Form **990**

Return of Organization Exempt From Income Tax

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

2017

DLN: 93493319112658 OMB No 1545-0047

nterna	ment of the Treas I Revenue Servic					I	nspection
Chee □ Ade □ Nai	or the 2017 of ck if applicable dress change me change tial return	C Name of organization ADP FOUNDATION Doing business as	7 , and ending 12-3	31-2017	D Employ 22-222	rer identificat 2589	tion number
□ Fina	al return/terminate nended return plication pendin	Number and street (or P O box if mail is not delivered to	o street address) Room/s	uıte		ne number 592-6411	
		City or town, state or province, country, and ZIP or forei ROSELAND, NJ 07068 F Name and address of principal officer RITA MITJANS	gn postal code		G Gross re this a group re	eceipts \$ 18,15 eturn for	52,588 □Yes ☑ No
; Tax	x-exempt status	ONE ADP BOULEVARD - MS433 ROSELAND, NJ 07068	947(a)(1) or	H(b) Ar in If	e all subordina cluded? "No," attach a	list (see ins	☐ Yes ☐No
	ebsite: ► N/	A			roup exemption ormation 1978		egal domicile NJ
	rt I Sun	imary scribe the organization's mission or most significant FOUNDATION IS A NOT-FOR-PROFIT ORGANIZATIO	activities	D ADMINIST	ERS FUNDS TO	D BE DISBUR	SED OR
HIGHICE	I .	TO OTHER SECTION 501(C)(3)CHARITABLE ORGAN				, 25 DI3BOK	SED OR
ACUVIUES & GOVERNANCE	3 Number4 Number5 Total nu6 Total nu7a Total un	is box if the organization discontinued its ope of voting members of the governing body (Part VI, I of independent voting members of the governing bomber of individuals employed in calendar year 2017 mber of volunteers (estimate if necessary) related business revenue from Part VIII, column (C) dated business taxable income from Form 990-T, linealized business taxable income from 990-T, linealized business taxable from 990-T, linealized busines	ine 1a) dy (Part VI, line 1b) (Part V, line 2a)	· · · ·		3 4 5 6 7a	3 C C
	B Nec ann	iated business taxable medine from Form 550 T, mil					
enueve	9 Program	tions and grants (Part VIII, line 1h)			Prior Year 10,733,	985	18,063,123
Ravenue	9 Program10 Investm11 Other re12 Total re	service revenue (Part VIII, line 2g) ent income (Part VIII, column (A), lines 3, 4, and 7d venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d venue—add lines 8 through 11 (must equal Part VIII			10,733, 6, 10,740,	985 0 439 0 424	18,063,12: 89,46: (18,152,58:
	9 Program 10 Investm 11 Other re 12 Total re 13 Grants a 14 Benefits 15 Salaries	service revenue (Part VIII, line 2g)			10,733,	985 0 439 0 424 680 0	18,063,12 (89,46)
Expenses Revenue	9 Program 10 Investm 11 Other re 12 Total re 13 Grants a 14 Benefits 15 Salaries 16a Professi b Total fund 17 Other ex 18 Total ex	service revenue (Part VIII, line 2g)	c, and 11e) c, and 11e) 1-3) slumn (A), line 12)		10,733, 6, 10,740, 7,901, 463, 8,364,	0 439 0 424 680 0 0 0 0 0 0 0 0 0 0 0 688	18,063,123 89,466 18,152,586 9,744,083 0 277,586 10,021,67
Expenses	9 Program 10 Investm 11 Other re 12 Total re 13 Grants a 14 Benefits 15 Salaries 16a Professi b Total fund 17 Other ex 18 Total ex 19 Revenue	service revenue (Part VIII, line 2g)	c, and 11e) c, and 11e) 1-3) slumn (A), line 12) 1-3		10,733, 6, 10,740, 7,901,	CL 985 0 439 0 424 680 0 0 0 0 0 0 0 688 736 (ear E	18,063,123 89,466 18,152,586 9,744,085 (10) 277,586
Net Assets of Expenses Fund Balances	9 Program 10 Investm 11 Other re 12 Total re 13 Grants a 14 Benefits 15 Salaries 16a Professi b Total fund 17 Other ex 18 Total ex 19 Revenue 20 Total as 21 Total lia 22 Net asset	service revenue (Part VIII, line 2g)	c, and 11e) c, column (A), line 12) 1–3)		10,733, 6, 10,740, 7,901, 463, 8,364, 2,375, ung of Current Y	CL 985 0 439 0 424 680 0 0 0 0 0 0 0 688 736 /ear E	18,063,122 89,466 18,152,583 9,744,083 0 277,589 10,021,67 8,130,91 End of Year
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Par Lind Balances Expenses and Market Assets of Expenses and Market Assets of Expenses and Market Assets of Expenses	9 Program 10 Investm 11 Other re 12 Total re 13 Grants a 14 Benefits 15 Salaries 16a Professi b Total func 17 Other ex 18 Total ex 19 Revenue 20 Total as 21 Total lia 22 Net asse 111 Sign 12 penalties of ledge and belinowledge 13 RITA Type	service revenue (Part VIII, line 2g)	c, and 11e) column (A), line 12) 1–3)	Beginn	10,733, 6, 10,740, 7,901, 463, 8,364, 2,375, 1,687, 3,618, and statement ed on all inform 2018-11-15 Date	CL 985 0 439 0 424 680 0 0 0 0 0 0 0 8688 736 6ear E 594 350 244 s, and to the ation of which	18,063,12: 89,466 18,152,586 9,744,086 277,586 10,021,676 8,130,91 End of Year 13,248,076 1,498,916 11,749,166

☑ Yes ☐ No

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	990 (2017)					Page 2
Par	t IIII Staten	nent of Program Servic	e Accomplis	hments		
	Check If	Schedule O contains a respo	nse or note to a	any line in this Part III		🗆
1	Briefly describe	the organization's mission				
FUN		ED TO ORGANIZATIONS AND			R THE PURPOSES OF RECEIVING AN S THAT ARE DESCRIBED IN SECTIO	
2	Did the organiz	ation undertake any significa	nt program serv	vices during the year wh	nich were not listed on	
	the prior Form	990 or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describ	oe these new services on Sch	iedule O			
3	Did the organiz	ation cease conducting, or m	ake significant o	changes in how it condu	cts, any program	
	services? .					🗆 Yes 🗹 No
	If "Yes," describ	oe these changes on Schedul	e O			
4	Section 501(c)(ns are required	to report the amount of	argest program services, as measui f grants and allocations to others, th	
4a	(Code) (Expenses \$	9,744,082	including grants of \$	9,744,082) (Revenue \$)
	See Additional Da	ta				·
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d		services (Describe in Schedu	•	dr.) (Poyonus t	
_	(Expenses \$		uding grants of) (Revenue \$,
4e	ı otal program	1 service expenses ▶	9,744,0	0 2		

Checklist of Required Schedules

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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Page 3

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Form **990** (2017)

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Yes

Yes

Yes

Yes

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?

or X as applicable

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?

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Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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,"

the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of

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25b

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28b

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Yes

Yes

Form **990** (2017)

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Page 4

24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

instructions for applicable filing thresholds, conditions, and exceptions)

	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Fater -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	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]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		110
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
	1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
0-	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	50		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2-		1,		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	-	4		
	Enter the amount of reserves on hand			
С	Enter the amount of reserves on hand	14a		No

orm	990 (2017)			Page 6
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions		nse to li	nes
Se	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 3		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
	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	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u> Code</u>		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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		No
b	Other officers or key employees of the organization	15b		No
	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 with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
<i>c</i> -		16b		
<u>Se</u> 17	ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶			
	NJ NJ			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records FFLOR WICKHAM ONE ADP BOULEVARD - MS433 ROSELAND, NJ 07068 (909) 592-6411			
_		F	orm On	0 (2017)

orm 990 (20	17)										Page 7
	Compensation of Officers, D and Independent Contractor		stees,	Key	/ Er	npl	oyee	s, H	lighest Comper	nsated Employ	ees,
	Check if Schedule O contains a resp										<u> </u>
	a. Officers, Directors, Truste								<u> </u>		
ear .	this table for all persons required to										ganızatıon's tax
of compensati	f the organization's current officers on Enter -0- in columns (D), (E), a	ind (F) if no cor	npensa	tion \	was	paıd					
	the organization's current key emp										
vho received	rganization's five current highest c reportable compensation (Box 5 of ind any related organizations										
of reportable of	the organization's former officers, compensation from the organization	and any relate	ed orgai	nızatı	ons				•		,000
organization, i	the organization's former director more than \$10,000 of reportable co	mpensation fro	m the	orgar	ıızat	ion a	and an	y re	elated organizations	5	
	n the following order individual trus employees, and former such persoi		rs, ınstı	itutio	nal t	rust	ees, c	office	ers, key employees	s, highest	
☐ Check thi	s box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	ny c	urrent officer, dire	ctor, or trustee	<u> </u>
	hours per week (list any hours director/trustee) than one box, unless person compensations any hours director/trustee) compensations or sample of the compensations of the compen		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and						
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	`MISC)	` Misc)	related organizations
1) CARLOS ROI TRUSTEE	DRIGUEZ	2 00	х		×				0	0	0
2) RITA MITJAN FRUSTEE	NS	2 00	Х		×				0	0	0
3) VITO GIULIA	ANI	2 00	×		х				0	0	0

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee) Reports or						Rep comp fro organiz	(D) (E) ortable ensation m the cation (W- organizations (w-	compensation V- from the	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-MISC	,	organizat relat organiz	ed
c ·	Sub-Total Fotal from continuation sheets to F Fotal (add lines 1b and 1c)	Part VII, Sectio	nΑ.		٠.		* * * *			0		0		0
2	Total number of individuals (includin of reportable compensation from the	g but not limited	to thos			bove	e) who	rece	eived mo	re than \$1	00,000	•		
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>			ee, k	ey e •	mpl	oyee,	or hi	ghest co	mpensated	employee on	3	Yes	No No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such								No					
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person							5		No					
Se	ection B. Independent Contrac	tors											'	_
1	Complete this table for your five high from the organization Report compe	hest compensate										npens	sation	
	Name	(A) and business addre	ess							Desc	(B) ription of services		Comper	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization \blacktriangleright 0

Total revenue Related or Unrelated Revolution exempt business exclude function revenue tax unde	П			une in this Bart VIII	nco or note to an	2 roone			rt V
Section Sect	(D) Revenue excluded from tax under sections 512-514	(C) Unrelated business	(B) Related or exempt function	(A)	inse of flote to any	a respo	ne o contains	CHECK II SCHEUC	
above stove in the start of the	312-314	<u>, </u>	revenue	I		1a	gns	Federated campaig	60
Blumburg of Nercash contributions included in lines 1a-1f 3 Total.Add lines 1a-1f 3 Total.Add lines 2a-2f . Blusiness Code It 18,063,122 Blusiness Code Blusi						1b		Membership dues	unt
Blumburg of Nercash contributions included in lines 1a-1f 3 Total.Add lines 1a-1f 3 Total.Add lines 2a-2f . Blusiness Code It 18,063,122 Blusiness Code Blusi					_	1c	5	: Fundraising events	mo
Blumburg of Nercash contributions included in lines 1a-1f 3 Total.Add lines 1a-1f 3 Total.Add lines 2a-2f . Blusiness Code It 18,063,122 Blusiness Code Blusi						1d	ons	Related organizati	гА
Blumburg of Nercash contributions included in lines 1a-1f 3 Total.Add lines 1a-1f 3 Total.Add lines 2a-2f . Blusiness Code It 18,063,122 Blusiness Code Blusi						1e	contributions)	Government grants (ıila
above the contributions included in lines 1a-1f \$ Introduction to the contribution to the contribution including \$ Introduction to the contribution to the contribut							s, gifts, grants,	All other contribution	Sin
Business Code Business Code					18,063,122	1f	not included		ıer
Business Code Business Code									Oth
Business Code Business Code					•				nd
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalities	Т				 -				$-\tau$
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalities									Ž 2
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalities						_			ž
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalties									<u>ء</u>
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalties						_			<u> </u>
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalties						_			Ē
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalities						€	ervice revenue	All other program s	odic o
similar amounts)					<u> </u>	. 1	2f	Fotal. Add lines 2a-2	7
4 Income from investment of tax-exempt bond proceeds 5 Royalties	89,46			89,466	nterest, and other				:
(i) Real (ii) Personal b Less rental expenses c Rental income or (loss) d Net rental income or (loss)				•	ond proceeds			•	.
Ga Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) b Sa Gross income from fundraising events (not including \$\frac{1}{2}\$ of contributions reported on line 1c) See Part IV, line 18 c Net income or (loss) from fundraising events see Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				•			<u></u>	Royalties	
B Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 4 Net gain or (loss) 5a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19					(II) Personal	al .	(ı) Rea	_	
c Rental income or (loss) d Net rental income or (loss)								Gross rents	'
(loss) d Net rental income or (loss)								Less rental expenses	
(loss) d Net rental income or (loss)				_				Rental income or	
(i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) contributions reported on line 1c) See Part IV, line 18								(loss)	
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The basis and sales expenses c Gain or (loss) d Net gain or (loss) 6 As Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances B Less cost of goods sold . b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code								than inventory	
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b Less direct expenses b c Net income or (loss) from gaming activities 10aGross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code						of		(not including \$	
b Less direct expenses b c Net income or (loss) from gaming activities 10aGross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code									5
b Less direct expenses b c Net income or (loss) from gaming activities 10aGross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code						L		•	2
b Less direct expenses b c Net income or (loss) from gaming activities 10aGross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				_	ents Þ				2
b Less direct expenses b c Net income or (loss) from gaming activities 10aGross sales of inventory, less returns and allowances b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code						ies			; ;
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10aGross sales of inventory, less returns and allowances						L			
returns and allowances a b Less cost of goods sold b C Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				_	es >	activiti I			
b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code							ces	returns and allowar	
© Net income or (loss) from sales of inventory ▶ Miscellaneous Revenue Business Code									
Miscellaneous Revenue Business Code						ı			
11a						f invent			-
								a	:
b		1							
c									
d All other revenue								All other revenue	
e Total. Add lines 11a-11d					•		a-11d	Total. Add lines 11	
12 Total revenue. See Instructions	89,466 Form 990 (2017	0 0		18,152,588			e Instructions	Total revenue. Se	:

Part IX	Statement of	Functional	Expenses
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Scetch SCIC(13) and SDIL(1(4) organizations must complete all columns. All other organizations must complete column (A) Chreak Pschedule & Continua a response or note to any line in this Part IX. Do not Include amounts reported on lines 6b, 7,78,082 organizations and comestic opportunity. Grants and other assistance to domestic organizations and comestic opportunity. In 12 organizations and comestic opportunity. In 12 organizations and comestic opportunity. In 12 organizations and contents, and foreign organizations, foreign and state assistance to foreign organizations, foreign and state and other assistance to foreign organizations, foreign and state and other assistance to foreign organizations, foreign and state and other assistance to foreign organizations, foreign and state and the same state of the stat	Form 990 (2017)				Page 10
Do not include amounts reported on lines 6b, Pk, 8b, 9b, 9b and 10b of Part VIII. 1. Grants and other assistance to domestic organizations and domestic operaments. See Part IV, Ine 21 2. Grants and other assistance to comestic individuals. See Part IV, Ine 22 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ine 13 4. Grants and other assistance to foreign organizations and foreign governments. See Part IV, Ine 13 5. Compensation of current officers, directors, foreign governments, and directors of the part of the par	Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all col	lumns All other orga	nızatıons must comp	lete column (A)	
To Sub, Sub, and 10b of Part VIII. To seak and other assistance to dementic organizations and a foreign market assistance to dementic organizations and substitution of the substitution	Check if Schedule O contains a response or note to any	line in this Part IX .	<u> </u>		🗆
domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 against governments, and foreign individuals See Part IV, line 15 against governments, and foreign individuals See Part IV, line 15 against governments, and foreign individuals See Part IV, line 15 against governments, and foreign individuals See Part IV, line 15 against governments of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqual field persons (as cancel assistance) and assistance of current officers, directors, trustees, and key employees 6 Penson in Part (CI) (2) (3) 7 Other salaries and wages 8 Penson in plan accruals and contributions (include section 401 (k)) and 402 (k)) employer contributions) 9 Other employee benefits 10 Peyrol taxes 11 Pess for services (non-employees) 11 Pess for services (non-employees) 12 Management 13 Legal 14 Lagal 14 Lagal 14 Lagal 14 Lagal 14 Lagal 14 Lagal 15 Legal 16 Lobbring 17 Investment management fees 9 Other (if his 11 amagement fees and 10 kine 17 (investment management fees 9 Other (if his 11 amagement fees and 10 kine 17 (investment management fees and 10 kine 17 (investment management fees and 10 kine 18 (in expenses and 10			Program service	Management and	(D) Fundraisingexpenses
IV. Inte 22 3 Grants and other assistance to foreign organizations, foreign and 15 an		9,734,082	9,734,082	-	
governments, and foreign individuals. See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salares and wages 8 Penson plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 13 Managemen - employees) 14 Ladden - employee benefits 16 Legal 17 Accounting 18 Legal 19 Concentration of the section 401 (k) and 403(b) employers of the section 401					
5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation ret included above, to disqualified persons (as sefund 4958(r)(3)(8)) 7 Other saliances and wages 8 Person plan accruels and contributions (include section 401 (k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 1 Management 114,333 114,333 1 Legal	governments, and foreign individuals See Part IV, line 15	10,000	10,000		
key employees	4 Benefits paid to or for members				
defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (incliude section 401 (k) and 493(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 11 Management 11 Fees for services (non-employees) 13 Management 11 Fees for services (non-employees) 14 Lobbying 15 Legal 16 Caccounting 17 Investment management fees 18 Other (If line 11g amount exceeds 10% of line 25s, column (A) amount, list line 11g sepenses on Schedule 0) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalies 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Insurance 12 Payments of state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Insurance 12 Depreciation, depletion, and amortization 12 Insurance 13 Insurance 14 Other expenses Itemuse expenses into covered above (List miscellalneous expenses in line 24e film e24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 16 Ad e All other expenses 16 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campagin and findrasing solicitation					
8 Pension plan accruals and contributions (include section 401 (ix) and 493(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 1 Amanagement 1 Legal . 2 Accounting 1 Lobbyring 1	defined under section 4958(f)(1)) and persons described in				
(k) and 403(b) employer contributions) . 9 Other employee benefits	7 Other salaries and wages				
10 Payroll taxes					
11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 42 Advertising and promotion 31 Office expenses 43 Information technology 44 Information technology 55 Royalties 65 Occupancy 76 Payments of travel or entertainment expenses for any federal, state, or local public officials 77 Travel 78 Payments of travel or entertainment expenses for any federal, state, or local public officials 79 Conferences, conventions, and meetings 70 Interest 71 Payments to affiliates 71 Payments to affiliates 71 Payments to affiliates 72 Depreciation, depletion, and amortization 73 Insurance 74 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O 1 75 a GENERAL EXPENSE 75 Total functional expenses. Add lines 1 through 24e 76 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campagin and fundraising solicitation	9 Other employee benefits				
a Management	10 Payroll taxes				
b Legal	11 Fees for services (non-employees)				
c Accounting	a Management	114,333		114,333	
d Lobbying . e Professional fundraising services See Part IV, line 17 f Investment management fees . g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) 12 Advertising and promotion . 13 Office expenses	b Legal				
e Professional fundraising services. See Part IV, line 17 f Investment management fees	c Accounting				
e Professional fundraising services See Part IV, line 17 f Investment management fees	d Lobbying				
f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion	<u> </u>				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 2 Advertising and promotion	f Investment management fees				
13 Office expenses	g Other (If line 11g amount exceeds 10% of line 25, column				
14 Information technology	12 Advertising and promotion				
14 Information technology	13 Office expenses				
15 Royalties	-				
17 Travel					
17 Travel	16 Occupancy				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings 20 Interest	· · ·				
19 Conferences, conventions, and meetings	18 Payments of travel or entertainment expenses for any				
20 Interest	·				
21 Payments to affiliates	_				
22 Depreciation, depletion, and amortization	21 Payments to affiliates				
23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a GENERAL EXPENSE 163,256 b c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	· · · · ·				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a GENERAL EXPENSE 163,256 b c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation					
b c d e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
c d e All other expenses Total functional expenses. Add lines 1 through 24e 10,021,671 9,744,082 277,589 O Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	a GENERAL EXPENSE	163,256		163,256	
c d e All other expenses Total functional expenses. Add lines 1 through 24e 10,021,671 9,744,082 277,589 Output Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	<u></u>	+			
d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		+			
e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation					
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Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		10.001.571	0.711.005	277 551	_
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		10,021,671	9,744,082	2//,589	0
Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)	reported in column (B) joint costs from a combined				
	Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)				

3

Page **11**

12,862,422

	(A) Beginning of year		(B) End of year
Cash-non-interest-bearing	5,118,709	1	12,
Savings and temporary cash investments		2	

Vene	Assets

Assets	

Assets	
Liabilities	
t Assets or Fund Balances	H

	_
	3
	4
	5
	6
Assets	7 8
As	9
	10a
	b
	11
	12
	13
	14
	15
	16
	17

	Check if Schedule O contains a response or not	e to ar	ny line in this Part	IX
1	Cash-non-interest-bearing		•	
2	Savings and temporary cash investments			
3	Pledges and grants receivable, net			
4	Accounts receivable, net			
5	Loans and other receivables from current and fo trustees, key employees, and highest compensa			te Pa
6 7	II of Schedule L Loans and other receivables from other disqualif section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations (Part II of Schedule L Notes and loans receivable, net	n 4958 tions c	8(c)(3)(B), and of section 501(c)(9	9)
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
b	Less accumulated depreciation	10 b		
11	Investments—publicly traded securities .			
12	$Investments-other\ securities\ \ See\ Part\ IV,\ line$	11 .		
13	Investments—program-related See Part IV, line	11 .		
14	Intangible assets			
15	Other assets See Part IV, line 11			
16	Total assets. Add lines 1 through 15 (must equa	al line	34)	
17	Accounts payable and accrued expenses $\ \ .$			
18	Grants payable			
19	Deferred revenue			
20	Tax-exempt bond liabilities			
21	Escrow or custodial account liability Complete P	art IV	of Schedule D	
22	Loans and other payables to current and former key employees, highest compensated employees			ees,
	persons Complete Part II of Schedule L			
23	Secured mortgages and notes payable to unrela	ted thi	rd parties	
24	Unsecured notes and loans payable to unrelated	third	parties	
25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17-24) Complete Part X of Schedule D	iyables	s to related third p	artı
26	Total liabilities. Add lines 17 through 25			
27	Organizations that follow SFAS 117 (ASC 95 complete lines 27 through 29, and lines 33 Unrestricted net assets	58), cl and 3	heck here ► ☑ 4.	an
28	Temporarily restricted net assets	•		•
29	Permanently restricted net assets			
	Organizations that do not follow SFAS 117	(ASC 9	958),	
30	check here ► ☐ and complete lines 30 th Capital stock or trust principal, or current funds	rough · ·	34.	
31	Paid-in or capital surplus, or land, building or eq	uıpme	nt fund	
32	Retained earnings, endowment, accumulated inc	ome,	or other funds	
33	Total net assets or fund balances			
34	Total liabilities and net assets/fund balances $\ \ .$		<u></u> .	_ •

	rmer officers, directors, ted employees Complete Part		5	
	ied persons (as defined under 14958(c)(3)(B), and			
orıng organıza	tions of section 501(c)(9) (see instructions) Complete		6	
			7	
			8	
arges			9	98,555
cost or other lle D	10a			· · ·
	10b		10 c	
ırıtıes .			11	
e Part IV, line	11		12	
ee Part IV, line	11		13	
			14	
		186,885	15	287,099
15 (must equ	al line 34)	5,305,594	16	13,248,076
penses		91,107	17	93,495
		197,244	18	100,000
	•		19	
			20	
ty Complete P	art IV of Schedule D		21	
	officers, directors, trustees, s, and disqualified			
dule L			22	
able to unrela	ted third parties		23	
le to unrelated	third parties		24	
income tax, pa n lines 17-24)	yables to related third parties,	1,398,999	25	1,305,420
ough 25		1,687,350	26	1,498,915
5 117 (ASC 9! and lines 33	58), check here ▶ ☑ and and 34.			
		3,432,642	27	11,473,799
		185,602	28	275,362
			29	
w SFAS 117	(ASC 958),			
te lines 30 th current funds	rough 34.		30	
building or eq	uipment fund		31	
ccumulated inc	ome, or other funds		32	
		3,618,244	33	11,749,161
d balances .		5,305,594	34	13,248,076
				Form 990 (2017)

Page **12**

11,749,161

Yes

Yes

Yes

2a

2b

2c

3a

3b

~

No

No

No

Form 990 (2017)

Form 990 (2017)

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	(

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Check if Schedule O contains a response or note to any line in this Part XII . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Software Version: **EIN:** 22-222589

Name: ADP FOUNDATION

Software ID:

Form 990 (2017)

Form 990, Part III, Line 4a:

GRANTS AND CONTRIBUTIONS MADE TO OTHER QUALIFIED CHARITABLE ORGANIZATIONS

efile	GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493319112658			
SCI	IFD	ULE A	Public	Charity Statu	e and Dul	alic Supp	ort	OMB No 1545-0047			
	m 990			Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.							
		the Treasury	► Information abo	ut Schedule A (Form			ıctions is at	Open to Public Inspection			
lame		ne Service ne organiza	tion	www.m.s.ig	<u>, голинээо</u> т		Employer identific				
		TION					22-2222589				
Pa			for Public Charity Stat				See instructions.				
ne o 1	rganiz		a private foundation becaus	•	•	,	(A)(:)				
		•	onvention of churches, or a								
2			scribed in section 170(b)		,	, ,					
3			or a cooperative hospital sei	-			-				
4	Ш		esearch organization opera and state	ted in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(III). E	nter the hospital's			
5		(b)(1)(A)	ation operated for the benef (iv). (Complete Part II)	-	,			bed in section 170			
6		A federal, s	tate, or local government o	r governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).				
7	✓	section 17	ation that normally receives ' 0(b)(1)(A)(vi). (Complet	e Part II)			init or from the gener	al public described in			
8		A communi	ty trust described in sectio	n 170(b)(1)(A)(vi)	(Complete Part I	I)					
9			ural research organization drant college of agriculture					ege or university or a			
LO		from activit	ation that normally receives lies related to its exempt fu income and unrelated busi see section 509(a)(2). (C	nctions—subject to cer ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross			
11			ation organized and operate		r public safety S	ee section 509	(a)(4).				
.2		more public	ation organized and operate ly supported organizations through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a				
а		Type I. A so	supporting organization ope n(s) the power to regularly Part IV, Sections A and B	rated, supervised, or co	ontrolled by its s	upported organi	zation(s), typically by				
b		manageme	supporting organization su nt of the supporting organiz plete Part IV, Sections A	zation vested in the sar							
С			unctionally integrated. A organization(s) (see instruct					ted with, its			
d		Type III n functionally	on-functionally integrated integrated integrated integrated integrated integrated in You must complete Pa	ed. A supporting organi on generally must satis	zation operated fy a distribution	ın connection wi requirement and	th its supported orgar				
e		Check this	box if the organization rece or Type III non-functionally	ıved a written determir	nation from the I		pe I, Type II, Type II	I functionally			
f	Enter		of supported organizations		gaac.on						
g	Provid	de the follow	ing information about the s	upported organization(s)						
(i) Name of supported organization (ii) EIN (iii) Type of organization in your governing document of the control of the cont					(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No					
Total			tion Act Notice, see the I		Cat No 11285		 Schedule A (Form 9	<u> </u>			

(b)(1)(A)(ix)

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part								
III. If the organization fails to qualify under the tests listed below, please complete Part III.)								
Section A. Public Support								
Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total		

	III. II the organization is	ans to quanty und	der the tests list	ed below, pleas	e complete Pari	L 111.)	
S	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	2,571,902	3,574,018	7,015,937	10,733,985	18,063,122	41,958,964
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,571,902	3,574,018	7,015,937	10,733,985	18,063,122	41,958,964
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)						35,756,849
6	Public support. Subtract line 5						6,202,115
	from line 4						0,202,113
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c)2015	(d) 2016	(e) 2017	(f) ⊤otal
7	Amounts from line 4	2,571,902	3,574,018	7,015,937	10,733,985	18,063,122	41,958,964
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	71,392	28,908	2,372	6,439	89,466	198,577
9	Net income from unrelated business activities, whether or not the						

	line 1 that exceeds 2% of the amount shown on line 11, column (f)						33,730,649
6	Public support. Subtract line 5 from line 4						6,202,115
5	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e) 2017	(f) ⊤otal
7	Amounts from line 4	2,571,902	3,574,018	7,015,937	10,733,985	18,063,122	41,958,964
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	71,392	28,908	2,372	6,439	89,466	198,577
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 VI)						
11	Total support. Add lines 7 through						42,157,541

	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e)2017	(f) ⊤otal
7	Amounts from line 4	2,571,902	3,574,018	7,015,937	10,733,985	18,063,122	41,958,964
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	71,392	28,908	2,372	6,439	89,466	198,577
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 VI)						
11	Total support. Add lines 7 through 10						42,157,541
12	Gross receipts from related activities,	etc (see instruction	ons)	L		12	_
13	First five years. If the Form 990 is fo	or the organization	s's first, second, th	ırd, fourth, or fıfth	tax year as a sec	tion 501(c)(3) org	anization,
	check this box and stop here					▶□]
S	ection C. Computation of Public						
14	Public support percentage for 2017 (III	ne 6, column (f) d	ivided by line 11, o	column (f))		14	14 710 %
15	Public support percentage for 2016 Sc	hedule A, Part II,	line 14			15	19 370 %
16a	33 1/3% support test—2017. If the	e organization did i	not check the box	on line 13, and lin	e 14 is 33 1/3% or	more, check this	box
b	and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this						
17a	box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
	organization						▶ ☑

14 15 16 17 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,				
	describe the designation If historic and continuing relationship, explain	1	İ		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)				
	In Section 309(a)(1) or (2)				
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)				
	below	3a	İ		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the				
	determination	3b			

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·				
	determination					
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b ın Part I, answer (b) and (c) below					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					

c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b in Part I, answer (b) and (c) below					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations					
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and					

			, ,				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b in Part I, answer (b) and (c) below						
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations						
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support						
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes						
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the						
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)						

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing				
	organization's supported organizations? If "Yes," provide detail in Part VI.				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a				
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)				

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9	
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	ection B. Type I Supporting Organizations				
			Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year				
_		1			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization				
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
S	ection D. All Type III Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No	
		1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard				
s	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b			

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O)raani:	zatione	Pag		
1	Check here if the organization satisfied the Integral Part Test as a qualifying true	_		Part VI) Soc		
_	instructions. All other Type III non-functionally integrated supporting organization					
	Section A - Adjusted Net Income					
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) $\frac{1}{2}$	1				
a	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
C	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
e	Discount claimed for blockage or other factors (explain in detail in Part VI)					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	Section C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionally-in	ntegrate	d Type III supporting or	ganization (see		

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in Part VI) See instructio			
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to wh details in Part VI) See instructions	sive (provide		
Distributable amount for 2017 from Section C, line 6			
Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017		
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whose details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions

details in Part VI) See instructions	Terraine organization is respons	sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
b From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Software ID:

Software Version: **EIN:** 22-222589

Page 8

Name: ADP FOUNDATION

Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1,

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI

Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test THE ADP FOUNDATION IS A NOT-FOR-PROFIT ORGANIZATION THAT RECEIVES AND ADMINISTERS FUNDS TO BE DISBURSED OR

DONATED TO OTHER SECTION 501(C)(3) CHARITABLE ORGANIZATIONS IN THE UNITED STATES. THE ORGANIZATION RECEIVES ITS FUNDS FROM EMPLOYEES OF ADP. AS WELL AS ITSELF

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Revenue included on Form 990, Part VIII, line 1

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

Assets included in Form 990, Part X

Supplemental Financial Statements

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

DLN: 93493319112658 OMB No 1545-0047

> Open to Public Inspection

(Form 990)

▶ Attach to Form 990.

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** ADP FOUNDATION 22-2222589 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Cat No 52283D

Schedule D (Form 990) 2017

Par	t IIII	Organizations Maintaining Col	lections of Art, F	listori	cal T	reas	ures, or	Other	Similar A	ssets ('continued)
3		the organization's acquisition, accessions (check all that apply)	n, and other records,	check	any of	the f	ollowing t	hat are a	significant	use of it	s collection
а		Public exhibition		d		Loar	n or excha	ange prog	rams		
b		Scholarly research		е		Othe	er				
c		Preservation for future generations									
4	Provi Part)	de a description of the organization's col XIII	lections and explain	how the	ey furtl	her th	ne organız	atıon's ex	empt purp	ose in	
5		ng the year, did the organization solicit o is to be sold to raise funds rather than to							ılar	□ Y (es 🗆 No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990	, Part	IV,	line 9, or	reporte	d an amo	unt on	Form 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	ıary for	contri	butio	ns or othe	er assets i	not	□ Y	es 🗆 No
ь	If "Ye	es," explain the arrangement in Part XIII	and complete the fo	llowing	table		[Amount	
c	Begir	nning balance						1c			
d	Addıt	ons during the year						1d			
е	Dıstrı	butions during the year						1e			
f	Endin	ng balance						1f			
2a	Did tl	he organization include an amount on Fo	rm 990, Part X, line	21, for	escrov	v or c	ustodial a	ccount lia	bility?		es 🗆 No
b	ĭf "Ve	es," explain the arrangement in Part XIII	Check here if the ex	vnlanati	on has	- haar	a provided	d in Part \	/TTT		
	art V	Endowment Funds. Complete if									<u> </u>
		Zildowiilelie i dildoi complete ii	(a)Current year		rior yea				(d)Three ye		(e)Four years back
1a	Beginn	ning of year balance	,				, , ,				. , .
b	Contrib	outions									
С	Net inv	vestment earnings, gains, and losses									
d	Grants	or scholarships									
е		expenditures for facilities ograms									
f	Admını	ıstratıve expenses									
g	End of	year balance									
2 a		de the estimated percentage of the curred designated or quasi-endowment	ent year end balance	(line 1	g, colu	mn (a	a)) held a	s			
b	Perm	anent endowment ►									
С	Temp	oorarily restricted endowment >									
	The p	percentages on lines 2a, 2b, and 2c shou	ld equal 100%								
3а	orgar	here endowment funds not in the posses nization by nrelated organizations	sion of the organizat	ion tha	t are h	eld ar	nd admını	stered fo	the	্র	Yes No
b	(ii) r	elated organizations es" on 3a(ii), are the related organization	ns listed as required (on Sche	 Idule R					3	a(ii)
4		ribe in Part XIII the intended uses of the	· ·			_					
Pa	rt VI	Land, Buildings, and Equipme	nt.								
		Complete if the organization answ	vered "Yes" on For								
	Descri	iption of property (a) Cost or oth (investme		or other	basis (other)	(c) Acci	umulated d	epreciation		(d) Book value
1a	Land										
b	Buildin	ngs									
c	Leaseh	nold improvements									
d	Equipn	nent									
e	Other						1				
Tota	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part .	X, colur	mn (B)	, line	10(c))		-	1	0

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	organization answ	ered "Yes" on Form !	990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value		hod of valuation -of-year market value
(1) Financial derivatives (2) Closely-held equity interests			
3)Other	<u> </u>		
A)			
B)			
C)			
D)			
E)			
F)			
G)			
н)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
art VIII Investments—Program Related. Complete if the organization answered 'Yes' on Fore	m 990, Part IV, lır	ne 11c. See Form 990	O, Part X, line 13.
(a) Description of investment	(b) Book value		hod of valuation -of-year market value
1)			
2)			
3)			
4)			
5)			
5)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organization answered 'You (a) Description	es' on Form 990, Par	t IV, line 11d See Forn	n 990, Part X, line 15 (b) Book value
L)			
2)			
3)			
4)			
5)			
5)			
7)			
3)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 15)			11000116
Other Liabilities. Complete if the organization ans See Form 990, Part X, line 25.			TIE OF TIT.
(a) Description of liability 1) Federal income taxes	(b) Bo	ook value	
ONTRIBUTIONS PAYABLE		1,305,420	
2)			
3)			
4)			
5)			
5)			
7)			
3)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	1,305,420	
Liability for uncertain tax positions. In Part XIII, provide the text of th			stements that reports the

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements

Other (Describe in Part XIII)

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Add lines 2a through 2d . .

Return Reference

Page 4

18,152,588

10,021,671

10.021.671

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Part XI

1

c

d

3 4

b

5

Part XIII

See Additional Data Table

2e e 3 3 18,152,588 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b Add lines **4a** and **4b** 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 5

n 18,152,588 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1 10,021,671 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

2b

2c

2d

4a

4b

Explanation

2e

3

4c

5

Page 5		Schedule D (Form 990) 2017		
	ormation <i>(continued)</i>	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Software ID: Software Version:

> **EIN:** 22-222589 Name: ADP FOUNDATION

Return Reference PART X, LINE 2

Explanation

Supplemental Information

ECEMBER 31, 2017

FEDERAL AND STATE INCOME TAX RETURNS PRIOR TO FISCAL YEARS 2014 AND 2013, RESPECTIVELY,

THE FOUNDATION HAS NO UNRECOGNIZED TAX BENEFITS AT DECEMBER 31, 2017 THE FOUNDATION'S U.S.

ARE CLOSED AND MANAGEMENT CONTINUALLY EVALUATES EXPIRING STATUTES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW AND NEW AUTHORITATIVE RULINGS IF APPLICABLE, THE FOUNDATION WOULD RECOGNIZE INTEREST AND PENALTIES ASSOCIATED WITH TAX MATTERS AS GENERAL AND ADMINISTRATIVE EXPENSES. THERE WERE NO INTEREST OR PENALTIES PAID FOR THE YEAR ENDED D.

efile GRAPHIC print	- DO NOT F	ROCESS A	s Filed Data			DLN:	9349331911	
SCHEDULE F	State	ment of A	Activities (Outside the Uni	ited St	ates	OMB No 1545-0)047
(Form 990)	► Compl	olete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ation about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.					2017	
Department of the Treasury Internal Revenue Service	► Informa						Open to Public Inspection	
Name of the organization ADP FOUNDATION						Employer iden	itification numb	er
ADP FOUNDATION						22-2222589		
	nformation Part IV, line		Outside the U	Inited States. Comple	te if the i	organization a	nswered "Yes"	to
-	he grantees'	eligibility for the		substantiate the amount stance, and the selection	_		✓ Yes [□ No
2 For grantmakers outside the United		Part V the orga	nızatıon's proce	dures for monitoring the	use of its	grants and oth	her assistance	
3 Activites per Region	(The followin	g Part I, line 3 t	able can be dupli	cated if additional space is	needed)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program s	ty listed in (d) is a service, describe lific type of e(s) in region	(f) Total expend for and investm in region	
(1)								
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continuati Part I	ion sheets to	0	C					C
	and 3b)	0	C					C

		CONTINIDOTION			
(2)					
(3)					
(4)					

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

(4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14) (15) (16) (17) (18) Page **3**

Schedule F (Form 990) 2017

Part IIII Grants and O	ther Assistance to	Individuals	Outside the Unite	ed States. Complete if	the organization an	swered "Yes" to Form 9	90, Part IV, line 16.
Part III can be	duplicated if addition	nal space is r	needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							

Sche	dule F (Form 990) 2017		Page 4
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	✓ No
	Schedul	e F (Form 9	990) 2017

scheaule F (F	orm 990) 2017 Page 5					
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).						
	,					
Return Reference	Explanation					

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -					DLI	N: 934933191	12658
Schedule I (Form 990) Department of the Treasury	Co	Governments omplete if the organiz	Other Assistandand Individual ation answered "Yes," Attach to Form le I (Form 990) and its	OMB No 1545-0047 2017 Open to Public Inspection					
Internal Revenue Service Name of the organization						Employ	er identific	ation number	
ADP FOUNDATION						22-222			
	ormation on Grants								
the selection criteria u Describe in Part IV the	sed to award the grants e organization's procedu	s or assistance ⁷ res for monitoring the u	se of grant funds in the U	nited States			and TV line	☐ Yes	☑ No
			ditional space is needed	ents. Complete if the o	rganızatıon answered "Yes	on Form 990, P	art IV, line	21, for any recip	ient
(a) Name and address o organization or government	f (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrip noncash ass		(h) Purpose of or assistance	f grant
(1) See Additional Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
		-	s listed in the line 1 table				>		113
For Paperwork Reduction Act	Notice, see the Instruction	ons for Form 990.		Cat No 50055	5P		Sch	edule I (Form 990) 2017

Schedule I (Form 990) 2017

(6)

(7)

Explanation

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

Part IV

Return Reference

AIKEN PARTNERSHIP

AIKEN, SC 29801 ALS ASSOCIATION

471 UNIVERSITY PKWY 111

1275 K STREET NW SUITE 250

WASHINGTON, DC 20005

Software ID: Software Version: **EIN:** 22-222589

57-0787606

13-3271855

Name: ADP FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

(4) 4 444. 655 6.	(-)	(0) 1.10 0000.0	(4) /	(0) /	(1) ct ca of raidation
organization		ıf applıcable	grant	cash	(book, FMV, appraisa
or government				assistance	other)

501(C)(3)

501(C)(3)

25,000

25,000

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

CHARITABLE

CHARITABLE

CONTRIBUTION

CONTRIBUTION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-3039601 501(C)(3) 5.000 ALZHEIMERS ASSOCIATION CHARITABLE 225 NORTH MICHIGAN CONTRIBUTION

CHARITABLE

CONTRIBUTION

35.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

AVENUE FLOOR 17 CHICAGO, IL 60601

260 W 39TH ST STE 701

NEW YORK, NY 10018

27-0601596

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 82-1993189 501(C)(3) 27.500 CHARITABLE AMERICAN CANCER SOCIETY CONTRIBUTION 250 WILLIAMS STREET NW

STE 600 ATLANTA, GA 303031032						
AMERICAN CONFERENCE ON DIVERSITY 109 CHURCH STREET	32-0154928	501(C)(3)	10,000		I	CHARITABLE CONTRIBUTION

NEW BRUNSWICK, NJ 089014012

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-5613797 501(C)(3) 65,000 CHARITABLE AMERICAN HEART

ASSOCIATION 7272 GREENVILLE AVENUE DALLAS, TX 75231					CONTRIBUTION
AMERICAN MUSEUM OF NATIONAL HISTORY CENTRAL PARK WEST AT 79TH	13-6162659	501(C)(3)	25,000		CHARITABLE CONTRIBUTION

STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10024

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 53-0196605 501(C)(3) 100.000 CHARITABLE AMERICAN RED CROSS 431 18TH STREET NW CONTRIBUTION 77-0480427 501(C)(3) 74,950 CHARITABLE CONTRIBUTION

WASHINGTON, DC 20006 ANITA BORG INSTITUTE FOR WOMEN 1501 PAGE MILL ROAD MS 1105

PALO ALTO, CA 94304

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ASOLO THEATRE INC. 59-2717909 501(C)(3) 25,000 CHARITABLE CONTRIBUTION

ASOLO THEATRE INC 59-2717909 501(C)(3) 25,000 CHARITABLE CONTRIBUTION SARASOTA, FL 34243

AUGUSTA STATE UNIVERSITY 58-6002053 501(C)(3) 50,000 CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1120 15TH STREET AUGUSTA, GA 309120004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1750663 501(C)(3) 50.000 CHARITABLE AUGUSTA TECHNICAL COLLEGE CONTRIBUTION PO BOX 9102 AUGUSTA. GA 309169102

CHARITABLE

CONTRIBUTION

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

BERGEN VOLUNTEER MEDICAL

75 ESSEX ST STE 100 HACKENSACK, NJ 076014034

INITIATIVE

20-2633437

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-7173492 501(C)(3) 15.000 CHARITABLE BETTER CHANCE A CONTRIBUTION

253 WEST 35TH STREET 6TH FLOOR NEW YORK, NY 10001 BIG BROTHERS BIG SISTERS 23-2987297 501(C)(3) 5.000 CHARITABLE CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

450 E JOHN CARPENTER FRFFWAY

IRVING, TX 750623904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 22-3676931 501(C)(3) 35.000 BIG BROTHERS BIG SISTERS CHARITABLE ECCEV COLINITY CONTRIBUTION

500 BROAD STREET NEWARK, NJ 07102					CONTRIBUTION
BOY SCOUTS OF AMERICA	04-6183691	501(C)(3)	15.000		CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1325 W WALNUST HILL LN

IRVING, TX 750383008

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-0185288 501(C)(3) 5,000 BOYS AND GIRLS CLUB IN CHARITABLE IBUTION

BONE VID CIDIC CITIES	21 1002254	E01(C)(2)	20,000		CHARITAI
NEW JERSEY INC 822 CLIFTON AVE CLIFTON, NJ 070131816					CONTRIB

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3900 CRITTENDEN DR

LOUISVILLE, KY 402091126

CHARITABLE BOAZ WIND CIKES CEORS 31-1093354 501(C)(3)| 20,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-1515405 501(C)(3) 7.500 CHARITABLE BOYS AND GIRLS CLUBS OF NEWARK CONTRIBUTION

CHARITABLE

CONTRIBUTION

1 AVON AVE NEWARK, NJ 071082801 CATALYST 13-1992402 501(C)(3) 32,500

FLOOR

NEW YORK, NY 100053905

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 30-0751934 501(C)(3) 5.000 CATERINAS CLUB CHARITABLE 341 E CENTER ST CONTRIBUTION

ANAHEIM, CA 928053263 CAUCUS EDUCATIONAL 22-3240680 501(C)(3) 20,000 CORPORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARITABLE CONTRIBUTION 75 MIDLAND AVENUE MONTCLAIR, NJ 07042

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-1835632 501(C)(3) 10,000 CHANCE IN LIFE CHARITABLE RIBUTION

COLLEGE CUMMIT	F2 2007020	E01(C)(2)	20.000		CHART
250 EAST 63RD STREET SUITE 204 NEW YORK, NY 10065					CONTRI

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1140 3RD ST NE SUITE 230

WASHINGTON, DC 20002

CHARITABLE COLLEGE SUMMIT 52-2007028 501(C)(3) 20,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-2919403 501(C)(3) 25.000 CHARITABLE COLUMBIA BUSINESS SCHOOL CONTRIBUTION

CLUB OF NY INC 450 N FND APT 16C NEW YORK, NY 102821196 COLUMBUS CITIZENS 13-6118967 501(C)(3) 15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10021

CHARITABLE FOUNDATION CONTRIBUTION 8 FAST 69TH STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance COMMUNITY FOOD BANK 22-2423882 501(C)(3) 50,000 CHARITABLE

31 EVANS TERMINAL HILLSIDE, NJ 07205					CONTRIBUTION
COUNCIL FOR ECONOMIC EDUCATION 122 E 42ND STREET NO 2600	13-1623848	501(C)(3)	5,000		CHARITABLE CONTRIBUTION

NEW YORK, NY 101682699

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-3661183 501(C)(3) 25,000 CHARITABLE DRESS FOR SUCCESS CONTRIBUTION

INC 25 COOK AVENUE MADISON, NJ 079401824					
EDUCATEUSA	56-2400088	501(C)(3)	5,000		CHARITABLE

814 SEVELY DR CONTRIBUTION

MOUNTAIN VIEW, CA 940411607

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 5.500 EMPOWERING WOMEN 14-1913427 CHARITABLE LEADERS CONTRIBUTION

CHARITABLE

CONTRIBUTION

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

PO BOX 12531 DALLAS, TX 752250531 ENACTUS

1959 EAST KERR STREET

SPRINGFIELD, MO 65803

74-2148471

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 36-3673599 501(C)(3) 100.000 CHARITABLE FEEDING AMERICA 35 EAST WACKER DRIVE CONTRIBUTION SUITE 2000

CHARITABLE

CONTRIBUTION

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

CHICAGO, IL 60601 FORDHAM UNIVERSITY

BRONX, NY 104585149

FMH 512

441 E FORDHAM ROAD SUITE

13-1740451

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance FRIENDS OF CANCER 52-1983273 501(C)(3) 10.000 CHARITABLE CONTRIBUTION RESEARCH

1800 M STREET NW SUITE 1050 SOUTH WASHINGTON, DC 20036					CONTINUESTION
GEORGIA TECH	58-6043294	501(C)(3)	5,000		CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

760 SPRING ST NW STE 400

ATLANTA, GA 303081028

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1276084 501(C)(3) 5.000 CHARITABLE GIRLS INCORPORATED OF GREATER ATLANTA CONTRIBUTION

CHARITABLE

CONTRIBUTION

461 MANGET STREET
ATLANTA, GA 30060

GIRLS INCORPORATED OF NYS 14-1434157 501(C)(3) 10,000
962 ALBANY STREET

SCHENECTADY, NY 123071513

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-1810150 501(C)(3) 25.000 CHARITABLE GIRLS INCORPORATED OF ORANGE COUNTY CONTRIBUTION

| 1815 ANAHEIM AVENUE | COSTA MESA, CA 92627 | CHARITABLE | 166 AVENUE OF THE | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | CONTRIBUTION | C

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AMERICAS

NEW YORK, NY 10013

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-3391333 501(C)(3) 20.000 CHARITABLE GREATER NEW YORK COUNCIL OF THE BLIND CONTRIBUTION

100 DE KRUIF PL APT 22A
BRONX, NY 104752405

HABITAT FOR HUMANITY INTL 61-1140804 501(C)(3) 127,500

CHARITABLE
INC CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1702 MOSELEY ST

OWENSBORO, KY 423033829

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance HABITAT FOR HUMANITY OF ELL 74-2226271 501(C)(3) 5.000 CHARITABLE CONTRIBUTION

PASO INC
1400 HARDWAY ST STE 329
EL PASO, TX 799033128

HABITAT FOR HUMANITY OF 59-3034059 501(C)(3) 5,000

CHARITABLE
SEMINOLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 181010

CASSELBERRY, FL 327181010

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance HEART HOUSE 75-2898097 501(C)(3) 5.000 CHARITABLE PO BOX 823162 CONTRIBUTION

DALLAS, TX 753823162

HIGH COUNTRY CHARITABLE FOUNDATION INC 12180 SOUTH SHORE BLVD STE 104

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WELLINGTON, FL 334146505

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-3573852 501(C)(3) 50.000 CHARITABLE HISPANIC FEDERATION 55 EXCHANGE DI ACE 5TH CONTRIBUTION

FLOOR NEW YORK, NY 10005					CONTRIBUTION
HISPANIC IT EXECUTIVE COUNCIL 1301 W LONG LAKE RD STE 200	20-5975604	501(C)(3)	20,000		CHARITABLE CONTRIBUTION

TROY, MI 480986319

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 36-3873652 501(C)(3) 9.000 CHARITABLE INNOVATIONS FOR LEARNING INC CONTRIBUTION

CHARITABLE

CONTRIBUTION

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

649 MICHIGAN AVE EVANSTON, IL 602022552 INTERNATIONAL CONSORTIUM OF MINORITY

19 BATTLERIDGE RD STE 100 MORRIS PLAINS, NJ 07950 46-5596141

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance 13-3062419 501(C)(3) 20.000 CHARITABLE INTREPID MUSEUM CONTRIBUTION FOUNDATION INC

ONE INTREPID SQUARE WEST 46TH STREET TWELFTH AVENUE NEW YORK, NY 10036					
INWOOD HOUSE (CHILDREN'S	52-0323695	501(C)(3)	10,000		CHARITA

209023682

TABLE CONTRIBUTION VILLAGE) 10921 INWOOD AVENUE SILVER SPRING, MD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ISTS 06-1688758 501(C)(3) 389,812 CHARITABLE RIBUTION

1321 MURFRESSBORO PIKE STE 800					CONTRIBUTION
NASHVILLE, TN 372172700					
JCI FOUNDATION INC	45-4698980	501(C)(3)	25,000		CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 488

LAKEMONT, GA 305520009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applıcable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance JERSEY BATTERED WOMENS 22-2170048 501(C)(3) 17.500 CHARITABLE CEDVACE CONTRIBUTION

PO BOX 1437 MORRISTOWN, NJ 07962					CONTRIBUTION
JERSEY CARES INC 290 W MOUNT PLEASANT AVE	22-3294530	501(C)(3)	15,000		CHARITABLE CONTRIBUTION

STF 1320

LIVINGSTON, NJ 070392763

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-5368055 501(C)(3) 35.000 JOHNNY MAC SOLDIERS FUND CHARITABLE INC CONTRIBUTION

63 SOUTH STREET STE 300 HOPKINTON, MA 017482229 JUNIOR ACHIEVEMENT OF 52-0688275 501(C)(3) 5.000 CHARITABLE CENTRAL MARYLAND CONTRIBUTION 10711 RED RUN BLVD STE 110

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OWINGS MILLS, MD 211175138

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 36-2170141 501(C)(3) 5.000 CHARITABLE JUNIOR ACHIEVEMENT OF CHICAGO CONTRIBUTION 651 WEST WASHINGTON

BOULEVARD SUITE 404 CHICAGO, IL 60661 JUNIOR ACHIEVEMENT OF 58-0598050 501(C)(3) 30,000 CHARITABLE GEORGIA CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

275 NORTHSIDE DRIVE NW ATLANTA, GA 30314

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-1774147 501(C)(3) 39.000 CHARITABLE JUNIOR ACHIEVEMENT OF NEW JERSEY CONTRIBUTION 360 PEAR BLOSSOM DRIVE

CHARITABLE CONTRIBUTION

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

EDISON, NJ 08837
· · · · · · · · · · · · · · · · · · ·
JUNIOR ACHIEVEMENT
WORLDWIDE
1 EDUCATION WAY
COLORADO SPRINGS, CO

80906

84-1223492

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ITABLE

KIPP NEW JERSEY 60 PARK PL STE 802 NEWARK, NJ 071025508	46-2792701	501(C)(3)	10,000		CHARITABLE CONTRIBUTION
LEAD NEW JERSEY INC	47-2471572	501(C)(3)	20,000		CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

33 LIVINGSTON AVE STE 242 NEW BRUNSWICK, NJ 08901

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-3217805 501(C)(3) 50.000 CHARITABLE LESBIAN AND GAY CONTRIBUTION COMMUNITY

208 WEST 13TH STREET NEW YORK, NY 10011					
LEUKEMIA AND LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200	13-5644916	501(C)(3)	10,000		CHARITABLE CONTRIBUTION

RYE BROOK, NY 10573

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LIBERTY SCIENCE CENTER 22-2302253 501(C)(3) 100.000 CHARITABLE

LIBERTY STATE PARK 222 JERSEY CITY BLVD JERSEY CITY, NJ 07305					CONTRIBUTION
METROPOLITAN MUSEUM OF	13-1624086	501(C)(3)	5.000		CHARITABLE

・(ヒハン) ART CONTRIBUTION 1000 FIFTH AVENUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10028

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MICHAEL J FOX FOUNDATION 13-4141945 501(C)(3) 5,000 CHARITABLE

GRAND CENTRAL STATION PO BOX 4777 NEW YORK, NY 101634777						CONTRIBUTION
MONTCLAIR STATE UNIVERSITY FOUNDATION ONE NORMAL AVE COLLEGE	22-6017209	501(C)(3)	30,000		I	CHARITABLE CONTRIBUTION

HALL NO 300 MONTCLAIR, NJ 070431624

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 62-0513741 501(C)(3) 20.000 MONTGOMERY BELL ACADEMY CHARITABLE 4001 W END CONTRIBUTION

NASHVILLE, TN 37205

NATIONAL CYBER SECURITY 37-1861631 501(C)(3) 25,000

CHARITABLE CONTRIBUTION CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 200054902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 36-2307745 501(C)(3) 307.273 NATIONAL MERIT CHARITABLE SCHOLARSHIP CORP CONTRIBUTION

SCHOLARSHIP CORP
1560 SHERMAN AVE STE 200
EVANSTON, IL 602014816

NEW JERSEY CITY UNIVERSITY 27-7261698 501(C)(3) 6,000 CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2039 JOHN KENNEDY BLVD

JERSEY CITY, NJ 073051596

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-3282526 501(C)(3) 5.000 CHARITABLE NEW JERSEY COMMUNITY DEVELOPMENT CONTRIBUTION

32 SPRUCE STREET PATERSON, NJ 075011712 22-1714037 501(C)(3) 100.000 NEW JERSEY INSTITUTE OF TECHNOLOGY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEWARK, NJ 071020000

CHARITABLE CONTRIBUTION UNIVERSITY HEIGHTS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance NEW JERSEY PERFORMING 22-2889703 501(C)(3) 200.000 CHARITABLE (NJPAC) CONTRIBUTION

ONE CENTER STREET NEWARK, NJ 07102

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEWARK, NJ 07102

NEW JERSEY SEEDS 22-3181507 501(C)(3) 25.000 CHARITABLE 494 BROAD STREET SUITE 105 CONTRIBUTION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance RITABLE

NJTV PUBLIC MEDIA NJ INC 825 EIGHTH AVENUE NEW YORK, NY 100197416	45-2552448	501(C)(3)	5,000		CHARI CONTI
					1

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

99 WALL STREET 350

NEW YORK, NY 10005

TRIBUTION NPOWER INC 13-4145441 501(C)(3) 15,000 CHARITABLE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 63-0359707 501(C)(3) 10.000 CHARITABLE ONE MIND INSTITUTE PO BOX 680 CONTRIBUTION

CHARITABLE CONTRIBUTION

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

RUTHERFORD, CA 945730680

OPERATION GRATITUDE

21100 LASSEN STREET CHATSWORTH, CA 91311 20-0103575

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-7069110 501(C)(3) 100.000 OXFAM AMERICAN CHARITABLE 226 CAUSEWAY STREET 5TH CONTRIBUTION

FLOOR BOSTON, MA 02114

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MILLBURN, NJ 070411605

PAPER MILL PLAYHOUSE 22-1550515 501(C)(3) 5.000 CHARITABLE 22 BROOKSIDE DR CONTRIBUTION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1314556 501(C)(3) 15.000 CHARITABLE PARTNERSHIP AGAINST DOMESTIC CONTRIBUTION PO BOX 170225 ATLANTA, GA 30317

CHARITABLE

CONTRIBUTION

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

PASADENA RONALD

MCDONALD HOUSE

763 S PASADENA AVE PASADENA, CA 91105 95-3167869

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-2598353 501(C)(3) 25.000 CHARITABLE PATERSON HABITAT FOR CONTRIBUTION

HUMANITY 146 NORTH FIRST STREET PATERSON, NJ 07522 PATERSON PUBLIC SCHOOL 501(C)(3) 25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PATERSON, NJ 07503

CHARITABLE DISTRICT CONTRIBUTION 90 DELAWARE AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-7453657 501(C)(3) 5.000 PUSHCART PLAYERS CHARITABLE CONTRIBUTION

261 BLOOMFIELD AVE SUITE A VERONA, NJ 070442458

RARITAN VALLEY HABITAT FOR COMMUNITY CONTRIBUTION PO BOX 6275

CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BRIDGEWATER, NJ 088070275

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance DUTCEDS LINIT/EDSITY 22-7219472 E01/C1/31 100 000 CHARITABLE ONTRIBUTION

335 GEORGE STREET NEW BRUNSWICK, NJ 089012036	23-7310472	301(C)(3)	100,000		CON
SAFE WATER NETWORK	51-0570455	501(C)(3)	25,000		СНА

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10168

IARITABLE 122 EAST 42ND STREET SUITE CONTRIBUTION 2600

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-4854237 501(C)(3) 10.000 SEWA INTERNATIONAL INC CHARITABLE 20070 TECHNIOLOGY DD CTE CONTRIBUTION

CHARITABLE

CONTRIBUTION

216 MURRIETA, CA 925632649					
SPECIAL OLYMPICS GEORGIA	23-7201676	501(C)(3)	10,000		

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6046 FINANCIAL DRIVE

NORCROSS, GA 30071

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance SPRINGROARD 2000 52-2266068 501(C)(3) 15 000 CHARITARIE

CTA DTOLIT					
WASHINGTON, DC 200071150					
2100 FOXHALL RD NW	1				
ENTERPRISES INC					CONTRIBUTIO
SI KINGDO/ KID 2000	3L LL00000	301(0)(3)	15,000		CI II II II II II I

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 100180881

STARTOUT 26-4634162 15.000 CHARITABLE 501(C)(3) 1350 BROADWAY RM 2000 CONTRIBUTION

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-1487354 501(C)(3) 100.000 CHARITABLE STEVENS INSTITUTE OF TECHNIQUOCY CONTRIBUTION

ONE CASTLE POINT ON HUDSON HOBOKEN, NJ 07030					CONTRIBUTION
TAYO REEDS PERFORMING	71-0877930	501(C)(3)	10,000		CHARITABLE

ARIS CENTER CONTRIBUTION 6703 SHANNON PKWY STE 7

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

UNION CITY, GA 302912073

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-3541913 501(C)(3) 25.000 TEACH FOR AMERICA CHARITABLE 25 BROADWAY 12TH FLOOR CONTRIBUTION

NEW YORK, NY 10004

TEAM RUBICON 27-1720480 501(C)(3) 50,000

CHARITABLE CONTRIBUTION CONTRIBUTION

SUITE 310

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90045

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 23-3025771 501(C)(3) 5.000 CHARITABLE UNITED WAY OF THE GREATER LEHIGH CONTRIBUTION 1110 AMERICAN PARKWAY NE

NO F-120 ALLENTOWN, PA 181099148 501(C)(3) 10,000 UNIVERSITY CA SAN 94-1156628 FRANCISCO 213 FULTON ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARITABLE CONTRIBUTION SAN FRANCISCO, CA 941171080

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance UNIVERSITY OF TEXAS (UTEP) 74-1587488 501(C)(3) 175.000 CHARITABLE RIBUTION

PO BOX 250 AUSTIN, TX 787670250		, , ,	·		CONTRIBUTION
US CHAMBER OF COMMERCE (HIRING OUR HEROES)	45-1561597	501(C)(3)	100,000		CHARITABLE CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 200620001

1615 H ST NW

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance US FOUNDATION FOR 22-2990908 501(C)(3) 25.000 CHARITABLE

INSPIRATION 200 BEDFORD ST MANCHESTER, NH 03101			,		CONTRIBUTION
VOLUNTEER CENTER OF BERGEN COUNTY INC	22-1821282	501(C)(3)	5,000		CHARITABLE CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

64 PASSAIC ST

HACKENSACK, NJ 076014309

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance WITH DUTEE CONCEDIVATION 12-17/0011 E01/C1/31 6 0001 CHARITABLE ITRIBUTION

SOCIETY 2300 SOUTHERN BOULEVARD BRONX, NY 10460	13-1740011	301(0)(3)	0,000		CONTRIBUTION
WILLIAM PATERSON	23-7117036	501(C)(3)	5,000		CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

UNIVERSITY 300 POMPTON ROAD

WAYNE, NJ 074702103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

WINSTON PREP SCHOOL 100 EAST LN SHORT HILLS, NJ 070783243	22-2367416	501(C)(3)	20,000		CHARITABLE CONTRIBUTION

YEAR UP INC 04-3534407 501(C)(3) 10,000 CHARITABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

45 MILK STREET BOSTON, MA 02109

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-4057685 501(C)(3) 25.000 CHARITABLE YOUNG SURVIVAL COALITION 80 BROAD STREET SUITE 1700 CONTRIBUTION NEW YORK, NY 10004 F4F RFLIFF - ADP CARES 501(C)(3) 100,000 CHARITABLE CONTRIBUTION EMPLOYEE RELIEF FUND GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance WORKPLACE GIVING - OTHER 501(C)(3) 44.433 CHARITABLE CONTRIBUTION 501(C)(3) 1.519.899 CHARITABLE WORKPLACE GIVING

EMPLOYER

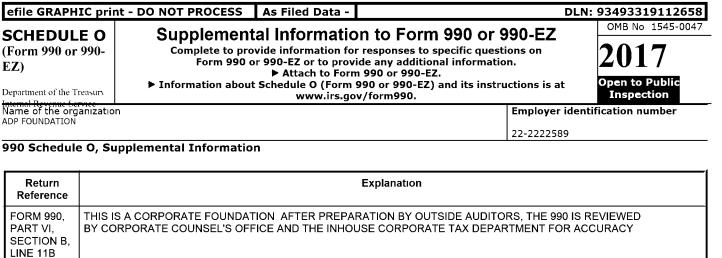
Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 501(C)(3) 1.602.884 CHARITABLE WORKPLACE GIVING EMPLOYEE CONTRIBUTION

CHARITABLE CONTRIBUTION

2,468,384

501(C)(3)





990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. **UPON REQUEST** PART VI, SECTION C. LINE 19

Return Explanation Reference

990 Schedule O, Supplemental Information

FORM 990. THE ORGANIZATION HAS A COMMITTEE RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT AS WELL AS THE PART XII. SELECTION OF THE INDEPENDENT ACCOUNTANT

LINE 2C

efile GRAPHIC print - DO	NOT PROCESS As Fi	led Data -										DLN: 93493	319112	658
SCHEDULE R (Form 990) Department of the Treasury	► Complet	Related O e if the organi	zation an	swered "Yes	s" on Form Form 990.	n 990, Parl	IV, line 33	, 34, 35b,	, 36, or			Open to	17	
Internal Revenue Service Name of the organization ADP FOUNDATION										loyer identif	ication		ction	
Part I Identification	of Disregarded Entities	Complete if t	ne organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3		222303				
Name, address, and	(a) EIN (if applicable) of disregarded e	entity		(b) Primary a			c) nicile (state n country)	(d) Total inc	ome	(e) End-of-year as	ssets	(f Direct co ent	ntrolling	
Part II Identification of related tax-exer	of Related Tax-Exempt (npt organizations during th		S Comple	l te if the org	anızatıon	l answered	"Yes" on F	l orm 990,	Part I\	l V, line 34 be	cause	ıt had one or	more	
Name, address, an	(a) d EIN of related organization		Prima	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled
For Paperwork Reduction Ac	t Notice, see the Instructio	ns for Form 99	00.		Ca	nt No 5013	<u>I</u> 35Y				Sch	edule R (Form	990) 20	17

IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization related organization Primary activity (b) Primary activity Legal domicile (state or foreign Direct controlling entity (C corp, S corp, or trust) Share of fotal income over trust) Share of end-of- year assets Sect (13)	(a) Name, address, and EIN related organization	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomina income(rela unrelated excluded frax unde sections 5:514)	ited, total inc d, fom er	of	(g) Share of end-of-year assets	Dispropi allocat	(h) Disproprtionate allocations? Yes No		allocations? an		V-UBI t in box of ule K-1 1065)	Gene mana part	aging ner?	(k) Percent owners
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of Type of entity (C corp, S corp, or trust) Name, address, and EIN of Type of entity (C corp, S corp, or trust) NAME OF TYPE OF TAX								Yes	No			Yes	No					
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OMATIC DATA PROCESSING INC PAYROLL SERVICE NJ N/A C 100 000 %	IV Identification of Related Orga because it had one or more relat	unizations Taxable as a ed organizations treated a	Corporation o	or Trust	t Complete st during th	of the organe tax year	anızatıon a	ınsw	ered "Yes	s" on Fo	orm 9	90, Pa	art IV,	lıne	34			
P BOULEVARD	because it had one or more relat (a) Name, address, and EIN of	ed organizations treated a	s a corporation (c) Legal dominal (state or	or trus or trus lal cile foreign	st during th	(d)	(e) Type of entity C corp, S corp	Sh	(f) nare of total	Share	(g) of end- year		(h Percen) itage	Se	3) con		
ND, NJ 07068	because it had one or more relat (a) Name, address, and EIN of related organization	ed organizations treated a (b) Primary activity	s a corporation (c) Leg domic (state or count	or trus	St during th	(d)	(e) Type of entity C corp, S corp	Sh	(f) nare of total	Share	(g) of end- year	of-	(h Percen owner) itage ship	Se (1	(ı) ection 5 3) conf entit Yes		
	DMATIC DATA PROCESSING INC	ed organizations treated a (b) Primary activity	s a corporation (c) Leg domic (state or count	or trus	St during th	(d)	(e) Type of entity C corp, S corp	Sh	(f) nare of total	Share	(g) of end- year	of-	(h Percen owner) itage ship	Se (1	3) con entit		
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	DMATIC DATA PROCESSING INC	ed organizations treated a (b) Primary activity	s a corporation (c) Leg domic (state or count	or trus	St during th	(d)	(e) Type of entity C corp, S corp	Sh	(f) nare of total	Share	(g) of end- year	of-	(h Percen owner) itage ship	Se (1	3) con entit		
	DMATIC DATA PROCESSING INC	ed organizations treated a (b) Primary activity	s a corporation (c) Leg domic (state or count	or trus	St during th	(d)	(e) Type of entity C corp, S corp	Sh	(f) nare of total	Share	(g) of end- year	of-	(h Percen owner) itage ship	Se (1	3) con entit		
	DMATIC DATA PROCESSING INC	ed organizations treated a (b) Primary activity	s a corporation (c) Leg domic (state or count	or trus	St during th	(d)	(e) Type of entity C corp, S corp	Sh	(f) nare of total	Share	(g) of end- year	of-	(h Percen owner) itage ship	Se (1	3) con entit		
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Sche	ule R (Form 990) 2017					Pag	ge 3
Pa	Transactions With Related Organizations Complete If the organization answered "Yes"	' on Form 990, Par	t IV, line 34, 35b,	, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 D	iring the tax year, did the orgranization engage in any of the following transactions with one or more related o	organizations listed in	Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity				1a		No
b	Gift, grant, or capital contribution to related organization(s)				1b		No
c	Gift, grant, or capital contribution from related organization(s)				1c	Yes	
d	Loans or loan guarantees to or for related organization(s)				1d		No
e	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1f		No
g	Sale of assets to related organization(s)				1 g		No
h	Purchase of assets from related organization(s)				1h		No
i	Exchange of assets with related organization(s)				1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
0	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				1p		No
q	Reimbursement paid by related organization(s) for expenses				1 q		No
r	Other transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	e, including covered r	elationships and tra	nsaction thresholds			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining ar	mount in	volved	
(1) AD	P	0	114,333	FMV			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017