOARD FOR APPROVAL. THE FULL BOARD MAKES ANNUAL DECISIONS WITH RESPECT TO PROPOSED 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

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

WITH RESPECT TO THESE COMPENSATION ARRANGEMENTS.

THE ORGANIZATION'S WEBSITE. THE ORGANIZATION DOES NOT NORMALLY MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC. IN ACCORDANCE WITH TREAS.

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 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

THE ACTIVITY IS SUBSTANTIALLY RELATED TO PEW'S EXEMPT PURPOSES.

ACCORDINGLY, PEW HAS REPORTED SUCH INCOME ON THE FORM 990, PART VIII,

Name of the organization
THE PEW CHARITABLE TRUSTS

Employer identification number 56-2307147

LINE 2B, 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 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, 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.

Name of the organization

THE PEW CHARITABLE TRUSTS

Employer identification number

56-2307147

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 GAIN

CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS

(12,481,856)

OTHER CHANGES IN POSTRETIREMENT BENEFITS

(4,015,637)

REVERSAL OF PRIOR YEAR GRANT EXPENSE

2,154,534

TOTAL (14,272,455)

Schedule O (Form 990 or 990-EZ) 2019 Page 2

Name of the organization THE PEW CHARITABLE TRUSTS Employer identification number

56-2307147

ATTACHMENT 1

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

DESCRIPTION GRANTS EXPENSES REVENUE

284,745.

CONFERENCE CENTER REVENUE

901 E ST RENTAL REVENUE

6,650.

291,395.

TOTALS

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

AUSTRALIA

BELGIUM

UNITED KINGDOM

CHILE

FRENCH POLYNESIA

ATTACHMENT 3

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA,

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

 ${\tt MN,MS,NH,NJ,NM,NY,NC,OK,OR,PA,}$

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

Name of the organization Employer identification number 56-2307147 THE PEW CHARITABLE TRUSTS ATTACHMENT 4

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
M&R STRATEGIC SERVICES 1101 CONNECTICUT AVE NW WASHINGTON, DC 20036	CONSULTING	1,915,788.
VELIR STUDIOS 212 ELM STREET SOMERVILLE, MA 02144	WEBSITE SERVICES	1,558,740.
OGILVY PUBLIC RELATIONS WORLDWIDE 636 11TH AVENUE NEW YORK, NY 10036	CONSULTING	1,424,035.
GRASSROOTS SOLUTIONS 861 EAST HENNEPIN AVE, SUITE 350 MINNEAPOLIS, MN 55414	CONSULTING	1,196,834.
COLLABORATIVE DRUG DISCOVERY, INC 1633 BAYSHORE HWY, SUITE 342 BURLINGAME, CA 94010	SOFTWARE SERVICES	1,007,599.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

 \blacktriangleright 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.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

THE PEW CHARITABLE TRUSTS

Employer identification number 56-2307147

Part I	Identification of Disregarded Entities. Complete if the organization	answered "Yes" on	Form 990, Part I	V, 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	(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	g) 512(b)(13) rolled tity?	
							Yes	No
(1) PEW RESEARCH CENTER	20-0881724							
1615 L STREET NW	WASHINGTON, DC 20036	RESEARCH	PA	501(C)(3)	7	PEW	X	
(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	Х	
(7) MEDICAL TRUST	23-2131641							
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	Х	

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

Schedule R (Form 990) 2019

JSA

9E1307 1.000

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

 \blacktriangleright 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.

OMB No. 1545-0047
2019
Open to Public
Inspection

Name of the organization

THE PEW CHARITABLE TRUSTS

Employer identification number
56-2307147

(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)		(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
						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	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

JSA

9E1307 1.000

Schedule R (Form 990) 2019

Part III	because it had one of more related organizations treated as a partnership during the tax year.										
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(I

	(a) Name, address, and EIN of related organization	Primary activity Legal domicil (state of	(c) Legal domicile (state or foreign	(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		h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	(j) eral or aging tner?	(k) Percentage ownership
			oounity)		,		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	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13 controlled entity?
(1)								Yes No
(2)								
(3)								
(4) (5)								
(6)								
(7)								

Schedule R (Form 990) 2019

Transactions With Related Organizations, Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36,

GII	Transactions That Related Organizations Complete in the organization and words 1700 on 1701 on 1700, 1			
Not	te: 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 more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
		1d		X
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		X
a	Sale of assets to related organization(s)	1g		X
	• (/	1h		X
i	Exchange of assets with related organization(s)	1i		X
i	Lease of facilities, equipment, or other assets to related organization(s).	1j		X
•	20000 01 10011110111, 01 011101 000000 10 10111011			
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
		1m		Х
	3,	1n	Х	
	chaining of racinitios, equipment, maining note, or earlier accord man related organization(e)	10	Х	
Ü	onaring of paid employees with related organization(5)			
n	Reimbursement paid to related organization(s) for expenses	1p	Х	
	Reimbursement paid by related organization(s) for expenses	1p 1q	Х	
ч	The imbursement paid by related organization (3) for expenses 1111111111111111111111111111111111	-		
_	Other transfer of cash or property to related organization(s)	1r	х	
S		1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thres		 S.	
_	(a) (b) (c)			
	Name of collected control from the collected of the colle			

2 If the answer to any of the above is Tes, see the instructions for information on who must complete	this line, including cove	ereu reiationsnips and trans	action tillesholds.
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PEW RESEARCH CENTER	В	42,100,000.	FAIR VALUE
(2) THE PEW MEMORIAL TRUST	С	187,073,830.	FAIR VALUE
(3) MARY ANDERSON TRUST	С	2,569,775.	FAIR VALUE
(4) J. HOWARD PEW FREEDOM TRUST	С	38,443,699.	FAIR VALUE
(5) THE KNOLLBROOK TRUST	С	462,912.	FAIR VALUE
(6) MEDICAL TRUST	С	11,434,400.	FAIR VALUE

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

		•				
Not	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 more re	elated organizations lis	ted in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			<u> 1</u> ;	а	<u> </u>
b	Gift, grant, or capital contribution to related organization(s)			1	b	<u> </u>
С	Gift, grant, or capital contribution from related organization(s)			<u> 1</u>		↓
	Loans or loan guarantees to or for related organization(s)					—
е	Loans or loan guarantees by related organization(s)			10	е	
				4		
	Dividends from related organization(s)					+-
	Sale of assets to related organization(s)					+-
h	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)			11	k	
ı	Performance of services or membership or fundraising solicitations for related organization(s)				_	
' m	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)				0	
	enaming of pand omproyood man rotation of gameanon (o)					
р	Reimbursement paid to related organization(s) for expenses			1	р	
	Reimbursement paid by related organization(s) for expenses					
Ċ						
r	Other transfer of cash or property to related organization(s)			1	r	
s	Other transfer of cash or property from related organization(s)			1:	s	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete the	is line, including cove	red relationships and transa	action thresho	lds.	
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of d		ing
		type (a-s)		amount i	nvolved	
(4)	MADEL DEW MYDIN EDLIGE	С	22 641 441	EATD 1771	1117	
(1)	MABEL PEW MYRIN TRUST	C	23,641,441.	FAIR VAI	ıUE	
(2)	J.N. PEW. JR. CHARTTABLE TRUST	C	18.522.574.	FATR VAT	JJE	

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	MABEL PEW MYRIN TRUST	С	23,641,441.	FAIR VALUE
(2)	J.N. PEW, JR. CHARITABLE TRUST	С	18,522,574.	FAIR VALUE
(3)	PEW RESEARCH CENTER	L, N, O		NO CHARGE
(4)	PEW RESEARCH CENTER	Q	6,447,842.	FAIR VALUE
(5)	PEW RESEARCH CENTER	R	3,152,588.	FAIR VALUE
(6)				

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019

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.

		(c) Legal domicile (state or foreign country)	income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	of Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes				Yes	No	(1 01111 1000)	Yes	No																																															
(1)																																																											
(2)																																																											
(3)																																																											
(4)																																																											
(5)																																																											
(6)																																																											
(7)																																																											
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(10)																																																											
(11)																																																											
(12)																																																											
(13)																																																											
(14)																																																											
(16)																																																											

Schedule R (Form 990) 2019

Part VI

Schedule R (Form 990) 2019 Page 5

Supplemental Information Part VII

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 **990-T**

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

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<u> </u>		y

OMB No. 1545-0047

07/01, 2019, and ending 06/30, 20 2 0 For calendar year 2019 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Open to Public Inspection for 501(c)(3) Organizations Only Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) D Employer identification number Check box if Name of organization (Check box if name changed and see instructions.) (Employees' trust, see instructions.) address changed THE PEW CHARITABLE TRUSTS **B** Exempt under section Print 56-2307147 X | 501(C)(3) Number, street, and room or suite no. If a P.O. box, see instructions. E Unrelated business activity code 220(e) 408(e) Type (See instructions.) 2005 MARKET STREET, SUITE 2800 408A 530(a) 529(a) City or town, state or province, country, and ZIP or foreign postal code C Book value of all assets PHILADELPHIA, PA 19103 812930 at end of year Group exemption number (See instructions.) 1299222104. Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust **H** Enter the number of the organization's unrelated trades or businesses. \triangleright 1 Describe the only (or first) unrelated trade or business here ▶UNRELATED GARAGE REVENUE If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. Yes X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes." enter the name and identifying number of the parent corporation. The books are in care of ▶LINDA BARTLETT Telephone number ► 202-552-2000 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 635,441. Gross receipts or sales 635,441. Less returns and allowances 1 c b Cost of goods sold (Schedule A, line 7) 2 635,441. 635,441. Gross profit. Subtract line 2 from line 1c 3 3 Capital gain net income (attach Schedule D) 4a 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) b 4b Capital loss deduction for trusts 4c С 5 Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 6 7 Unrelated debt-financed income (Schedule E) 8 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 12 635,441. 635,441. Total. Combine lines 3 through 12 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K). 71,861. 15 Salaries and wages 15 16 Repairs and maintenance 16 17 17 Interest (attach schedule) (see instructions) 18 18 416,956. 19 Taxes and licenses 19 Depreciation (attach Form 4562) 20 Less depreciation claimed on Schedule A and elsewhere on return 151,369. 21 21b 22 22 Contributions to deferred compensation plans 23 24 Employee benefit programs 24 25 Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) 26 26 379,585. 27 Other deductions (attach schedule) ATCH 1 Total deductions. Add lines 14 through 27 1,019,771. 28 28

For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2019)

-384,330.

-384,330.

29

30

Unrelated business taxable income. Subtract line 30 from line 29

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

29

30

56-2307147

Par	I otal Unrelated Business Taxable Income				
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see				
	instructions)	32		384,3	330.
33	Amounts paid for disallowed fringes	33			
34	Charitable contributions (see instructions for limitation rules)	34			
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line				
	34 from the sum of lines 32 and 33	35		384,3	330.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see				
	instructions)	36			
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37		384,3	
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38		1,(000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,				
	enter the smaller of zero or line 37	39		384,3	330.
Par	t IV Tax Computation				
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40			
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on				
	the amount on line 39 from: Tax rate schedule or Schedule D (Form 1041),				
42	Proxy tax. See instructions				
43	Alternative minimum tax (trusts only)				
44	Tax on Noncompliant Facility Income. See instructions				
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45			
Par	,				
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	-			
	Other credits (see instructions)	-			
	General business credit. Attach Form 3800 (see instructions)	-			
	Credit for prior year minimum tax (attach Form 8801 or 8827)	ا ۱			
	Total credits. Add lines 46a through 46d	$\overline{}$			
47	Subtract line 46e from line 45				
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Other (attach schedule) .				
49	Total tax. Add lines 47 and 48 (see instructions)				0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50			
	Payments: A 2018 overpayment credited to 2019	-			
	2019 estimated tax payments	-			
	Tax deposited with Form 8868	-			
	Foreign organizations: Tax paid or withheld at source (see instructions)	-			
	Backup withholding (see instructions)	-			
	Credit for small employer health insurance premiums (attach Form 8941)	-			
g	Other credits, adjustments, and payments: Form 2439				
E 0	Form 4136 Other Total ▶ 51g	ا ج			
52 52	Total payments. Add lines 51a through 51g	52			
53 54	Estimated tax penalty (see instructions). Check if Form 2220 is attached.	53 54			
55	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55			
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax				
	tVI Statements Regarding Certain Activities and Other Information (see instruction				
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature of		authority	Yes	No
31	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m		•		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the				
	here \blacktriangleright UK, AU, BE, PF, CL	rororgi	1 country	Х	
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ian trus			X
55	If "Yes," see instructions for other forms the organization may have to file.	gir ii us			
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$\bigs\\$				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the	best of m	ny knowledge	and beli	ief, it is
Sigi	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
Her	IVI	•	IRS discuss preparer sh		
		ee instructi		es	No
	Print/Type preparer's name Preparer's signature Date		PTIN		
Paid	RUSSLEE ARMSTRONG 4/21/2021 self-	employed	.	8838	3
-	Firm's name SRANT THORNTON LLP		36-605	5558	
Use			15-561-		

rm 990-T (2019)

Form 990-1 (2019)								Page 3	
Schedule A - Cost of G	oods Sold. E	Inter metho	d of invent	ory valuation)	>				
1 Inventory at beginning of y	vear 1			6 Inventory	at end of yea	ar	6		
2 Purchases	2					ld. Subtract line			
3 Cost of labor	3					here and in Part			
4a Additional section 263A c				I. line 2			7		
(attach schedule)	4a					section 263A (v		Yes No	
b Other costs (attach schedu						or acquired for			
5 Total. Add lines 1 through	/								
Schedule C - Rent Income	-	Property a	nd Perso	nal Property	Leased V	Vith Real Prope	rtv)		
(see instructions)	(1.10	оро у с	0.00	ilai i i opolity		· · · · · · · · · · · · · · · · · · ·	, ,		
Description of property									
(1)									
(2)									
(3)									
(4)	2 Pent rec	eived or accru	od						
						-			
(a) From personal property (if the for personal property is more the				d personal property or personal property			irectly connected with the income (a) and 2(b) (attach schedule)		
				s based on profit or			(-) =(-) (,	
(4)									
(1)									
(2)									
(3)									
(4)									
Total		Total				(b) Total deduction	ons.		
(c) Total income. Add totals of c	` '	` '				Enter here and or	n page 1,		
here and on page 1, Part I, line 6						Part I, line 6, colur	mn (B) >		
Schedule E - Unrelated D	ebt-Financed	income (s	ee instruct	ions)	2 [Doductions directly co	nnected with or allocable	to	
4. Description of del	. t. 6			income from or	3. 1		ced property	10	
1. Description of de	ot-linanced property			allocable to debt-financed property		nt line depreciation	(b) Other deductions		
			<u> </u>	, ,	(atta	ch schedule)	(attach schedu	e)	
(1)									
(2)									
(3)									
(4)	I								
4. Amount of average acquisition debt on or	5. Average ac		6.	. Column	7 Gross	income reportable	8. Allocable deduc	ctions	
allocable to debt-financed	debt-finance	ed property		divided		n 2 x column 6)	(column 6 x total of		
property (attach schedule)	(attach so	chedule)	Бу	column 5			3(a) and 3(b)	1	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
					Enter her	e and on page 1,	Enter here and on		
					Part I, lin	ne 7, column (A).	Part I, line 7, colur	nn (B).	
Totals				▶					
Total dividends-received deduc	ions included in	column 8							

Form **990-T** (2019)

Schedule F – Interest, Ann	annos, regamos			ntrolled Or				0 111011 4011	10110)		
Name of controlled organization	2. Employer identification number					of specified	included	of column 4 that is in the controlling ion's gross income		6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz						40.0		0.45-4.5-		4. De desette de discette	
7. Taxable Income	8. Net unrelated in (loss) (see instruct			Total of specific ayments made		includ	ert of column led in the co zation's gros	ntrolling		Deductions directly nnected with income in column 10	
(1)											
(2)											
(3)											
(4)							columns 5 a			dd columns 6 and 11.	
Totals	come of a Sec	tion 501	(c)(7),	(9), or (17		Part		mn (A).		ter here and on page 1, art I, line 8, column (B). 5. Total deductions	
1. Description of income	2. Amount of	income		directly cor (attach sch	nnected			t-asides schedule)		and set-asides (col. 3 plus col. 4)	
(1)											
(2)											
(3) (4)											
Totals ▶ Schedule I – Exploited Exe	Enter here and of Part I, line 9, co	olumn (A).	ther Th	an Adverti	isina In	ocome (ego inetru	uctions)		Enter here and on page 1 Part I, line 9, column (B).	
Schedule I - Exploited Exe	Activity in	conne, o	iliei ili				366 113110				
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expedired connected product unrelable business	tly ed with ion of ated	from unrelat or business 2 minus col If a gain, co	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.		Gross income from activity that is not unrelated business income G. Expenses attributable to column 5		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 page 1, line 10, o	Part I,					-		Enter here and on page 1, Part II, line 25.	
Schedule J-Advertising In	come (see instru	uctions)									
Part I Income From Peri	iodicals Report	ed on a	Consoli	idated Bas	sis						
1. Name of periodical	2. Gross advertising income	3. Dir	3. Direct advertising costs		tising ss) (col. bl. 3). If mpute bugh 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 (carry to Part II, line (5))										- 000 T	

Form **990-T** (2019)

Page 5 Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

	,	,				
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 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						
Totals, Part II (lines 1-5) ▶	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 26.
Schedule K - Compensatio		irectors, and Tr	ustees (see instr	uctions)	-	
1. Name		2. Title		3. Percent of time devoted to business	Compensation attributable to unrelated business	

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1 Part II line 14	·		

Form **990-T** (2019)

Regulation Section 1.263(a)-1(f) - De Minimis Safe Harbor Election

Taxpayer Name: THE PEW CHARITABLE TRUSTS

Taxpayer Address: 2005 MARKET ST, SUITE 2800, PHILADELPHIA, PA 19103

Taxpayer ID Number: <u>56-2307147</u>

Year-End: 06/30/2020

Under IRC Regulation Section 1.263(a)-1(f), the taxpayer hereby elects to apply the de minimis safe harbor election.

Regulation Section 1.263(a)-3(n) - Election to **Capitalize Repair and Maintenance Costs**

Taxpayer Name: THE PEW CHARITABLE TRUSTS

2005 MARKET ST, SUITE 2800, PHILADELPHIA, PA 19103 Taxpayer Address:

Taxpayer ID Number: <u>56-2307147</u>

Year-End: 06/30/2020

Under IRC Regulation Section 1.263(a)-3(n), the taxpayer hereby elects to capitalize repair and maintenance costs.

ATTACHMENT 1

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

MANAGEMENT COMPANY FEES MISCELLANEOUS EXPENSE

191,841. 187,744.

PART II - LINE 27 - OTHER DEDUCTIONS

379,585.

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

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

				NOI	L AVAILABLE
		NOL UTILIZED IN	NOL UTILIZED IN	F	OR FUTURE
TAX YEAR END	NOL GENERATED	PRIOR YEARS	CURRENT 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 AVAILABLE FOR FUTURE YEARS					(3,453,412)

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

		NO	L AVAILABLE
NOL UTILIZED IN	NOL UTILIZED IN	F	OR FUTURE
D PRIOR YEARS	CURRENT YEAR		YEARS
33) \$ -	\$ -	\$	(195,533)
30)			(384,330)
EARS		\$	(579,863)
	ED PRIOR YEARS	ED PRIOR YEARS CURRENT YEAR 33) \$ - \$ - 30)	NOL UTILIZED IN NOL UTILIZED IN FED PRIOR YEARS CURRENT YEAR 33) \$ - \$ - \$ 30)

*** THE ORGANIZATION INADVERTENTLY EXPENSED REPAIRS AND MAINTENANCE COSTS THAT SHOULD HAVE BEEN CAPITALIZED FOR TAX PURPOSES. THE NET OPERATING LOSS CARRYFORWARD FOR THE YEAR ENDED JUNE 30, 2019 HAS BEEN DECREASED BY \$69,611 TO ACCOUNT FOR THE DIFFERENCE BETWEEN THE ORIGINAL EXPENSE AND THE DEPRECIATION EXPENSE OF THESE NOW CAPITALIZED EXPENDITURES.

Form **4562**

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
2019
Attachment

Attachment Sequence No. 179

Department of the Treasury
Internal Revenue Service
Name(s) shown on return

Identifying number

THE PEW CHARITABLE TRUSTS 56-2307147 Business or activity to which this form relates GENERAL DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 6 (a) Description of property Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part | Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 16,436 during the tax year. See instructions Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) Section A 134,695 17 MACRS deductions for assets placed in service in tax years beginning before 2019 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction placed in only - see instructions) service 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L 27.5 yrs. MMS/L h Residential rental S/L 27.5 yrs. MM property 04/01/2020 37,118. 39 yrs. MMS/L 238. i Nonresidential real ММ property Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs. S/I **c** 30-year 30 yrs. MMS/L MM d 40-year 40 yrs. S/I Part IV Summary (See instructions.) Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 151.369

PAGE 131

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

56-2307147 Form 4562 (2019) Property (Include automobiles, certain other vehicles, certain aircraft, and property used entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) **24a** Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? Yes Yes No (e) (b) (i) (h) Business Basis for depreciation Type of property (list Date placed Recovery Method/ Depreciation Flected section 179 investment use (business/investment vehicles first) Convention deduction cost in service percentage Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions Property used more than 50% in a qualified business use: % Property used 50% or less in a qualified business use: S/L -% S/L -% S/L -Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1. Add amounts in column (i), line 26. Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (c) Vehicle 2 Vehicle 1 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 Total business/investment miles driven during the year (don't include commuting miles) Total commuting miles driven during the year. 32 Total other personal (noncommuting) 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal Yes No Yes No Yes No Yes No Yes No Yes No use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions. Yes No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by X your employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners X 39 Do you treat all use of vehicles by employees as personal use? Х 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the Χ use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions Χ Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortization (e) (b) (c) (d) (a) Amortization Date amortization Description of costs Amortizable amount Code section Amortization for this year period or begins percentage Amortization of costs that begins during your 2019 tax year (see instructions):

Form 4562 (2019)

43

JSA

Total. Add amounts in column (f). See the instructions for where to report

Amortization of costs that began before your 2019 tax year