

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form 990

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

TEINELOPE FOSTLARK DATE NOV 152010

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

OMB No 1545-0047

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1	Tax-ex	empt st		X						(1) or	T	527			15-71	No," a	ttach a list.	(see instru	ctions)		
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	art I	Sur	nmary											<del></del>							
Activities & Governance	2 3 4 5	Briefly describe the organization's mission or most significant activities  TO PROVIDE SUPPORT TO THE PEW CHARITABLE TRUSTS.  Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets.  Number of voting members of the governing body (Part VI, line 1a)													1 1						
Ą	6	Total r	number	r of v	olunteers (es	stimate if r	necessa	arv)									6				
	7a	Total o	ross u	nrela	ted business	revenue f	rom Pa	art VIII. col	amn	<u>(C) ⊒iñ</u>	 <del>a</del> 13	EIV/ES	<del></del>	ጎ · · · ·			7a	-1	.760	,425	_
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Revenue	8	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g)												-							
	10	Invest	ment ır	ncom	e (Part VIII, d	column (A	), lines	3, 4, and	7d).		<u> </u>	CAL IL	ፕ	T L	-9	93,	531	-12	,457	,063	•
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1c) 2, 087, 764 2, 876, 305													,309						
	12	Total r	evenue	e - ad	d lines 8 thre	ough 11 (i	must e	gual Part V	/III. c	olumn	(A), i	line 12)					233.			,754	
	13				r amounts pa										36,9					,223	
	14									• • •					30,3	<u> </u>	030		, = = 0	1223	•
	1																				
Se	15										04,	2031	1	,459	,002	.•					
Expenses	16a		rofessional fundraising fees (Part IX, column (A), line 11e)																		
Š	-  b	b Total fundraising expenses, Part IX, column (D), line 25) ►NONE													,						
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)										461		258	<u>,543</u>	.•						
	18	Total e	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)											,858	,428						
	19	Reven	ue less	expe	enses. Subtra	act line 18	from	line 12							-38,1	37,	661	-46	,439	,182	
50	3														Beginning				d of Ye		
Net Assets or	20	Total a	issete /	Part	X, line 16)										611,2	<del>-</del>				,182	
ASS.	21				rt X, line 26				• •	• • •			• • •	•••	<u> </u>	<u> </u>	NONE		, 010	NON	
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	990 (2009)			Page 2
	rt   Statement of Program Service Acc	complishments		
	Briefly describe the organization's mission: TO PROVIDE SUPPORT TO THE PEW	V CHARITABLE TRUSTS.		
3	If "Yes," describe these changes on Schedul Describe the exempt purpose achievements	make significant changes in how it  e O. for each of the organization's three	conducts, any programargest program services by expenses	
	Section 501(c)(3) and 501(c)(4) organizatio allocations to others, the total expenses, and			nts and
	(Code: )(Expenses \$ THE PEW CHARITABLE TRUSTS	including grants of \$ 35,14	0 , 223 . ) (Revenue \$	)
4b	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	)
	Other program services. (Describe in Sched (Expenses \$ including gran	ts of \$ ) (Revenue	\$ )	
4e	Total program service expenses ► 35,1	40,223.		Form <b>990</b> (2009)

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Fart	Checklist of Required Schedules			
2 Is the organization equived to complete Schedule B, Schedule of Contributors?  3 Did the organization engage in direct or indirect political campsign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II.  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II.  5 Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.  5 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II.  6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic lend areas, on historic structures? If "Yes," complete Schedule D, Part III.  7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV.  10 Did the organization in eport an amount in Part X, line 21; serve as a 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.  10 Did the organization organization report an amount for investments-program related in Part X, line 10? If "Yes," complete Schedule D, Part VVI.  11 List the organization report an amount for investments-program related in Part X, line 10? If "Yes," complete Schedule D, Part VVI.  12 Did the organization obtain separate or consolidated financial statements for the tax year? If "Yes," complete Schedul				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors?	1			v	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offices if "Yes," complete Schedule C, Part I.  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part III.  5 Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(c) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.  5 Did the organization maintain any doons advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part III.  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  7 Did the organization maintain collections of works of art, historical traesures, or other similar assets? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical traesures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization directly or through a related organization, hold assets in term, permanent, or quesi-endowments? If "Yes," complete Schedule D, Part IV.  10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quesi-endowments? If "Yes," complete Schedule D, Part VI.  10 Did the organization report an amount for investments other-securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  11 Is the organization report an amount for investments-program related in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  12 Did the organization report an amount for other lassets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  13 Did the organization orbatin asperate, independent audited financial statements for the tax year	2	·		^	v
acandidates for public offica? If "Yes," complete Schedule C, Part I.  Section S01(e)(13) arganizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II.  Sections S01(e)(14), 501(e)(5), and 501(e)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.  Did the organization maintain any donor advised funds or any similar funds or accounts where 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.  Did the organization maintain onlectons of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, ior provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  Did the organization included in amagement, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  Is the organization included in Conschibition of the Schedule D, Part VI.  Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  Did the organization report an amount for investments other-securities 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 VII.  Did the organization oreport an amount for other assets 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 VII.  Did the organization oreport an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization oreport an amount for other lubilities in Part X, line 15 that is 5% or more of					^_
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5 Sections 501(pl.4), 501(pl.5), and 501(pl.6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and provi tax? If "Yes," complete Schedule C, Part III.  6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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 II.  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization amount in Part X, line 21; serve as a 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.  10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  10 Did the organization is answer to any of the following questions "Yes"? If so, complete Schedule D, Part V.  11 Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  12 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 VIII.  13 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part XIII.  14 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 XIII.  15 Did the organization report an amount for other ass	•		4		x
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5 Did the organization maintain any donor advised funds or any similar funds or accounts where 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			5		
complete Schedule D, Part I.  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization report an amount in Part X, line 21; serve as a 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.  10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  10 Did the organization sanswer to any of the following questions "Yes?" If so, complete Schedule D, Part VI, VIII, VIII, IX, or X as applicable  11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  12 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 VIII.  13 Did the organization report an amount for other labilities 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.  14 Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, III.  15 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," land Yes, "complete Schedule D, Part X, III. All X III.  15 Did the organization nation and office, employees, or agents outside of the United States?  16 Did the organization report a total of more than \$15,000 of organization forganization report ton Part IX, column (A), line 3, more than \$5,000 of grants or assi	6				
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV.  10 Did the organization, directly or through a related organization, need to require a complete Schedule D, Part IV.  11 Is the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  11 Is the organization answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  12 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 VIII.  13 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  14 Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X.  15 Did the organization asparate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X.  16 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IX, IX, and XIII as optional.  16 Did the organization maintain an office, employees, or agents outside of the United States?  17 Did the organization maintain an office, employees,		complete Schedule D, Part I	6		Х
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
complete Schedule D, Part III		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
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X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  11 Is the organization in saw a spoilicable			8		Х
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reported in Part X, line 167 If "Yes," complete Schedule D, Part IX.  Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X.  Did the organization's liability for uncertain tax positions under FIN 487 If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year If "Yes," complete Schedule D, Parts XI, XII, and XIII.  12  Was the organization included in consolidated, independent audited financial statement for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  13  Is the organization maintain an office, employees, or agents outside of the United States?.  14  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I.  15  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III.  16  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III.  17  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3 more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III.  18  Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II.  18  Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes	•	·	- '		
Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.  12					-
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12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	7.		Ë
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If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			12		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12A				
Did the organization maintain an office, employees, or agents outside of the United States?		<del></del>			
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I					
business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I			14a		X
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	ь		146		v
organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		140		
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III			15		Y
to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16				
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I			16		x
on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	·			<u> </u>
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			17		X
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	·			<u> </u>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III			18		X
	19				
		If "Yes," complete Schedule G, Part III	19	<u> </u>	X
	20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	ŀ		
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			:
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If No, go to question 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	24c		Х
		24d	ļ	X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	۵۳.		٠.
	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			l
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		ļ	
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	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, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes." complete Schedule N.</i>		ļ	
••	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
<b>-</b>	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		A
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	}	v
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		X
34				
	III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X.
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	197 Note. All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
		F	000	/2000

<u>P</u> ari	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a	Х	ļ
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	ļ
4a	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		X
b	If Yes, enter the name of the foreign country:			}
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
_	and Financial Accounts.			37
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
C =	Prohibited Tax Shelter Transaction?	5c		-
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		\ <sub>V</sub>
	organization solicit any contributions that were not tax deductible?	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6ь		
7	gifts were not tax deductible?	OD	, , , , , , , , , , , , , , , , , , ,	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	,		
4	and services provided to the payor?	7a	<i>i</i>	Х
Ь	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	"		<del>                                     </del>
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	_8_		X
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the 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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against			
4.6	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b   0			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			
	Minimum and a second a second and a second a		Yes	No
1a	Enter the number of voting members of the governing body	Γ		
ь	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	İ		
_	any other officer, director, trustee, or key employee?	2		Х
3				
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		х
	supervision of officers, directors or trustees, or key employees to a management company or other person?			X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			١
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	1.5.		
•	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		<u> </u>
• •	form?	11	Х	
111			21	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	IZa	Λ.	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		v	
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		7.7	
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	ļ
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	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			ł
	with a taxable entity during the year?	16a	Х	
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	Х	
Sect	ion C. Disclosure	100		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶Pennsylvania			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3): available for public inspection. Indicate how you make these available. Check all that apply	only	,	
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	rest		
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	те		
	organization: ►THE GLENMEDE TRUST COMPANY, N.A. TEL: (215)419-6000			
JSA	1650 MARKET STREET, SUITE 1200; PHILADELPHIA, PA 19103-7391		000	(2009)
JUN		Form	4411	CAUUGI

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and 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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not com	pensate an	y curi	ent	offi	icer,	dırec	tor,	or trustee.		
(A)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
THE GLENMEDE TRUST COMPANY, N.A. TRUSTEE	40		Х					1,459,662	NONE	NON
										. <u>-</u>
								.,,,		

n 990 (2009) Page **8** 

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es, a	and F	ligh	nest Compensat	ed Emplo	yees (co	Page <b>o</b> entinued)
(A)	(B)			((	C)			(D)	(E)		(F)
Name and title	Average hours per week	Posit Individual trustee or director	nstitutional trustee	Officer	al Key employee	a Highest compensated amployee	(September Pormer	Reportable compensation from the organization (W-2/1099-MISC)	Reporta compens from rela organizat (W-2/1099	ation ated tions	Estimated amount of other compensation from the organization and related organizations
								_			
1b Total								1,459,662.		NONE	NON
Total number of individuals (including but not I reportable compensation from the organization		nose II	isted		ove	) who	rec	ceived more than \$	5100,000 II	n 	Yes No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3 X
4 For any individual listed on line 1a, is the the organization and related organizations individual	greater th	an \$	150	,000	0?	If "Y	es,"	complete Sched	pensation of the second	from such	4 X
5 Did any person listed on line 1a received services rendered to the organization? If "Yes,"											5 X
Section B. Independent Contractors											· · · · · · · · · · · · · · · · · · ·
1 Complete this table for your five highest compensation from the organization.	compensat	ed in	dep	end	ent	cont	ract	tors that received	more that	an \$100	,000 of
(A) Name and business add	ress							(B) Description of ser	vices	Co	(C) mpensation
SEE STATEMENT 1							-				
2 Total number of independent contractors (in more than \$100,000 in compensation from the				nited	to 1	thos	e li	isted above) who	received		12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Par	t VIII	Statement of Revenue	<del></del>				rage 3
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions)					
	h	Total Add lines 1a-1f					
Program Service Revenue	2a b c d		Business Code				
ogra	f	All other program service revenue					
<u>~</u>	3 3	Total. Add lines 2a-2f	<b>▶</b> est, and	5,193,614.			5,193,614
	4 5	Income from investment of tax-exempt bond p Royalties	roceeds ►				
	6a b c d	Cross Rents					
	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses					
	c d	Gain or (loss)	<u> </u>	-17650677.			-17650677
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)  See Part IV, line 18		-17650677.			-17630677
0	9a	Gross income from gaming activities.  See Part IV, line 19					
	ь	Less: direct expenses b					
	10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances a					
	b c	Less: cost of goods sold		•			
	11a	PARTNERSHIP INCOME		2,876,309.		-1,760,425	4.636.734
	b c	TIMINDROITI INCOM		2,0,0,305.	-	1,700,423	1,000,734
	d	All other revenue	<u> </u>	2 976 200			
	e 12	Total. Add lines 11a-11d				-1,760,425	-7,820,329

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complet	<del>-</del>		· .· .	
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	35,140,223.	35,140,223.		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,459,662.		1,459,662.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<del> </del>
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				<del></del>
11	Fees for services (non-employees):				
а	Management				
b	Legal				
	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
	Investment management fees	257,598.		257,598.	
g	Other	945.		945.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				<del></del>
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses	•			
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				<del></del> -
23	Insurance				<del></del>
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	···			<del>-</del>
C		-			
d				· -	
e		-			
	All other expenses	36 050 400	25 140 000	1 510 005	****
	Total functional expenses. Add lines 1 through 24f	36,858,428.	35,140,223.	1,718,205.	<u>NON</u> E
26	Joint Costs. Check here ► If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
		/			

Page 11

	990 (: t X				Page 11
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	145,093.
	2	Savings and temporary cash investments	15,478,491.	2	15,572,942.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	419,772.	4	5,540.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			***
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
et l	7	Notes and loans receivable, net		7	<u> </u>
Assets	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges		9	· - · · · · · · · · · · · · · · · · · ·
	10a	Land, buildings, and equipment cost or 10a			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities			216,285,001
	12	Investments - other securities. See Part IV, line 11	322,379,911.	12	332,801,60 <u>6</u> .
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	611,249,364.	16	564,810,182
	17	Accounts payable and accrued expenses		17	
1	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
٥	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key			
LIADIIICIES		employees, highest compensated employees, and disqualified			
3		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	1000	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	NONE	26	NON:
I		Organizations that follow SFAS 117, check here ▶ 🔲 and			
3		complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets		27	
8	28	Temporarily restricted net assets		28	
2	29	Permanently restricted net assets		29	
or runa balances		Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds	608,808,020.	30	561,094,772
2	31	Paid-in or capital surplus, or land, building, or equipment fund	•	31	· · · -
۲	32	Retained earnings, endowment, accumulated income, or other funds	2,441,344.	32	3,715,410
Net Assets	33	Total net assets or fund balances	611,249,364.	33	564,810,182
-	34	Total liabilities and net assets/fund balances	611,249,364.	34	564,810,182
_				<u></u> _1	Form 990 (2009

Form **990** (2009)

1 Accounting method used to prepare the Form 990. X Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Pa	rt XI Financial Statements and Reporting			
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O  2a Were the organization's financial statements compiled or reviewed by an independent accountant?				Yes	No
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1	Accounting method used to prepare the Form 990. X Cash Accrual Other			
Were the organization's financial statements compiled or reviewed by an independent accountant?					
b Were the organization's financial statements audited by an independent accountant?		Schedule O			
b Were the organization's financial statements audited by an independent accountant?	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	b		2b		X
the audit, review, or compilation of its financial statements and selection of an independent accountant?	С			_	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			2c		}
Schedule O  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					1
issued on a consolidated basis, separate basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	d		1		
Separate basis Consolidated basis Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	_				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			ļ		
the Single Audit Act and OMB Circular A-133?	3a				
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Ju		22		
	<b>.</b>		Ja		
reconed addition addition. Explain why in achequie of and describe any steps taken to differ to such addition ————————————————————————————————————	U		26		
Form <b>990</b> (200	_	required addit of addits, explain why in ochedule of and describe any steps taken to didengo such addits.		990	12000

#### **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.

OMB No. 1545-0047 Inspection

Department of the T Internal Revenue Se			► Attach to Form 990		o-EZ. ► S		e instruct	ions.		Open to Public Inspection
Name of the orga		n						Employe	r identificat	tion number
-		FREEDOM TRU	IST						23-6234	
		***	ty Status (All organi	izations m	ust comp	ete this	part.) Se			1071
			lation because it is: (Fo		•					
			rches, or association of				•			
<del></del>			n 170(b)(1)(A)(ii). (At			0001.01				
			nospital service organi			ction 170	( <b>Δ)(1)(Δ</b> )	(iii)		
			zation operated in co						170(h)(1)	(Δ)(iii) Enter the
		ime, city, and sta		njanotion	with a nos	pital desi	JIIDGU III	30000011	170(0)(1)	(A)(III). Eliter the
			or the benefit of a col	llege or un	iversity ou	med or o	nerated	hy a gove		unit described in
_		(b)(1)(A)(iv). (Co		nego or an	involutely of		poratou	o, a gove	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	unit described in
			ernment or governmer	ntal unit de	scribed in	section 1	70(b)(1)(	Δ)(υ)		
<b>——</b>		<del>-</del>	Ily receives a substant						or from t	he general nublic
	_		(1)(A)(vi). (Complete F	=	its suppor	t nom a ţ	Jovennin	siitai uiiit	or morn t	ne general public
			d in section 170(b)(1)(		molete Par	+ 11 \				
_			lly receives: (1) more				m contrib	outione n	nambarchi	n food and arose
			ted to its exempt fun							
-			ment income and un		-		•			
			after June 30, 1975.						STI (dx)	mom businesses
		•	nd operated exclusivel			-				
			and operated exclusive		-	-			nc of or	to corpy out the
	-	_	ublicly supported orga							•
			at describes the type of							
a [	Typ	r			e III - Funct					pe III - Other
			Type II c ertify that the organiz			-	-			
								-		-
		section 509(a)(	ion managers and oth	iei triaii oii	e or more	publicity s	supporter	ı oryanızı	ations de	scribed in section
		, , ,	2). La written determinat	tion from	tha IDC the	nt it 10 0	Type I 3	Funa II a	r Tuna III	aupporting
		, check this box						-	i Type III	
•		•								X
	-		the organization accep	pieu any g	iit or contri	bution ire	in any or	tne		
		ersons?	or indirectly controls	outhor of	one or tog	othor wat	h =0.000	م طممحنه	ad in fil	Yes No
			or indirectly controls				•			
		-	erning body of the supperson described in (i) a	-						
			of a person described							·
					-	• • • • •		• • • • •		11g(iii) X
		(ii) EIN	ation about the suppo			1 (.) [0.4]		6.31	- 41	(-21) A
(i) Name of supp organization	ortea   1	(II) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ou notify lization in		s the ion in col	(vii) Amount of support
· ·			above or IRC section		document?	col (i)	of your	(i) organi	zed in the	
			(see instructions))	Yes	NI.	1	oort?		S ?	
				res	No	Yes	No	Yes	No	
CDD COMPOND	NITT O									
SEE STATEME	TAT S					<del> </del>				·
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								-	<del>                                     </del>	
Total	ł				1					35,140,223
			1	1	1	i	I	1	i l	JJ . I + U . C C J

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

Schedule A (Form 990 or 990-EZ) 2009

	(Complete only if you check						N/A
	tion A. Public Support	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale	endar year (or fiscal year beginning in)	(8) 2003	(6) 2000	(6, 2007	(0) 2000	(0, 2000	(1) 1010.
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		i				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3				1		
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)					9	
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support	<del></del>		1)	**		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10		42.5				1
12	Gross receipts from related activities, etc. (se	e instructions)				12	<del></del>
13	First five years If the Form 990 is for organization, check this box and stop here	<u> </u>	<u> </u>				
Sec	tion C. Computation of Public Supp					<del> </del>	
14	Public support percentage for 2009 (lin					14	
15	Public support percentage from 2008 S					15	
16a	331/3% support test - 2009. If the or						
	this box and stop here. The organization	•		_			
b	331/3% support test - 2008. If the o	•					<b>I</b>
_	check this box and stop here. The orga						
I7a	10%-facts-and-circumstances test - 26						
	or more, and if the organization me Part IV how the organization meets the						
b	organization						▶ L. , and line
	15 is 10% or more, and if the orga Explain in Part IV how the organization supported organization	n meets the	"facts-and-circun	nstances" test.	The organization	on qualifies as	a publicly
18	Private foundation. If the organization	n did not che	ck a box on lin	e 13, 16a, 16	b, 17a, or 17b,	check this box	and see
	instructions					Schedule A (Form 9	

art	Support Schedule for Organi							אז / זא
ect	(Complete only if you checked ion A. Public Support	the box on	inte 9 of Part I	·!				N/A
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
	Gifts, grants, contributions, and							
	membership fees received. (Do not include						Ì	
	any "unusual grants.")							
2	Gross receipts from admissions, merchandise							
	sold or services performed, or facilities							
	furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are not an							
	unrelated trade or business under section 513							
4	Tax revenues levied for the organization's							
•	1							
	benefit and either paid to or expended on				]			
_	its behalf							<del></del>
5	The value of services or facilities							
	furnished by a governmental unit to the							
_	organization without charge							
	Total. Add lines 1 through 5		<del> </del>					
7a	Amounts included on lines 1, 2, and 3				1			
ь	Amounts included on lines 2 and 3				<b>_</b>	-		
•	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)			<u> </u>		<u> </u>		
	ion B. Total Support		T	1				
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e	2009	(f) Tota
9	Amounts from line 6				<u></u>			
0 a	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							
1	Net income from unrelated business							•
	activities not included in line 10b,							
	whether or not the business is regularly carried on							
2	Other income. Do not include gain or							
_	loss from the sale of capital assets					ł		
	(Explain in Part IV)		1					
3	Total support. (Add lines 9, 10c, 11,							
•	and 12)							
4	First five years. If the Form 990 is for	the organizatio	n'e firet second	third fourth or	r fifth tay year a	1 2 2	action 501	c)(3)
•	organization, check this box and stop here.	•			•			
ect	ion C. Computation of Public Sup							
5	Public support percentage for 2009 (line 8,		•	mn (f))		15		
6	Public support percentage from 2008 Sched					-		
	ion D. Computation of Investment					10		-
_				12 polymon (f))		17		
7	Investment income percentage for 2009 (III					-		
8	Investment income percentage from 2008 S						224 (52)	and the
Уa	33 1/3% support tests - 2009. If the or	_						
_	17 is not more than 33 1/3%, check th							
Ь	33 1/3% support tests - 2008. If the orga							
	line 18 is not more than 331/3%, check	this box and s	top here. The or	rganization gualif	ies as a publicly	suppo	rted organi	zation 🕨
20	Private foundation. If the organization		•				_	

**SCHEDULE 1** (Form 990) Department of the Treasury

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

OMB No 1545-0047

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

► Attach to Form 990.

2009	Open to Public Inspection
------	------------------------------

Internal Revenue Service		► Attach to Form 990	_•			Inspection
Name of the organization					Employer identification number	n number
J. HOWARD PEW FREEDOM TRUST	SŢ	•			23-6234671	71
Part   General Information on Grants and Assistance	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 the selection criteria used to award the grants or assistance?	o substantiate the amount of	the grants or assistand	ce, the grantees' elig	jibility for the grants		N N
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monitoring the us	se of grant funds in the	United States.	itates.		]
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	o Governments and Organy recipient that received (990) if additional space is	id Organizations in the United States. Complete if the organization answered "Yes" to sceived more than \$5,000. Check this box if no one recipient received more than \$5,00 bace is needed	ted States. Comp Check this box if r	lete if the organiza no one recipient re	ttion answered "Ye	s" to 5,000. Use
1 (a) Name and address of organization or government	(b) EIN (c) IRC section if applicable	Ę	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEE STATEMENT 3						
2 Enter total number of section 501(c)(3) and government organizations	ind government organizations					
S Enter total number of other organizations	ct Notice, see the Instruction	ns for Form 990.			Sched	Schedule I (Form 990) 2009
V 5						

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Schedule | (Form 990) 2009
Part | Grants an

(f) Description of non-cash assistance					and any other additional information.									Schedule I (Form 990) 2009
(e) Method of valuation (book, FMV, appraisal, other)					line 2,									
(d) Amount of non-cash assistance					to provide the information required in Part I,	                 		STS.	 					
(c) Amount of cash grant					provide the info	                 		ARITABLE TRU	 		 			
(b) Number of recipients						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		 HE PEW CH	 	                 	                     	 	       1	
(a) Type of grant or assistance	N/A				Part IV Supplemental Information. Complete this part	SCHEDULE I	[ [							

#### **SCHEDULE 0** (Form 990)

## **Supplemental Information to Form 990**

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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public ► Attach to Form 990. Inspection Employer identification number J. HOWARD PEW FREEDOM TRUST

Form 990
J. Howard Pew Freedom Trust (the "Trust") is a non-functionally integrated Type III supporting organization under
IRC Section 509(a)(3). Through annual distributions, the Trust provides support to The Pew Charitable Trusts
the supported organization, which is a public charity described in IRC Section 509(a)(1) and Section 170(b)(1)(A).
The Glenmede Trust Company, N.A. is the sole trustee of the Trust. The Trustee maintains a close and continuous
working relationship with the officers of the supported organization. The Trustee engages in regular ongoing
communication with the supported organization and ensures that the supported organization has a significant voice
in the operations of the Trust. In addition, the annual distribution to the supported organization from the Trust
represents a sufficient part of the supported organization's total support as it provides a significant portion of the
funding for a substantial program or activity of the supported organization.
······································
FORM 990
PART VI; SECTION B; LINE 11A
THE GLENMEDE TRUST COMPANY, N.A. IS SOLE TRUSTEE. THE FORM 990 IS PREPARED IN DETAIL BY A TAX
OFFICER OF THE GLENMEDE TRUST COMPANY, N.A. ONCE IN FINAL FORMAT, THE FORM 990 IS REVIEWED BY
THE MANAGING DIRECTOR OF PHILANTHROPIC SERVICES, AN OFFICER OF THE GLENMEDE TRUST COMPANY, N.A.,
AND THE TAX OFFICER BEFORE FILING WITH THE INTERNAL REVENUE SERVICE AND STATE AGENCIES.
FORM 990
PART VI; SECTION B; LINE 12C
THE ENTITY'S CONFLICT OF INTEREST POLICY IS MONITORED BY TRUSTEE'S COMPLIANCE DEPARTMENT.
·
FORM 990
PART VI; SECTION C; LINE 19
THE SUPPORTED CHARITY HAS RECEIVED A FULL COPY OF THE ENTITY'S GOVERNING DOCUMENTS. THE
DOCUMENTS ARE ALSO AVAILABLE UPON RESONABLE REQUEST.

OMB No 1545-0047

6234671

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

HOWARD PEW FREEDOM TRUST

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37. ▼ See separate instructions.

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public 2009

Employer identification number

23-6234671

Schedule R (Form 990) 2009 (f)
Direct controlling
entity (f) Direct controlling 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.) (e)
Public charity status
(if section 501(c)(3)) (e) End-of-year assets (d) Exempt Code section (d) Total income (c) Legal domicile (state or foreign country) (c)
Legal domicile (state
or foreign country) Primary activity Primary activity For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (a)Name, address, and EIN of related organization (a) Name, address, and EIN of disregardedentity Part I Part II

Page 2

Schedule R (Form 990) 2009

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)	elated Organization or more related o	ons Taxa rganizat	able as a Partner	r <b>ship</b> (Complete partnership du	if the organizaring the tax yea	ition answere ir.)	d "Yes" on Forr	n 990	, Part IV, line 34 23-6234671	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income		(g) Share of end-of-year assets	(h) Disproportionata allocations?	Code V-UBI smount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?
SEE STATEMENT 4				512-514)				Yes	No	Yes No
Part IV line 34 because it had one or more related organi	lated Organization it had one or mo	ons Taxa		a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part zations treated as a corporation or trust during the tax year.)	Complete if the or trus	organization t during the ta	answered "Yes	on I	orm 990, Part	
(a) Name, address, and EIN of related organization	related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	оте	(g) Share of end-of-year assets	(h) Percentage ownership
AS:									Schedule R (Form 990) 2009	990) 2009

Yes Amount involved 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 thresholds. 13 ā þ ပ 79 + 7 9 1 5 <u>1</u> 5 \* Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36) Loans or loan guarantees by other organization(s) . . . . . . . . . . . . . Transaction type (a r) 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? Other transfer of cash or property from other organization(s)................... Lease of facilities, equipment, or other assets from other organization(s) Performance of services or membership or fundraising solicitations for other organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. (a) Name of other organization Gift, grant, or capital contribution to other organization(s) Loans or loan guarantees to or for other organization(s) Part V உ ... \_ ¥ \_ E = Δ ပ b o <del>д</del> ნ ⊾ Ξ (3) 3 (2) 9 2 7

9E1309 1 000

Schedule R (Form 990) 2009

Supplement to Schedule R, Part III, Form 990

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Name of partnership: PCT PARTNERS, LLC

Address of Entity: 1201 NORTH MARKET ST., SUITE 1501, WILMINGTON, DE 19801-1163

Employer ID number: 51-0412836 Primary Activity: INVESTMENT Legal domicile state:DE

Predominant Income: Investment

Share of total income: 7,495,732.

Share of end of year assets: 202,181,967.

Disproportionate allocations: NO Code V UBI amount: -525,152. General or managing partner: NO

Ε

SCH I, PART II - GRANTS AND OTHER ASSISTANCE TO ORG'S INSIDE THE US

\_\_\_\_\_\_\_

NAME OF ORGANIZATION:

THE PEW CHARITABLE TRUSTS

ADDRESS:

ONE COMMERCE SQUARE, 2500 MARKET ST

PHILADELPHIA, PA 19103-7077

EIN:

56-2307147

IRC SECTION:

501(C)(3), 509(a)(1)

PURPOSE OF GRANT:

TO PROVIDE SUPPORT TO THE PEW CHARITABLE TRUSTS

==========

# J. HOWARD PEW FREEDOM TRUST ACCOUNT #0049-02-1/4

EIN: 23-6234671

**TAX YEAR ENDING 12/31/09** 

# ATTACHMENTS SCHEDULE A, PART I (h) INFORMATION ABOUT SUPPORTED ORGANIZATION

(i) NAME OF SUPPORTED ORGANIZATION

THE PEW CHARITABLE TRUSTS

(ii) EIN

56-2307147

(iii) TYPE OF ORGANIZATION (DESCRIBED ON LINES 1-9 ABOVE OR IRC SECTION)

7

(iv) IS THE ORGANIZATION IN COL. (i) LISTED IN YOUR GOVERNING DOCUMENT?

YES

(v) DID YOU NOTIFY THE ORGANIZATION IN COL, (i) OF YOUR SUPPORT?

YES

(vi) IS THE ORGANIZATION IN COL. (i) ORGANIZED IN THE U.S.?

YES

(vii) AMOUNT OF SUPPORT

35,140,223

J. HOWARD PEW FREEDOM TRUST ACCOUNT #0049-02-1/4 EIN: 23-6234671 TAX YEAR ENDING 12/31/09

# ATTACHMENTS PAGE 8 FORM 990 PART VII, SECTION B, INDEPENDENT CONTRACTORS

NAME AND ADDRESS	(b) TYPE OF SERVICE	(c) COMPENSATION
<ol> <li>ACADIAN ASSET MANAGEMENT ONE POST OFFICE SQUARE, 20TH FLOOR BOSTON, MA 02109</li> </ol>	INVESTMENT SERVICES	112,717
TOTAL		112,717

#### Form **8868**

(Rev. April 2009)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

Internal Revenue So	ervice Prine a separate application for each return.	
	ling for an Automatic 3-Month Extension, complete only Part I and check this box	X
Do not comple	ling for an Additional (Not Automatic) 3-Month Extension, complete only Park I for pare lette Part II unless you have already been granted an automatic 3-month extension of a free lot	
Part I Auto	matic 3-Month Extension of Time. Only submit original (no copies needed).	-
A corporation	required to file Form 990-T and requesting an automatic 6-month extension - check this box	and complete
Part I only		▶ □
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 700 ome tax returns.	04 to request an extension of
one of the ret electronically i returns, or a co	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month autor turns noted below (6 months for a corporation required to file Form 990-T). However if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 9 to mposite or consolidated From 990-T. Instead, you must submit the fully completed and see details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Characteristics.	you cannot file Form 8868 190-BL, 6069, or 8870, group signed page 2 (Part II) of Form
Type or	Name of Exempt Organization J. HOWARD PEW FREEDOM TRUST	Employer identification number
print	. THE GLENMEDE TRUST COMPANY,	23-6234671
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.	
due date for	1650 MARKET STREET, SUITE 1200	
filing your return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
instructions.	PHILADELPHIA, PA 19103-7391	
	f return to be filed (file a separate application for each return):	
X Form 990	Form 990-T (corporation) Form	4720
Form 990	P-BL Form 990-T (sec. 401(a) or 408(a) trust) Form	5227
Form 990		6069
Form 990	PPF	8870
<ul> <li>If the organ</li> <li>If this is for</li> <li>for the whole or</li> </ul>	No. ► (215) 419-6000 FAX No. ► 215-640-3763  nization does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN)  group, check this box • ► . If it is for part of the group, check this box • ► . and and its of all members the extension will cover.	
1 I reques	st an automatic 3-month (6 months for a corporation required to file Form 08/16,2010 , to file the exempt organization return for the organization reganization's return for:  calendar year 2009 or	
▶ □	tax year beginning,, and ending	··
2 If this tax	year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this ap	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, le	ess any
	dable credits. See instructions.	38 SNONE
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax pa	yments 3b \$ NONE
	clude any prior year overpayment allowed as a credit.	3b \$ NONE
with FT(	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System	n). See
instructio		3c \$NONE
Caution. If you for payment in	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO structions.	and Form 8879-EO
For Privacy Ac	t and Paperwork Reduction Act Notice, see Instructions.	Form <b>8868</b> (Rev 4-2009)

1