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Form **990-PF**

Return of Private Foundation

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

For calendar year 2016 or tax year beginning 01/01 , 2016, and ending 12/31 20 16 A Employer identification number Name of foundation First Data Employee Hardship Fund 26-1641296 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 303-967-8000 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ ☐ Greenwood Village, CO 80111 Initial return of a former public charity **G** Check all that apply. \square initial return D 1. Foreign organizations, check here ▶□ Amended return Final return 2. Foreign organizations meeting the 85% test, ☐ Address change ☐ Name change check here and attach computation ▶□ E If private foundation status was terminated unde H Check type of organization Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶□ ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) ▶ 🔲 line 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income income nurnoses the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 237,396 1 2 Check ► ☐ If the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments Dividends and interest from securities . . . 4 Gross rents 5a b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . 8 Net short-term capital gain Income modifications 9 10a Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) . . . Other income (attach schedule) . 11 12 Total. Add lines 1 through 11 . 237,396 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages . RECEIVED 15 Pension plans, employee benefits 16a Legal fees (attach schedule) . . . ഗ T 3% Accounting fees (attach schedule) Other professional fees (attach schedule) . . 17 Interest 18 Taxes (attach schedule) (see instructions) . . . Admin 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings . . and 22 Printing and publications . . 23 Other expenses (attach schedule) 1,557 1,557 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid . 229,332 229,332 26 Total expenses and disbursements. Add lines 24 and 25 230,889 230,889 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 6,507 Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2016)

D.	ırt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
ГС	nám.	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	65,231	71,738	71,738
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶		 	
	4	Pledges receivable ►			l
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	ł		
i	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			<u>-</u>
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
⋖	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
	10	Less accumulated depreciation (attach schedule) ►			
	12 13	Investments—mortgage loans			
	14				
	17	Land, buildings, and equipment basis ► Less. accumulated depreciation (attach schedule) ►			
	15	Other assets (describe >			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item l)	65,231	71,738	71,738
	17	Accounts payable and accrued expenses			
'n	18	Grants payable			
<u>ë</u> .	19	Deferred revenue			[
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable (attach schedule)			Í
_	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)			i
S		Foundations that follow SFAS 117, check here . ▶ ☑			
Net Assets or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			1
ā	24	Unrestricted	65,231	71,738	į
Ba	25	Temporarily restricted			
Ď	26	Permanently restricted			į
Ξ	ļ	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.	j	j	}
ŏ	27	Capital stock, trust principal, or current funds	}]
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund			Į.
Š	29	Retained earnings, accumulated income, endowment, or other funds			1
Ä	30	Total net assets or fund balances (see instructions)	65,231	71,738	
let	31	Total liabilities and net assets/fund balances (see			į
		instructions)	65,231	71,738	
	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colur			
-		of-year figure reported on prior year's return)			65,231
		r amount from Part I, line 27a			6,507
3		er increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	71,738
5	Decr Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)— I	Part II column (b) In	5 ne 30 6	74 700
	iola	into assers of fully bullances at end of year fille 4 fillings life of	a.c.ii, column (b), iii		71,738

Part	IV Capital Gains and	Losses for Tax on Investn	nent Income			
	(a) List and describe the 2-story brick warehouse	kind(s) of property sold (e.g., real estate e, or common stock, 200 shs MLC Co	e,)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
1a						
_ <u>_b</u>						
<u>c</u>						
<u>_d</u>	_ 		 .			
<u>e</u>		(A Depression allowed	(r) Cost or	other basis	(h) Co	n or (loss)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g)
<u>a</u> b					<u> </u>	
d				-		
e						
	Complete only for assets show	ving gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (Co	I (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t less than -0-) or from col (h))
a						
<u>b</u>						
<u>c</u>					<u> </u>	
_ <u>_d</u>						
_ <u> </u>		(If goin	also enter in Pa	rt L lino 7		
2	Capital gain net income or		, enter -0- in Par		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections, line 8, column (c) (see instruc	1222(5) and (6) ctions). If (loss)	, enter -0- ın }	3	
Part		er Section 4940(e) for Redu				
_		ate foundations subject to the				<u></u>
(1010	puonai use by domestic privi	ate foundations subject to the	section 4940(a)	tax on het invest	inent income.)	
If sect	ion 4940(d)(2) applies, leave	this part blank				
		ection 4942 tax on the distribu			pase period?	☐ Yes 🗸 No
1	<u> </u>	unt in each column for each yea			akıng anv entries	
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	s Net value of	f noncharitable-use a		tribution ratio divided by col. (c))
	2015					
	2014					
	2013					
	2012					
	2011	_,		<u> </u>		
2	Total of line 1, column (d)				2	
3		or the 5-year base period—divi ation has been in existence if le			tne . 3	
4	Enter the net value of nonc	haritable-use assets for 2016 f	rom Part X, line	5	. 4	85,839
5	Multiply line 4 by line 3 .				. 5	0
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6				7	0
8		ns from Part XII, line 4 er than line 7, check the box in			. 8 that part using a	230,889 1% tax rate. See the

Part \		<u>nstru</u>	ctior	<u>1s)</u>	
1a •	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)				
b					
	here ► 🗌 and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0		
3	Add lines 1 and 2		0		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0		
6	Credits/Payments.				
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 0			İ	
b	Exempt foreign organizations—tax withheld at source 6b 0		i		
С	Tax paid with application for extension of time to file (Form 8868) 6c 0				
_d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d		0		
8	Enter any penalty for underpayment of estimated tax. Check here _ if Form 2220 is attached _ 8 _ Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		0		
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0		
11	Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded 11		0		
	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
	participate or intervene in any political campaign?	1a		✓	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		✓	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
_	Did the foundation file Form 1120-POL for this year?	1c			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. ► \$ (2) On foundation managers. ► \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		✓	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		-	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		√	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		-	
•	If "Yes," attach the statement required by General Instruction T.]		l l	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 				
	conflict with the state law remain in the governing instrument?	6	~ <u>_</u>		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			,	
	60				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General]]		;	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	✓	ļ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"	_		,	
	Complete Part XIV	9			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10			
	names and addresses	10		<u>. </u>	

Part	VII-A' Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
12	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	_	<u> </u>
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		✓_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	<u> </u>
14	Website address ► N/A			
14	Located at N. EESE Claridge Connector NE. Atlanta CA.	4-890- 3034		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	3034		>
	and enter the amount of tax-exempt interest received or accrued during the year . • 15		•	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	,	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►			
Dort	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u>. </u>		ł
rait	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . ☐ Yes ☑ No (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
_	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			
	Organizations relying on a current notice regarding disaster assistance check here	1b		<u> </u>
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		√
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?			
h	If "Yes," list the years > 20 , 20 , 20 , 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions).	2b	~	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	► 20 , 20 , 20 , 20			}
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
L	_ _			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			_
	foundation had excess business holdings in 2016)	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		

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Par	t VII-B' Statements	Regarding Activities	for W	Vhich Form	<u>4</u> 720	May Be P	<u>lequire</u>	ed (contin	าued)	_		
5a	 During the year did the for 	oundation pay or incur a	ny amo	ount to:					_			
	(1) Carry on propaganda(2) Influence the outcom							Yes	✓ No		,	
		any voter registration dri				•	•	☐ Yes	✓ No	1 1		Ì
	(3) Provide a grant to an	individual for travel, stu-	dy, or o	other similar	purpose	es?		Yes	✓ No	1 1		
	(4) Provide a grant to an section 4945(d)(4)(A)?	organization other than (see instructions)						Yes	☑ No			
	(5) Provide for any purpo purposes, or for the p	ose other than religious, prevention of cruelty to o						∏Yes	√ No			
b		-						ons descr				
	Regulations section 53.49									5b		
	Organizations relying on	a current notice regardii	ng disa	ster assistan	ce che	ck here .					$\neg \neg$	
С	If the answer is "Yes" to because it maintained ex								□No			
	If "Yes," attach the staten	nent required by Regula	tions s	ection 53.49	45–5(d).					1 1		
6a	Did the foundation, durin	g the year, receive any	funds,	directly or in	directly,	to pay pre	emiums					
	on a personal benefit cor	ntract?					•	Yes Yes	☑ No			
b	Did the foundation, during	g the year, pay premium	ns, dire	ctly or indired	ctly, on	a personal	benefit	t contract	?.	6b		1
	If "Yes" to 6b, file Form 8									1 1		1
	At any time during the tax y							_	✓ No			
	If "Yes," did the foundation									<u> 7b </u>		
Par	and Contracto									npioye	∍es, 	
1_	List all officers, director	s, trustees, foundation										
	(a) Name and ad	dress	hou	e, and average rs per week ed to position	(If n	npensation ot paid, ter -0-)	emplo	Contributions byee benefit erred compe	plans	(e) Exper other a	nse acce	
See At	ttachment						ŀ		ļ			
									Ì			
					 -		-					
2	Compensation of five I "NONE."	nighest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1—	see instr	uctions	s). If no	one, e	nter
	(a) Name and address of each em	ployee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contribution (d) Co	benefit deferred	(e) Exper	nse acc	ount, ces
None							<u> </u>					
]								
				Ì				}				
								ļ	}			
·												
						 -	· -					
Total	number of other employee	es paid over \$50,000		l				l				
		paia 010, woolooo .	•		•	•			1			

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Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "No	ONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
		_
		
		j
Total r	number of others receiving over \$50,000 for professional services	
Part	X-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of nizations and other beneficiaries served, conferences convened, research papers produced, etc.	of Expenses
1 T	he fund makes contributions to individual employees and family members as described in our charter.	
<u>Ir</u>	1 2016, the amounts ranged from \$400 to \$22,468 and totaled \$229,331.59	·-
_		
2		
	,	
		-
3		
4		
٠.		·-
		· -
Part	X-B Summary of Program-Related Investments (see instructions)	
Desc	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N	/A	
		
2		
All of	her program-related investments. See instructions	
3	• •	
		·-
Total.	Add lines 1 through 3	
		Form 990-PF (2016)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn founda	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		_
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	87,146
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	87,146
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	87,146
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,307
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	85,839
6	Minimum investment return. Enter 5% of line 5	6	4,292
Part		oundation	IS
	and certain foreign organizations check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	4,292
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,292
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,292
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	_	
	line 1	7	4,292
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	T T	
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	230,889
b	Program-related investments—total from Part IX-B	1b	230,889
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	-	
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	230,889
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<u></u>	
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	230,889
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	a whether	
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	VIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2016 from Part XI, line 7	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
_					
2	Undistributed income, if any, as of the end of 2016.				
а	Enter amount for 2015 only			0	
b	Total for prior years 20 12 ,20 13 ,20 14		0		
3	Excess distributions carryover, if any, to 2016:				}
а	From 20110				
b	From 20120				ļ
С	From 2013 0				
d	From 2014 0				
е	From 2015				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2016 from Part XII,				
	line 4: ▶ \$ 230,889				
а	Applied to 2015, but not more than line 2a .			0	
	Applied to undistributed income of prior years				
	(Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	o			
d	Applied to 2016 distributable amount				
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2016	0			0
Ū	(If an amount appears in column (d), the same				<u>_</u>
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract				-
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable		. <u> </u>		
	amount—see instructions		0		
e	Undistributed income for 2015. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			o	
f	Undistributed income for 2016. Subtract lines				·
•	4d and 5 from line 1. This amount must be				
	distributed in 2017				4,292
7	Amounts treated as distributions out of corpus				.,
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	0			
8	Excess distributions carryover from 2011 not				
_	applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2017.	- 0			
_	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				-
а	Excess from 2012 0				
a b	Excess from 2013 0				
C	Excess from 2014 0				
d	Excess from 2015 0				
u	Excess from 2016 0				
				l	<u> </u>

Part :	XIV Private Operating Founda	tions lead inche	ictions and Dan	t VII-A guestion (3)	Page 10
	'if the foundation has received a ruling				" [
	foundation, and the ruling is effective fo			>		
b	Check box to indicate whether the four		=	ation described in s	ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	85% of line 2a					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		<u> </u>	 		
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i) "Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter.					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization .					
	(4) Gross investment income		<u> </u>		1.05.000	l
Part	· · · · · · · · · · · · · · · · · · ·		•	the foundation h	iad \$5,000 or m	ore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation List any managers of the foundation	_	utod more than 3	% of the total cont	ributions recoved	by the foundation
a	before the close of any tax year (but o					by the loundation
None b	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporatio	n (or an equally la	arge portion of the
_	ownership of a partnership or other e					ago portion or the
None	• • •	· ·		· ·		
2	Information Regarding Contribution	n, Grant, Gift, Loa	an, Scholarship,	etc., Programs:		
	Check here ▶ ☑ If the foundation unsolicited requests for funds If the other conditions, complete items 2a,	only makes cont oundation makes	ributions to pres	elected charitable		
a	The name, address, and telephone no		ddress of the per	son to whom applic	ations should be	addressed:
-		or o man ar				

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

c Any submission deadlines.

Pari 3	Supplementary Information (cont Grants and Contributions Paid During t	inued)	ed for Eu	turo Payment	
<u> </u>		If recipient is an individual,	Foundation		,
	Recipient // https://www.arkhuaranananananananananananananananananana	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business) Paid during the year	or substantial contributor	recipient		-
а	Paid during the year				
See at	tached schedule				229,332
			ļ		1
		1			
		}			
		ì			
		ļa .			
		i e			
]		1	j
	Total		· .	▶ 3a	229,332
b	Approved for future payment				
N/A					
			Ì		
			}		
			}		
			1		
			}		
	Total	<u> </u>	L		

_	Analysis of Income-Producing Ac			I Francisco de la constanta	F10 F10 F11	
≧nte	er gross amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Excluded by section	on 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1	Program service revenue:	Dusiness code	Amount	Exclusion code	Amount	(See instructions)
	a					
	b					
	С					
	d			1		
	е					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					1
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7						
8	Gain or (loss) from sales of assets other than inventory				 	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory .		·-			
11	Other revenue: a					
	b			 		<u> </u>
	C			 		
	d			 		
	e					
	Subtotal Add columns (b), (d), and (e)					
						
13	Total. Add line 12, columns (b), (d), and (e)				13	
13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	s.)			13	
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		manufactur to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
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13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the etions)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions)

Part	XVII		n Regarding Tra	nsfers To and T	ransactio	ns and	Relationshi	ps With N	loncharita		.go . c
1	Did t		directly or indirectly	engage in any of t	the followin	ig with an	v other organ	ızatıon des	scribed	Yes	No
·	ın se	ction 501(c) of th	ne Code (other than								
	_	nızatıons?									
а	Tran	sfers from the rep	porting foundation t	o a noncharitable	exempt org	ganızatıon	of:			_	
		Cash							<u>1a</u>	1)	/
		Other assets .				•	• •		. <u>1a</u>	2)	1
b		r transactions.								_	
			a noncharitable ex						1b		1
			ets from a noncharit	_	nization .				<u>1b</u>		✓
			, equipment, or other						<u>1b</u> (-	✓
			rrangements .					•	1b		✓_
			rantees				•		1b(✓
			ervices or members	•					1b		✓
С			quipment, mailing li								✓
d			of the above is "Ye								
			ther assets, or serv								
		 ,	on or sharing arrang				-				
(a) Line	е по	(b) Amount involved	(c) Name of nonc	haritable exempt organ	ization	(d) Desc	nption of transfer	s, transaction	s, and sharing	arrangem	ents
	-										
						ļ					
						<u> </u>					
			<u> </u>	· · · · · · · · · · · · · · · · · · ·		<u>L</u>					
2a			ectly or indirectly at 501(c) of the Code (•	_	[7]	NI.
b			e following schedule		001(0)(0))	or in scott	011 027 :	•	ш т	es ✓	NO
		(a) Name of organ			f organization			c) Description	of relationship		
		(a) Name or organ	iization	(b) Type o	r Organization			c) Description	or relationship		
			•								
				<u> </u>				_			
	Unde	ar penalties of penury. I	declare that I have examin	I ed this return, including a	ccompanying s	schedules an	d statements, and	to the best of r	nv knowledge a	d belief. if	is thie
Sign	corr	ct, and complete Decl	laration of preparer (other th	ian taxpayer) is based on	all information	of which prep	parer has any know	ledge			
Here	(1 1 //	XX 1 1 0	\\ \A Que	14/20	1.77	10 110	LAI REND	CINCA IT	May the IRS do with the prepar		
		enure of officer or trus	stee	Date	Title	1 WW		///CV	(see instructions		
	1	Print/Type preparer		Preparer's signature	9		Date		- PTIN		
Paid								Check self-en	nployed		
Prep		Firm's name ▶	· · · · · · · · · · · · · · · · · · ·	1		<u>-</u>	1	Firm's EIN ▶			
Use	Uniy	Firm's address						Phone no			

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

First Data Employee Hardship Fund

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

Employer identification number

26-1641296

Organiz	ation type (check on	ne):
Filers of	f:	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)(7	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General	Rule	
Ø		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special	Rules	
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line I that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
	contributor, during th	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III.
	contributor, during the contributions totaled during the year for a General Rule applies	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions exclusively for religious, charitable, etc., purposes, but no such dimore than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the less to this organization because it received nonexclusively religious, charitable, etc., contributions nore during the year

Name of organization Employee Hardship Fund 26-1641296

Part I	Contributors (See Instructions). Use duplicate co	ppies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	First Data Corporation and Subsidiaries 5775 DTC Blvd Greenwood Village, CO 80111		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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization **Employer identification number** First Data Employee Hardship Fund 26-1641296 Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) FMV (or estimate) (See instructions) from Description of noncash property given **Date received** Part I (c) FMV (or estimate) (a) No. (d) (b) from Part I Description of noncash property given Date received

Part I	Description of noncash property given	(See instructions)	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
		\$	
		<u> </u>	Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (F	Form 990, 990-EZ, or 990-PF) (2016)			Pa	ge 4
Name of or	gaņization			Employer identification numb	er
First Data E	Employee Hardship Fund			26-1641296	
Part III	Exclusively religious, charitable, e (10) that total more than \$1,000 fo	r the year from any ations completing Pa	one contributor. rt III, enter the tota	escribed in section 501 (c)(7), (8), or Complete columns (a) through (e) and I of exclusively religious, charitable, et ee instructions.)	
	Use duplicate copies of Part III if ad	ditional space is nee	ded.		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
_		(a) Trans	fer of gift		
	Townstown by many and drawn a				
-	Transferee's name, address, a	ING ZIP + 4	Relation	ship of transferor to transferee	
	·				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	_
-		(e) Trans	fer of gift	<u> </u>	_
1		(c) Italio	ici oi giit		
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee	
İ					 -
į					
(a) No.			<u> </u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift 	(d) Description of how gift is held	
[
)		(e) Trans	fer of gift		
1	Transferee's name, address, a	and 7IP + 4	Relation	nship of transferor to transferee	
-					_
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	······································				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
ł					
1					
r		(e) Trans	fer of gift		
	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee	
ſ					
j					

Employee Hardship Fund Board 2016

Name	Board Title	Title	Location
Janelle Bergquist	President	SVP, Human Resources	5775 DTC Blvd Greenwood Village, CO 80111
Ursula Gray	Treasurer	VP, Global Retirement	5776 DTC Blvd Greenwood Village, CO 80111
Suzanna Steller	Secretary	Manager, Global Retirement	5777 DTC Blvd Greenwood Village, CO 80111
Igor Aksyonov	Member	VP, Accounting	6855 Pacific St. Omaha, NE. 68106
Kelley Castell	Member	SVP, Client Care	5565 Glenridge Connector, NE Glenridge Highlands Two Atlanta, GA 30342
Karen Beck	Member	VP Human Resources	1 Western Maryland Pkwy, Hagerstown MD 21740
Bill Larson	Member	VP Operations	10910 Mill Valley Road, Omaha, NE 68154
Michele Griffin	Member	VP Contact Center	4000 Coral Ridge Drive, Coral Springs, FL 33065
Mary Uslander	Member	SVP Product Segment Leader	101 Hudson Street, Jersey City, NJ 07302

Name of Applicant	Date of Application	Employee ID	Date of Hire	Grant Amount Requested	Committee Decision	Date of Decision	Final Grant Amount	Employee Address
Janice Young	12/11/15	207759	12/04/06	\$7,961.00	Approved	01/02/16	\$3,000 00	P O Box 934096 Margate, FL 33093
Shanta Kennard-Cameron	12/29/15	244147	09/16/13	\$1,700 00	Approved	01/0/10	\$1,700 00	3459 Parc Dr Atlanta, GA 30311
Jana Talcıkova	12/03/15	217038	06/15/92	\$15,000 00	Approved	01/02/16	\$15,000 00	Martina Granca 3528/9 Bratislava 84102 Slovakia
Desean Young	12/18/15	217358	01/28/08	\$2,000 00	Арргоvеd	01/07/16	\$2,000 00	604 South 22nd St Apt 823 Omaha, NE 68102
Mary Corpatey	01/0//16	199042	11/1/14	\$5,000.00	Approved	02/04/16	\$5,000 00	13253 Josephine Street, Omaha, NE 68138
Sue Mahr	01/12/16	058058	02/18/90	\$15,000,00	Annroved	02/04/16	\$3,500,00	12/3/ Woodcress Plaza 318B Omana, NE 6813/
William Jenkins	12/30/15	123235	03/21/94	\$5,000 00	Approved	02/04/16	\$5.000.00	13237 CO NO. 1-10 DIAII, NE 08000 1423 River Ct. Front Royal VA 22630
David Falcon	01/28/16	135778	09/12/88	\$400 00	Approved	02/04/16	\$400 00	6413 Kassarine Pass Houston, TX 77033
Mohammad Butt	02/18/16	236689	12/19/11	\$2,100 00	Approved	03/03/16	\$2,100 00	1307 Sherrye Dr Apt D, Plano, TX 75074
Mary Corbaley	02/24/16	250179	11/14/14	\$8,453.97	Approved	03/03/16	\$5,000 00	13253 Josephine Street, Omaha, NE 68138
Alex Rodriguez	02/24/16	241358	01/02/13	\$7,320 00	Approved	03/03/16	\$5,000 00	8955 Wiles Road 1-304, Coral Springs, FL 33067
Khyri Rose	02/25/16	248269	07/28/14	\$3,500 00	Approved	03/03/16	\$1,795.00	627 Andersen Circle Apt 303, Deerfield Beach, FL 33441
Morric Horric	02/21/16	082828	10/12/98	\$2,675.78	Approved	03/03/16	\$2,126.68	1429 Ave E, Council Bluffs, IA 51501
Ann Campbell	03/01/16	164643	08/20/01	\$2,500.00	Approved	04/0//16	\$2,500.00	7004 H. H. L. C. P. L. S. P. P. S. P. P. S. P. S. P. P
jennifer Knable	03/30/10	121349	05/13/96	\$3,862.00	Approved	04/0//16	\$3,662.00	7306 Angle Bd Chamberchurg BA 17202
Andrea Mentzer	03/18/16	235713	10/31/11	\$2,000 00	Approved	04/07/16	\$600.00	36 Oneida Trail Hedgesville WV 25427
Lalita Reed	03/23/16	234874	08/02/11	\$2,000 00	Approved	04/07/16	\$2,000 00	100 Clara Way Clairmont Ant #5 Calhoun GA 30701
Barbara Smith	04/21/16	122540	11/01/98	\$5,000 00	Approved	05/05/16	\$5,000 00	18 Elizabeth St. Hagerstown, MD 21740
Jermaine Sergeon	04/15/16	253034	04/27/15	\$1,50000	Approved	02/02/16	\$1,270 00	4844 NW 24th Court Apt #312 Lauderdale Lakes, FL 33313
Viergelie Cirl	04/20/16	187241	04/26/04	\$6,000 00	Approved	05/05/16	\$5,000 00	6450 SW 9th Pl North Lauderdale, FL 33068
Katherine Carpenter	05/26/16	122949	04/19/10	\$8,03424	Approved	06/03/16	\$8,034.24	12 Maplegrove Ct, Smithsburg, MD 21783
Susan De Sensi	07/06/16	132157	02/11/85	\$22,46800	Approved	07/07/16	\$22,46800	250 Remington Drive, Bartlett, IL 60103
Facely Roames	06/15/16	235546	10/10/11	\$15,000 00	Approved	07/07/16	\$5,000 00	194 Tidewater Terrace, Falling Waters, WV 25419
Roseann Schmidt	06/22/16	118643	02/22/88	\$4,169.00	Approved	07/07/16	\$3,000 00	21 Brook St, Patchogue, NY 11772
relipe Castlino	05/03/15	253349	05/18/15	\$5,000.00	Approved	07/07/16	\$5,000 00	7496 Viscaya Cir, Margate, FL 33063
Duesa Sloboda	02/03/16	270977	10/15/00	\$5,000,00	Approved	07/07/16	\$5,000 00	2817 Kansas Drive, Bellevue, NE 68005
Fliah Hawkins	01/51/70	217933	03/03/08	\$4,000,00	Approved	08/04/16	\$10,000 00	100/08 C0.04-0.05 t A t # 4 P C0 00033
Ellen Shankle-Clark	07/12/16	184489	09/13/99	\$15,000,00	Approved	08/04/16	\$2,000 00	15460 S Quebec St Apt #A Denver, CU 80231
Michelle Lee	07/14/16	214439	08/20/02	\$2,500 00	Approved	08/04/16	\$2,384 98	16325 E Alabama Dr Aurora, CO 80017
Stephanie Myers	07/20/16	152371	02/08/00	\$5,000 00	Approved	08/04/16	\$5,000 00	110 Downey Drive Chambersburg, PA 17202
Nadine Smith-Fletcher	07/27/16	165218	09/17/01	\$5,000 00	Approved	08/04/16	\$1,500 00	9051 Preston Place Tamarac, FL 33321
Kendy Alcine	08/17/16	254703	08/03/15	\$700 00	Approved	09/06/16	\$700 00	1992 Patterson Park Drive, Lawrenceville, GA 30044
Felipe Castilho	08/23/16	253349	05/18/15	\$7,000 00	Approved	09/06/16	\$3,800 00	1500 Calming Water Dr. Unit 1504, Fleming Island, FL 32003
Weildl Regileros Nadine Smith, Fletcher	09/22/10	165218	10/110/90	\$5,000,00	Approved	10/06/16	\$5,000.00	7447 Grant Street, Omaha, NE 68134
Shanita Kennard-Cameron	09/18/16	244147	09/11/01	\$5,000,00	Approved	10/06/16	\$1,000,00	64 Plack Diamond Dr. Bourhum, CA 20212
Mona Lucero	09/29/16	079457	09/24/90	\$3.600 00	Approved	10/06/16	\$2,100.00	4833 Front Street R179 Castle Rock CO 80104
Clyde Colbert	10/04/16	239337	07/30/12	\$7,500 00	Approved	10/02/16	\$7,500 00	7755 E. Quincy Ave D1 2013, Denver, C0 80237
Donna Kershner	10/02/16	149476	02/02/00	\$8,100 00	Approved	11/03/16	\$10,000 00	58 Nottingham Road, Hagerstown, MD 21740
Tahia McKay	10/24/16	246192	04/28/14	\$1,400 00	Approved	11/03/16	\$1,400 00	4041 Jaynes Street, Omaha, NE 68111
Zubeda Motarwala	10/20/16	252040	03/23/15	\$2,248 00	Approved	11/03/16	\$2,248 00	301, Building 3, Green Avenue CHS, NH School Road, Mira Road (E), Mumbai 401107 Maharasi
Fabian Gonzalez	11/16/16	210474	07/23/91	\$2,000 00	Approved	12/01/16	\$4,200 00	CALLE 889 NRO 1475 ENTRE 808 Y 809 (QUILMES OESTE), Buenos Aires 1407 Argentina
oseph Bottom II	11/21/16	205886	10/09/06	\$7,377.45	Approved	12/01/16	\$7,377.45	8620 Picadilly Circle, Waynesboro, PA 17268
Alice Fowler	11/02/16	737837	03/03/03	\$ 10,000 00	Approved	12/01/16	\$5,000 00	3885 Sienna Greens Terrace, Lauderhill, FL 33319
Avaloan Mahadaa	11/15/16	750707	12/01/12	000000	panoiddy	12/01/10	\$3,000.00	30 Ellett Gleff Way, Dallas, GA 30132
Mary Arlana Brooks	11/13/10	100004	12/01/14	\$3,000,00	Approved	12/01/16	\$3,000.00	11108 NW 38th Place, Sunrise, FL 33351
Monica Raum	11/01/16	230669	07/26/10	\$2,500,00	Approved	12/01/16	\$500.00	0821 Aramon Ct, Wesley Chapel, FL 33345
Tracy Auger	11/03/16	152020	05/01/00	Unspecified	Approved	12/01/16	\$5.000.00	4092 Willow Walk Lilburn CA 30047
Gabriel Afdana	11/03/16	188732	01/24/11	\$1,75438	Approved	12/01/16	\$1,75438	8936 W Flagler St. Apt 211. Mam. FL 33174
Tammy Janzen	11/08/16	172193	09/03/02	\$5,000 00	Approved	12/01/16	\$5,000 00	6516 South 117 St., Omaha, NE 68137
Wendy Bowers	11/22/16	247949	07/07/14	\$1,500 00	Approved	12/01/16	\$1,500 00	67 Bolivar Court Apt. 403, Harpers Ferry, WV 25425
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