EXTENDED TO NOVEMBER 15, 2018

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public. Co to your ire gov/Form990 for instructions and the latest information

Open to Public

A 1	For the 2	017 calendar year, or tax year beginning	and ending	<u>satumormation.</u>	
	Check if	C Name of organization		D Employer ident	tification number
	applicable				
	Address change	J. N. PEW JR. CHARITABLE TRUST		_	
	Name change	Doing business as		23-	-6299309
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/su		
L	Final return/ termin-	C/O GLENMEDE TRUST CO., N.A. 1650 MARKET	1200) 419-6000
_	ated Amended	City or town, state or province, country, and ZIP or foreign postal coo	le	G Gross receipts \$	40,145,955.
늗	_iretum Applica-	PHILADELPHIA, PA 19103-7391 F Name and address of principal officer: GLENMEDE TRUST CO., N	A	H(a) Is this a group	
<u></u>]tion pending	SAME AS C ABOVE	 ∧∕	for subordina H(b) Are all subordinate	
<u> </u>	Tax-exem	<u></u>	7(a)(1) or	* 1	n a list, (see instructions)
	Website:			H(c) Group exemp	·
<u>K</u>	orm of or	ganization: Corporation X Trust Association Other	LY	ear of formation 1963	M State of legal domicile: PA
P	art I S	ummary			
æ	1 Bri	efly describe the organization's mission or most significant activities: \underline{s}	EE SCHEDULE	0.	
Š	_				
Governance	2 Cr	neck this box if the organization discontinued its operations or	disposed of m		_
Š	3 Nu	imber of voting members of the governing body (Part VI, line 1a)		· -	$\frac{3}{4}$ $\frac{1}{1}$
≪	1	imber of independent voting members of the governing body (Part VI, In-		·	5 0
Activities	5 To	tal number of individuals employed in calendar year 2017 (Part V, line 2a tal number of volunteers (estimate if necessary))	· · · · -	6 0
Ϋ́	7a To	tal unrelated business revenue from Part VIII, column (C), line 12	•		7a 60,316.
Ą	b Ne	et unrelated business taxable income from Form 990-T, line 34	•	-	7b 29,810.
				Prior Year	Current Year
a)	8 Cc	ontributions and grants (Part VIII, line 1h)			0. 0.
ž	9 Pr	ortributions and grants (Part VIII, line 1h) ogram service revenue (Part VIII, line 2g) RECEI	VED		0. 0.
Revenue		restment income (Part VIII, Column (A), lines 3, 4, and (a)		3,065,07	
	11 Ot	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9紀 (c, 4年)	2018 100	12,293,29	
_		ntal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line	(42) Q 	15,358,36° 17,556,07°	
	1	rants and similar amounts paid (Part IX, column (A), lines 33GDEN			0. 17,748,757. 0. 0.
		enefits paid to or for members (Part IX, column (A), line 4) CLN, slaries, other compensation, employee benefits (Part IX, column (A), lines	1,128,48		
ses		ofessional fundraising fees (Part IX, column (A), line 11e)	3-10)		0. 0.
Expens	ь то	otal fundraising expenses (Part IX, column (D), line 25)	0.	······································	
ŭ	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		93,44	2. 62,567.
	18 To	stal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		18,777,99	4. 19,001,364.
_		evenue less expenses Subtract line 18 from line 12		<3,419,627	.> 7,108,484.
s or	1			Beginning of Current Yea	
ssets (20 To	otal assets (Part X, line 16)		288,264,88	
etA	21 To	otal liabilities (Part X, line 26)		200 264 00	0. 0.
膏		et assets or fund balances. Subtract line 21 from line 20 Signature Block		288,264,88	7. 295,373,371.
		es of perjury, I declare that I have examined this return, including accompanying so	hedules and stat	ements, and to the hest of	my knowledge and helief, it is
		and complete. Declaration of preparer (other than officer) is based on all information		·	Thy knowledge and belief, it to
		dan		11/	13/18
Sıg	ո 🦻	Signature of officer		Date	
He	re 📗	OLUMIDE ONAFOWORA, ASSOCIATE COUNSEL			
		Type or print name and title			
		rint/Type preparer's name Preparer's signature	1 /_	Date Check	PTIN
Pai	⊢	VID F. DOTSON	W		played P00738401
		rm's name DELOITTE TAX LLP		Firm's EIN	86-1065772
Use	Only F	Irm's address 1700 MARKET STREET, 25TH FLOOR		2	15-246-2300
<u></u>	u the IDC	PHILADELPHIA, PA 19103-3984 discuss this return with the preparer shown above? (see instructions)		Phone no. 2	15-246-2300 X Yes No.
.vizi					I I TAG L IND'

Form	990 (2017) J. N. PEW JR. CHARITABLE TRUST	23-6299309	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	SEE SCHEDULE O.	_	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	□ Y .	es 🗓 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y	es X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as mo	easured by expense	es.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,		
4a	(Code) (Expenses \$17,748,757. including grants of \$17,748,757.) (Revenue	\$	1
	SEE SCHEDULE O.		
	<u> </u>		
			-
			
			
45			
4b	(Code) (Expenses \$	\$,
			
			
		_	
	<u></u>		
4c	(Code) (Expenses \$) (Revenue	\$)
			
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$		
4e	Total program service expenses ▶ 17,748,757.		

Part IV | Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? х If "Yes," complete Schedule A х 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect х during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or Х similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to x 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, x 7 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? If "Yes," complete Х Schedule D. Part III 8 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 services? Х If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 x 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, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. x Part VI 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes." complete Schedule D. Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . 11c 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 in Part X, line 16? If "Yes," complete Schedule D, Part IX х 11d Х 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete х Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? х If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes." complete Schedule E X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 14h or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Х or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, x column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines X 1c and 8a? If "Yes," complete Schedule G, Part II 18

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

X

complete Schedule G. Part III

Form 990 (2017)

J. N. PEW JR. CHARITABLE TRUST

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			ı
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
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," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26	ı	х
07	complete Schedule L, Part II	_26_		 -
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		· ·	
	instructions for applicable filing thresholds, conditions, and exceptions)			•
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes." complete Schedule L. Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	۱ ٔ		1
	Schedule N, Part II .	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	۱	"	
	Part V, line 1	34	×	х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		┝┷
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	2EF	ĺ	
25	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		х
37	If "Yes," complete Schedule R, Part V, line 2	36	 	
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	ٽ'	 	\vdash
	Note. All Form 990 filers are required to complete Schedule O	38	x	
_			990	(2017)

Form	990 (2017) J. N. PEW JR. CHARITABLE TRUST 23-629930	9	_ P	age 5
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			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	د کارگار تابع	慈禧	22.3
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			erit.
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	(ME)		100 m
	(gambling) winnings to prize winners?	1c	X	~
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	产绩	订基	\$\$\$.T.\$
	filed for the calendar year ending with or within the year covered by this return 2a 0			1
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		T. T. T.
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	£ 122	122	\$ 188 \$ 17 T
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	الفسفة عثا
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	х	_
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	 		
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
h	If "Yes," enter the name of the foreign country:		连生 *	# 155 y
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	越		3
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	:	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	_	x
		5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	36		
Qa		60		x
	any contributions that were not tax deductible as charitable contributions?	6a	-	
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ch		Į.
7	were not tax deductible?	6b	學	الرابية ا
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	1.00	ر توريځ <i>ک</i> X
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
				\vdash
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		x
4	If "Yes," Indicate the number of Forms 8282 filed during the year	鑩		党验
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	71111	X
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76	_	x
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	┢ <u>┈</u>
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>4</u> 7h	<u> </u>	-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	ILES.	房 運動	\$5.5
٥		8	1, 12, 10	X
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	48.83	整整	78E-1
	Did the sponsoring organization make any taxable distributions under section 4966?	9a	¥	X
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		x
10	Section 501(c)(7) organizations. Enter:	6. H.X	E 100 E	Man Art
	Initiation fees and capital contributions included on Part VIII, line 12	12 T	1	7
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	3.3		學門
11	Section 501(c)(12) organizations. Enter	樂	1	
11	Gross income from members or shareholders		55	272
	Gross income from other sources (Do not net amounts due or paid to other sources against	陰		3314
	l i			13.5
120	• • • • • • • • • • • • • • • • • • • •	12a	F-1, 34	****
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128	nting!	The first
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	蓬	灩	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			\$224.50E
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ffs."	-5:515.43
۵.	Note. See the instructions for additional information the organization must report on Schedule O.	藩	三	
a	Enter the amount of reserves the organization is required to maintain by the states in which the	2.5	15.5	400 元
	organization is licensed to issue qualified health plans		133	[3]
	Enter the amount of reserves on hand	-	* JF 18.	x
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	 ^
D.	If "Yes," has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b	1	•

J. N. PEW JR. CHARITABLE TRUST 23-6299309 Form 990 (2017) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other х officer, director, trustee, or key employee? 2 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? x Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 х 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or x more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х **b** Each committee with authority to act on behalf of the governing body? 8h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the х organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a х b 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c in Schedule O how this was done х Did the organization have a written whistleblower policy? 13 13 X 14 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶PA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Other (explain in Schedule O) ___ Own website __ Another's website 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. State the name, address, and telephone number of the person who possesses the organization's books and records THE GLENMEDE TRUST COMPANY, N.A. - 215-419-6000 1650 MARKET STREET, SUITE 1200, PHILADELPHIA, PA 19103-7391

orm 990 (2017)	J.	N.	PEW	JR.	CHARITABLE TRU:	ST		23-6299309	Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization r		orga	nıza			nper	sate			
(A) Name and Title	(B)		(C) Position			1		(D) Reportable	(E) Reportable	(F) Estimated
ivame and title	Average hours per	box	not c , unle	heck i ss pei	more rson i	than d is both	n an	compensation	compensation	amount of
	week	-	cer ar	dad	irecto	tor/trustee)		from	from related	other
	(list any hours for	Individual trustee or director				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee or	ustee			ensale		(W-2/1099-MISC)	(organization
	organizations below	ual frug	ional	ĺ	ployee	g a	١.	{		and related organizations
	line)	ndivid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	!		organizations
(1) THE GLENMEDE TRUST CO., N.A.	40.00									
TRUSTEE		L	х	_		<u> </u>		1,190,040.	0.	0.
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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)		
(A)	(B)			(0	C)			(D)	(E)		(F)
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable		Estimated
	hours per	box	, unle:	ss pe	rson I	s boti x/trus	h an	compensation	compensatio		amount of
	week (list any	├──	r -		1	1	Γ,	from	from related		other
	hours for	liect		1		_	l	the organization	organization (W-2/1099-MIS		compensation from the
	related	100	ie	l	l	satec	1	(W-2/1099-MISC)	(***271033-18110	,0,	organization
	organizations	ruste	al frus		e	ag E	l	(17 27 1000 111100)			and related
	below	Individual trustee or director	Institutional trustee	<u>ت</u>	Key employee	est co	۾ ا				organizations
	line)	를	tusti	Officer	ě.	Highest compensated employee	Former	<u> </u>			
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	1		Щ	<u></u>	<u> </u>	<u> </u>	Ļ	1 100 040		0.	
1b Sub-total						•		1,190,040.	<u> </u>	0.	0.
c Total from continuation sheets to Part V	II, Section A	•						1,190,040.	 -	0.	0.
d Total (add lines 1b and 1c)								*	000 of and 4-14		<u> </u>
2 Total number of individuals (including but r	not limited to th	ose	liste	a ar	oove	e) wr	io re	eceived more than \$100,	UUU of reportable	3	0
compensation from the organization	·	-									Yes No
3 Did the organization list any former officer	director or to	.ata	. ka		2010		~ = 1	highest compensated or	molovos on		No. 22-75
-			e, ne	усі	ripic	yee,	, Or 1	riighest compensated ei	inployee on		3 × ×
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the si			mne	anea	tion	and	f oth	 ner compensation from t	he organization		F = 1. F.
and related organizations greater than \$15									ne organization		4 X
5 Did any person listed on line 1a receive or									dual for services		17. 72.
rendered to the organization? If "Yes." con	•				-		Ciui	od organization of mark	3041101 30111003		5 X
Section B. Independent Contractors	ipiete Schedul		UI SI	بالعلة	Ders	1011					<u>, , , , , , , , , , , , , , , , , , , </u>
Complete this table for your five highest co	mpensated inc	depe	nde	nt c	ontr	acto	rs th	hat received more than \$	100,000 of com	oensa	tion from
the organization. Report compensation for										_ ¯	
(A)								(B)			(C)
Name and business	address	NO	NE					Description of s	services	C	Compensation
										ı	
									[Ì	
							_				
							_				
							- 1		İ	1	
								<u> </u>			
2 Total number of independent contractors (_	ot lii	nite	d to	thos	se lis	sted	l above) who received m	ore than		
\$100,000 of compensation from the organ	zation >					υ				<u> </u>	<u> </u>

Form 990 (2017) J. N. PEW .
Part VIII Statement of Revenue

		Check if Schedule O contains a	response or note to any lin		(5)	(2)	(2)
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns	1a		建工艺工艺		
Grant	b	Membership dues	1b				
- 4	c	Fundraising events	1c				
Gifts ilar A	d	Related organizations	1d				
, <u>a</u>	e	Government grants (contributions)	1e				
50	t	All other contributions, gifts, grants, and	J	THE PARTY OF THE P	The state of the s	i dran sy may ribe (m. 17. i i i i i i i i i i i i i i i i i i i	THE RESERVE THE PARTY OF THE PA
ă		similar amounts not included above	1f				
Contributions, Cand Other Simil	g	Noncash contributions included in lines 1a-1f \$					
र्ेेड	<u></u> h	Total. Add lines 1a-1f		court material and the material and the	William Commission of the	Mark Strategy	The state of the s
J		•	Business Code		claffingereit ein fer in fermannen merreite.	al ar Die 3 der grand bereit ber gen e. g. i. Ber in der grande ber der generalen er grande er	Simply dust property (1997)
8	2 a						
2 4	b	·		 	ļ. —		
yram Ser Revenue	C			 			
E S	c			 	-		
Program Service Revenue	e	All address and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a		 	<u> </u>		
-	f			 	李4.200 (10km) 另2位	#44 HT CTT THE	
\dashv	3	Investment income (including divide	ande interest and		The Marie Care Miles	AND DESCRIPTION OF CHEEP!	The advisory and address 1 min to a
	•	other similar amounts)	interest, and	1,296,454.			1,296,454.
	4	Income from investment of tax-exer	not bond proceeds				
	5	Royalties	>				
		·	(i) Real (ii) Personal	Lamb all the party of			
	6 a	Gross rents		in things on product the post of			
	t	l ess rental expenses		Mary Control of the Control	dan Medikatan		
		: Rental income or (loss)		and the same party of the same	The state of the s	A THE PARTY OF THE PROPERTY OF THE PARTY OF	
	c	Net rental income or (loss)	>	-			
	7 a	Gross amount from sales of (i)	Securities (ii) Other	and the line before the line of the line o	and the second of the later of	ga da ingarak panglin, alia ke AFA.	
		assets other than inventory 19,	047,676.		TO THE PARTY OF TH	The state of the s	To the state of the same of the
	t	Less: cost or other basis					The first can be sufficient to the second to
1			036.107.			The parties from a reality	de la la la la la la la la la la la la la
			011,569.	TO SECTION OF SECURITIES		Month Property of St.	A STATE OF THE STA
	1	Net gain or (loss)	<u> </u>	5,011,569.	Constitution of the state of th	Manufaire Trainablu	5,011,569.
필	. 8 a	Gross incomo from fundiaising eve				Tipu ta Hillian Later at tentrangananan serengah tan at tentrangan taga sagatan	The grades and a series and the series of th
evenue		including \$	_ of		The applications of a second of the second o		of a sufficient beautiful and a supplied to
<u>α</u>		contributions reported on line 1c).		to home office for contain in (1)	The state of the s		
Other		Part IV, line 18 Less direct expenses	а <u></u> b	DECEMBER OF THE PROPERTY OF TH	The control of the co	Mar water trees	out of the second of the secon
ŏ		: Net income or (loss) from fundraising		444		AND A DESCRIPTION OF THE	42 300 TOLITABADA TOLITA
		Grocc income from gaming activities		Com. To all the character of the second	Electric Children Telephology	Brost Br Carry	Parket Sherry 13 2 to 12 mely
'	•	Part IV, line 19	a		Total State of the state of the	to the party of th	A STORY
	t	Less: direct expenses	ь				建设建设
		Net income or (loss) from gaming a	ctivities				
		Gross sales of inventory, less return		The table of the state of the s			u i u anuram dadahan mari u sama (i Tana
. '	٠.	and allowances	a				
	l t	Less: cost of goods sold	. Ե	THE MENT OF THE PROPERTY OF	The second second in the second secon		ALCONOMIC TO THE REST OF
		Net income or (loss) from sales of i	nventory	- C233 - C - C - C - C - C - C - C - C - C -	in a constant of the second	E. Tree . Committee and an	manufacture of the second
		Miscellaneous Revenue	Business Cod		Polk ac e militali de l'antigation de l'antiga		
	11 8		900000	19,796,889.		60,316.	19,736,573.
	1	OTHER INCOME	900099	4,936.			4,936.
				 	 	 	
	١ (· L	10 001 025	Children Grand Landston Company	Sadding and State of the	
		Total. Add lines 11a 11d	•		Control of the contro	60 316	26 049 532
	12	Total revenue. See instructions.		26,109,848.	0.	60,316.	26,049,532.

Form 990 (2017) J. N. PEW JR. CHARITABLE TRUST Part IX Statement of Functional Expenses

section	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			mpiete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	17,748,757.	17,748,757.	外域型的位于20	
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16			AND THE RESIDENCE	THE PROPERTY OF THE PARTY.
4	Benefits paid to or for members		·		而於弘明的華承可以
5	Compensation of current officers, directors,	1 190 040		1 190 040	
	trustees, and key employees	1,190,040.		1,190,040.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			1	
7	Other salaries and wages	-		,	
8	Pension plan accruals and contributions (include				
Ū	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			<u> </u>	<u> </u>
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management		L		
b	Legal	920.		/ 920.	
С	Accounting .				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	22,324.		22,324.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	15.		15.	<u> </u>
12	Advertising and promotion				
13	Office expenses		<u> </u>		
14	Information technology		ļ	 	
15	Royalties				
16	Occupancy	· · · · · · · · · · · · · · · · · · ·		 	
17 18	Travel Payments of travel or entertainment expenses		·····		
10	for any federal, state, or local public officials			[
10	Conferences, conventions, and meetings	<u></u>		-	
19 20	Interest				
21	Payments to affiliates	·			
22	Depreciation, depletion, and amortization	•			
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.)				
а	FOREIGN TAXES PAID	39,308.	A series of the	39,308.	ti ver K. R 4 Tu barnett and empressed in finding &
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c				· · · · · · · · · · · · · · · · · · ·	
ď					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	19,001,364.	17,748,757.	1,252,607.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				l
	educational campaign and fundraising solicitation.			. ,	1
	Check here ff following SOP 98-2 (ASC 958-720)		1	1	1

Form 990 (2017)
Part X Balance Sheet

		Check of Schodula O contains a response or note	to any line in this Bart V			
		Check if Schedule O contains a response or note	to any line in this Part A	(A)		(B)
				Beginning of year		End of year
	1	Cash · non-interest-bearing		138,359.	1	9,489.
	2	Savings and temporary cash investments		7,955,552.	2	7,017,329.
	3	Pledges and grants receivable, net	•		3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for	rmer officers directors	With the second	理	
	3	trustees, key employees, and highest compensation				
		Part II of Schedule L	'		5	Francisco de la constitución de
	6	Loans and other receivables from other disqualifi	ied persons (as defined under		4335	
	Ü	section 4958(f)(1)), persons described in section	•			
		employers and sponsoring organizations of section				
		employees' beneficiary organizations (see instr).		A DESCRIPTION OF THE PARTY OF T	6	279 March 2011 1 2000 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Assets	7	Notes and loans receivable, net			7	
Ass	8	Inventories for sale or use	• •		8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other		经验	選載	TEXAL DESIGNATION OF THE PARTY
i		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities		36,329,293.	11	31,349,429.
	12	Investments - other securities. See Part IV, line 1	243,841,683.	12	256,997,124.	
	13	Investments - program-related. See Part IV, line 1			13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	·		15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	288,264,887.	16	295,373,371.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	<u> </u>
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete F	Part IV of Schedule D	*	21	
S	22	Loans and other payables to current and former	officers, directors, trustees,			
litie		key employees, highest compensated employee	s, and disqualified persons.	等于是一种工程		
Liabilities		Complete Part II of Schedule L			22	
: :	23	Secured mortgages and notes payable to unrela	ted third parties		23	ļ <u>.</u>
	24	Unsecured notes and loans payable to unrelated	third parties		24	
	25	Other liabilities (including federal income tax, pages				
		parties, and other liabilities not included on lines	17-24). Complete Part X of			
		Schedule D .			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
	l	Organizations that follow SFAS 117 (ASC 958)	-		變	
es		complete lines 27 through 29, and lines 33 an	d 34.		75%	
anc	27	Unrestricted net assets			27	
Bai	28	Temporanly restricted net assets			28	
힏	29	Permanently restricted net assets		The results of the second	29	The second second
교		Organizations that do not follow SFAS 117 (A	SC 958), check here			
ō		and complete lines 30 through 34.		291,684,514.		288,264,887.
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		291,084,314.	30	288,264,867.
Ass	31	Paid-in or capital surplus, or land, building, or ed	•	<3,419,627.>	31	7,108,484.
é	32	Retained earnings, endowment, accumulated in	come, or other funds	288,264,887.	+	295,373,371.
_	33	Total net assets or fund balances	•	288,264,887.	+	295,373,371.
	34_	Total liabilities and net assets/fund balances		1 200,202,007,	1 34	Form 990 (2017)

Form	990 (2017) J. N. PEW JR. CHARITABLE TRUST	23-629930	19P	age 12
Păi	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,109	<u></u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,001	,364.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,108	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	288,264	,887.
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		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	295,373	,371.
Pai	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		[]
	separate basis, consolidated basis, or both			1 Table 1
	Separate basis Consolidated basis Both consolidated and separate basis			
þ	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	建模 医乳	133
	consolidated basis, or both:		經過	
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	医速 際	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt	国际	
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Щ.
			Form 990	(2017)

SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number J. N. PEW JR. CHARITABLE TRUST 23-6299309 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

me	orgar	iization is not a p	mvate founda	ition because it is (i	or lines i unrough 12, ci	neck only o	one box)		
1		A church, conve	ention of chu	irches, or associatio	n of churches described	in sectio	n 170(b)(1)(A)(i).	10
2		A school descri	ibed in sectio	on 170(b)(1)(A)(ii). (Attach Schedule E (Form	1 990 or 99	90-EZ).)		17
3		A hospital or a	cooperative h	nospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).	S
4		A medical resea	arch organiza	ition operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:	-						
5				r the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describe	ed in
Ŭ		-		omplete Part II.)		F	, - 5-		
c					contal unit decombed in	coation 17	70/63/43/AV	(A	
6	믐		•	_	nental unit described in			· ·	
7	ш	-		-	ntial part of its support fr	om a gove	emmental i	unit or from the general p	oublic described in
		section 170(b)		-					
8	닏				(1)(A)(vi). (Complete Part				
9	Ш	An agricultural	research orga	anızatıon described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	nction with a land-grant	college
		or university or	a non-land-gr	rant college of agric	ulture (see instructions).	Enter the r	name, city,	and state of the college	or
		university.							
10		An organization	n that normall	ly receives (1) more	than 33 1/3% of its supp	oort from o	ontributio	ns, membership fees, an	d gross receipts from
		activities related	d to its exem	pt functions - subjec	ct to certain exceptions,	and (2) no	more than	33 1/3% of its support f	rom gross investment
		income and uni	related busin	ess taxable income	(less section 511 tax) fro	m busines	ses acquir	ed by the organization a	fter June 30, 1975.
		See section 50	9(a)(2). (Con	nplete Part III.)	•		-	-	
11					vely to test for public saf	fety. See	section 50	9(a)(4).	
12	X	-	-	•	vely for the benefit of, to				purposes of one or
		_	_	•	d in section 509(a)(1) o			_	
		• •			f supporting organization				
а		_			upervised, or controlled				nivina
-		_ •• •		•	gularly appoint or elect a		_		
			_	omplete Part IV, Se		majority o	i inc direc	tora or tradecea or tire ac	pporting
				-	or controlled in connect	non with it	c cunnada	d organization(s), by hay	una.
b		• • •		•	anization vested in the sa				=
						ame persor	iis iiiai coi	itroi or manage the supp	Jorted
	г	 ,		complete Part IV,					.444
С					g organization operated				a with,
	v	_	_). You must complete i				
d	X	,,	-	•	orting organization oper			· · · · · · · · · · · · · · · · · · ·	
			=	-	ation generally must sat				veness
	-	_			nplete Part IV, Sections				
е	X	_ Check this bo	ox if the orga	nization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally in	ntegrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Ent	er the number of	supported or	rganizations					1
9				about the supporte		(iv) is the orga	mization lieted	((-3) A
		(i) Name of support	tea	(iı) EIN	(ui) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
		organization		<u></u>	above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
					j		•		
THE	PEW	CHARITABLE '	TRUSTS	56-2307147	7	Х			17,748,757.
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			į			<u></u>			
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Schedule A (Form 990 or 990-EZ) 2017 J. N. PEW JR. CHARITABLE TRUST

23-629930

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
Cale	ndar 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 grants.")						
2	Tax revenues levied for the organ-			·			
	ization's benefit and either paid to]	
	or expended on its behalf					/	
3	The value of services or facilities						
	furnished by a governmental unit to	ĺ					
	the organization without charge		-				
4	Total. Add lines 1 through 3				•		
5	The portion of total contributions		对数连基性		发 建金属铁	经过程	
	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,					THE RESERVE	
	column (f)				1/2-41/25		
6	Public support. Subtract line 5 from line 4	理學學學學	自然。2007年	自然是是"五"的	5年5月5年18	美型式程能等	
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on	ĺ			ľ		
	secunties loans, rents, royalties,						
	and income from similar sources			/			· · · ·
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain		/				
	or loss from the sale of capital	1					
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	建筑是		金子等等			
12	Gross receipts from related activities,	etc. (see instruction	ons) .			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	1 501(c)(3)	
C	organization, check this box and stor		contoco				
	ction C. Computation of Publi			-1 (0)		T., I	
	Public support percentage for 2017 (I	/		olumn (1))		14	%
	Public support percentage from 2016 33 1/3% support test - 2017. If the control is the control is the control is the control in the control is the control in the control is the control in the control is the control in the control is the control in the control is the control in the control is the control in the control in the control in the control is the control in the control i	/		a line 12 and line 1	14 in 22 1/20/	ore shock this box	%
16a	• •	· /			14 IS 33 1/3% OF IT	ore, check this box	k and
ı.	stop here. The organization qualifies	/	_		line 15 is 22 1/20/	or more chock the	. PL
U	33 1/3% support test - 2016. If the	/ -			IIIIe 13 IS 33 1/376	or more, check thi	▶ □
170	and stop here. The organization qual 10% -facts-and-circumstances test				13 16a or 16h a	nd line 14 is 1094	or more
ı/a	and if the organization meets the "fac						
	meets the "facts-and-circumstances"		•	•	•	it villow the organ	
	/	-				17a and line 15 is 1	10% or
O	10% -facts-and-circumstances test more, and if the organization meets the	-					
	organization meets the "facts-and-circ				-		· ▶ □
12	Private foundation. If the organization			•			
10	Theate louisdation, it the organization	an and mor check a	, 100 To 100	, 100, 17a, 01 17L		dule A /Form 990	

Schedule A (Form 990 or 990-EZ) 2017 J. N. PEW JR. CHARITABLE TRUST Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Se	ction A. Public Support	Cicit, predoc comp				-	
Cale	ndar 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	!			ſ		
	include any "unusual grants.")			<u> </u>			
2	Gross receipts from admissions,						
	merchandise sold or services per-	İ		1	Ì		
	formed, or facilities furnished in any activity that is related to the				ŀ		
	organization's tax-exempt purpose			<u> </u>	<u> </u>	/	
3	Gross receipts from activities that	1		1	/		
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-			}		}	
	ızatıon's benefit and either paid to				/		
	or expended on its behalf				/		
5	The value of services or facilities			}		1	
	furnished by a governmental unit to			/	4		
	the organization without charge				<u> </u>		
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and		-				
	3 received from disqualified persons				<u> </u>		
Ł	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 from line 6)		/			-7 , , ,	
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 20,14	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6				<u> </u>	<u></u>	
10a	Gross income from interest,		/			1	
	dividends, payments received on securities loans, rents, royalties,		/				
	and income from similar sources		/	ļ		<u></u>	
t	Unrelated business taxable income		V				
	(less section 511 taxes) from businesses	/					
	acquired after June 30, 1975					Į	
(Add lines 10a and 10b			<u> </u>			
11	Net income from unrelated business activities not included in line 10b.	/	İ		1		
	whether or not the business is				1	1	
	regularly carried on .						
12	Other income. Do not include gain or loss from the sale of capital	/					
	assets (Explain in Part VI.)	/					
13	Total support. (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>	L			
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thu	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiza	ation,
_	check this box and stop here						<u>▶</u>
	ction C. Computation of Publ					, , , , , , , , , , , , , , , , , , , 	
15	Public support percentage for 2017 (column (f))		15	%
16							%
	ction D. Computatión of Inves						
17	Investment income percentage for 26	017 (line 10c, colur	mn (f) divided by lii	ne 13, column (f))	•	17	%
18	Investment income percentage from	2016 Schedule A,	Part III, line 17	••		18	%
198	a 33 1/3% support tests - 2017. If the	organization did n	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qua	lifies as a publicly	supported organiz	ation	. ▶□
t	o 33 1/3% support tests - 2016. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is me	ore than 33 1/3%, a	ind
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	anızatıon qualifies	as a publicly supp	orted organization	▶□
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check to	his box and see in	structions	

Page 4

Part IV. Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation, if historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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
- 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)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes." provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.

	Yes	No_
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	dule A (Form 990 or 990-EZ) 2017 0. M. FEW UK. CHARTTABLE TROST		P	age 5
Pai	T IV Supporting Organizations (continued)			T .:
44	Has the organization accepted a gift or contribution from any of the following persons?	建筑	Yes	No
11	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			10年
a	below, the governing body of a supported organization?	11a		X
h	A family member of a person described in (a) above?	11b		х
	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		х
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		198	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		2.5% 2.7%	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			美艺
	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	3.45.2°		
	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			2
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		验	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1	挺	H.
	supervised, or controlled the supporting organization.	2	L	
Sec	tion C. Type II Supporting Organizations			·
		₹.2162.	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		1	(C. 1)
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			F)
	or management of the supporting organization was vested in the same persons that controlled or managed		23F.	27.4
Sec	the supported organization(s). tion D. All Type III Supporting Organizations		Ь	1
360	don B. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	38.2 4	35.0	23,4254
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	100	6.3	登
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		鄸	选单
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	X	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	\$17.P\$E		
	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		X
3	By reason of the relationship described in (2), did the organization's supported organizations have a	至		10 mg
	significant voice in the organization's investment policies and in directing the use of the organization's	770.2	灩	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	51.13	100	
	supported organizations played in this regard.		X	<u> </u>
Sec	tion 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 ins	tructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	y (see instructions,		т
2	Activities Test. Answer (a) and (b) below.	-12g47, -12c	Yes	No
а		重多	733	1
	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	7.55	Late C	16.27
	that these activities constituted substantially all of its activities.	2a	300	353
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	A STATE	湯影	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			競
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	1-4,57
3	activities but for the organization's involvement Parent of Supported Organizations. Answer (a) and (b) below.	100		7550
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	學是	變	
a	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a	32.55	-
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	7 (A) - A' 3 - A	14.37	1947
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1-1-m-m-4	to Addis in the
	A AND ASSESSMENT OF THE PROPERTY OF THE PROPER			

Sche	edule A (Form 990 or 990-EZ) 2017 J. N. PEW JR. CHARITABLE TRUST			23-6299309 Page 6
	rt V. Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			art VI) See instructions. A
	other Type III non-functionally integrated supporting organizations must co			,
				(B) Current Year
Sect	ion A - Adjusted Net Income		(A) Pnor Year	(optional)
1	Net short-term capital gain	1	635,858.	0.
2	Recoveries of prior-year distributions	2	0.	0.
3	Other gross income (see instructions)	3	5,852,351.	0.
4	Add lines 1 through 3	4	6,488,209.	0.
5	Depreciation and depletion	5	0,	0.
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	1		
	maintenance of property held for production of income (see instructions)	6	1,183,465.	0.
7	Other expenses (see instructions)	7	38,459.	0.
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	5,266,285.	0.
Sect	on B - Minimum Asset Amount	_	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	135	中心是一种种种种 化学点数	建设建设设施
•	instructions for short tax year or assets held for part of year)		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
		1a	56,462,008.	0.
	Average monthly value of securities Average monthly cash balances	1b	5,479,364.	0.
	Fair market value of other non-exempt-use assets	1c	268,023,949.	0.
		1d	329,965,321.	0.
	Total (add lines 1a, 1b, and 1c)	24.30	Carried Linear Co.	ALCUA VEL PREVIATOR
e	Discount claimed for blockage or other	0.		
	factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets	2	0	0.
3		3	329,965,321.	0.
4	Subtract line 2 from line 1d	 	325,305,322.	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	4,949,480.	٥.
5		5	325,015,841.	0.
6	Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035	6	11,375,554.	0.
7	Recoveries of prior-year distributions	7	0.	0.
8	Minimum Asset Amount (add line 7 to line 6)	8	11,375,554.	0.
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	计算是图像的图像	5,266,285.
2	Enter 85% of line 1	2	新江西京江西南京	4,476,342.
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	Bet PRINCE IN	11,375,554.
4	Enter greater of line 2 or line 3	4	THE THE PARTY OF THE	11,375,554.
5	Income tax imposed in prior year	5	可以是一个工作的。	85,163.

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

Schedule A (Form 990 or 990-EZ) 2017

11,290,391.

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

instructions).

Sche	dule A (Form 990 or 990-EZ) 2017 J. N. PEW JR. CHARI	23-6299309 Page 7		
	Type III Non-Functionally Integrated 509	a)(3) Supporting Orga	nizations (continued)	·
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		17,748,757.
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	<u> </u>		
4	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			17,748,757.
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI) See instructions.			17,748,757.
9	Distributable amount for 2017 from Section C, line 6			11,290,391.
10	Line 8 amount divided by line 9 amount			100%
Secti	on 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	新加州市市	はは、一般の一般を発展している。	11,290,391.
2	Underdistributions, if any, for years prior to 2017 (reason-	WASTERN TO THE REAL PROPERTY OF THE PERSON O		为了"全国"的" 对 "的
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017	建筑建筑建筑	語的。這種重點的知識	是是是是是
а	是"是一个"。在"全国的是"有一个"的"中心",在"中心"的"中心"。 第一个	定性認識過過數學	がは、一般には、一般には、一般には、一般には、一般には、一般には、一般には、一般に	建筑地位于西州地位
b_	From 2013	也是是10年1月17年	企业还是公司的	
С	From 2014			
d	From 2015	表語 电影话 的影響廳	海野多類調理機能	亚洲海河 岛以南江
e	From 2016 17,446,458.	海产于1000000000000000000000000000000000000	MAIN TERMINERS OF THE PARTY OF	
f	Total of lines 3a through e	17,446,458.	是是這種的	正是中国的1980年
g	Applied to underdistributions of prior years	是是自己的一种的		设置的基础设置
h	Applied to 2017 distributable amount	並完整是對望雪峰	管理主要特别。	11,290,391.
_ <u>i</u>	Carryover from 2012 not applied (see instructions)	克斯斯學術院為新科亞科科 克		
i_	Remainder, Subtract lines 3g, 3h, and 3i from 3f	6,156,067.		
4	Distributions for 2017 from Section D,			
	line 7: \$ 17,748,757.	the might the free of a distance having the contract of	A THE STATE OF THE	
a	Applied to underdistributions of prior years		The state of the s	
<u> </u>	Applied to 2017 distributable amount			will adjust to the property and the property
c	Remainder. Subtract lines 4a and 4b from 4.	17,748,757.		
5	Remaining underdistributions for years prior to 2017, if		L	
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.		And the second and th	4.72
6	Remaining underdistributions for 2017. Subtract lines 3h			•
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3	22 004 924		
	and 4c.	23,904,824.		Constitution of the constitution
8_	Breakdown of line 7	THE THE PERSON NAMED IN		
	Excess from 2013	PROVIETORIST CONTRACTOR AND AND AND AND AND AND AND AND AND AND	中では、10mmのでは、	本のでは、 本のでは、 では、 では、 では、 では、 では、 では、 では、
	Excess from 2014		是是1975年的中国的1975年的	The state of the s
	Excess from 2015 6 156 067	THE HISTORY STREET, ST	CHARLES WERE SELECTED	WHITE THE PROPERTY OF
	Excess from 2016 6,156,067.	The same of the sa	· · · · · · · · · · · · · · · · · · ·	では、 では、 では、 では、 では、 では、 では、 では、
<u> </u>	Excess from 2017 17,748,757.	医型型分型的工作的现在分词	国际企业的产品的企业的联系。根据自由	[二]

Ine 1; Part IV, Section A, lines 1, 2, 36, 36, 46, 46, 5a, 6, 9a, 96, 96, 11a, 116, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	
THE OFFICERS AND DIRECTORS OF GLENMEDE, AS THE TRUSTEE OF EACH TRUST,	
AND THE OFFICERS AND DIRECTORS OF PEW, AS THE BENEFICIARY OF EACH	
TRUST, MAINTAIN A CLOSE AND CONTINUOUS WORKING RELATIONSHIP. AS	
EVIDENCE OF THIS RELATIONSHIP, THE PRESIDENTS AND GENERAL COUNSELS OF	
EACH ORGANIZATION HAVE REGULAR MEETINGS AND OTHER COMMUNICATIONS TO	
SHARE CONCERNS, PROVIDE FEEDBACK AND PERSPECTIVE AND TO SEEK WAYS FOR	
INSTITUTIONAL COLLABORATION. IN ADDITION, THE DIRECTOR FOR INVESTMENTS	
OF THE PEW TRUSTS AND MANAGING DIRECTOR OF GLENMEDE (MANAGING DIRECTOR)	
ATTENDS QUARTERLY MEETINGS OF PEW'S FINANCE COMMITTEE, WHICH PEW'S	
SENIOR VICE PRESIDENT FOR FINANCE AND TREASURER (FINANCE SVP) ALSO	
ATTENDS. AT SUCH QUARTERLY MEETINGS, THE MANAGING DIRECTOR PRESENTS TO	
THE FINANCE COMMITTEE A REVIEW OF THE PERFORMANCE OF THE TRUSTS BASED	
ON MATERIALS PREVIOUSLY DISTRIBUTED TO THE COMMITTEE MEMBERS AND	
RESPONDS TO QUESTIONS AND REQUESTS FOR ADDITIONAL INFORMATION FROM SUCH	
MEMBERS AND THE FINANCE SVP. IN ADDITION TO THE FOREGOING, PEW'S	
SENIOR DIRECTOR OF FINANCE, INVESTMENTS, TREASURY OPTIONS AND CONTRACTS	
ADMINISTRATION AND THE MANAGING DIRECTOR ALSO DISCUSS PERIODICALLY THE	
PERFORMANCE OF THE TRUSTS' INVESTMENTS AND HAVE ONGOING CONVERSATIONS	
REGARDING THE TRUSTS' ANNUAL DISTRIBUTIONS TO PEW AND HOW THEY ARE	
CALCULATED.	
THE OFFICERS AND DIRECTORS OF PEW HAVE A SIGNIFICANT VOICE IN THE	
REVIEW OF INVESTMENT POLICIES OF THE TRUSTS, THE TIMING AND MANNER OF	
MAKING GRANTS, AND IN OTHERWISE DIRECTING THE USE OF THE INCOME OR	
ASSETS OF THE TRUSTS AS CONTEMPLATED BY TREASURY REGULATION	
1.509(A)-4(I)(3). IN FURTHERANCE OF THIS OBJECTIVE, PEW MAY	<u></u>
COMMUNICATE ANY PARTICULAR NEED OR CONCERN IT HAS REGARDING THESE	· ·

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

2017
Open to Public Inspection

Name of the organization

J. N. PEW JR. CHARITABLE TRUST

Employer identification number 23-6299309

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Im-	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	- ·	used only
_	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	•	Yes No
Par		ganization answered "Yes" on Form 990,	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	ifter 7/25/06, and not on a historic structu	ıre
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rela	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	. Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170	(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes . No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		•
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	blic 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	•	
2	If the organization received or held works of art, historical treatments		ıl gaın, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$`
b	Assets included in Form 990, Part X		▶ \$

Sche	dule D (Form 990) 2017 J. N. PEW J	R. CHARITABLE T	RUST			23-6299	9309	Page 2
Păř		ollections of Art	, Historical Tre	easures, or Othe	er Simila	r Assets	/continu	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a s	significant i	use of its co	ollection it	ems
	(check all that apply)							
а	Public exhibition	d	Loan or exc	change programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how they further t	he organization's exe	empt purpo	ose in Part)	KIII.	
5	During the year, did the organization solicit of	r receive donations o	f art, historical trea	sures, or other simila	ar assets			
	to be sold to raise funds rather than to be ma						Yes	□ No
Par	TIV Escrow and Custodial Arrang	gements. Comple	te if the organization	on answered "Yes" o	n Form 99	0, Part IV, I	ne 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contribution	s or other assets no	t included		_	
	on Form 990, Part X?						Yes	No No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table [.]					
						<u> </u>	Amount	
c	Beginning balance .				1c	<u> </u>		
d	Additions during the year				1d	<u> </u>		
е	Distributions during the year				<u>1e</u>	<u> </u>		
f	Ending balance				1f	<u>l.,</u>		
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or c	ustodial account liab	ulity?		Yes	No
_	If "Yes," explain the arrangement in Part XIII.							Ш
Par	t V - Endowment Funds. Complete	f the organization an	swered "Yes" on Fo	orm 990, Part IV, line	10.			
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three	years back	_(e) Four y	ears back
1a	Beginning of year balance		 		<u> </u>			
b	Contributions			<u> </u>	 			
C	Net investment earnings, gains, and losses				 			
d	Grants or scholarships			 	 			
е	Other expenditures for facilities			Ì	1			
	and programs				 			
f	Administrative expenses .			 	 			
g	End of year balance			<u></u>				
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment >	%						
c	Temporarily restricted endowment	%						
	The percentages on lines 2a, 2b, and 2c show							
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	nd administered for	the organiz	zation	_	
	by:						_ \ Y	es No
	(i) unrelated organizations						3a(i)	\longrightarrow
	(ii) related organizations						3a(ii)	
þ	If "Yes" on line 3a(ii), are the related organization				•		3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answere	- T				. 1		
	Description of property	(a) Cost or o	1	1 '	Accumulat		(d) Book	value
		basis (investr	nent) basis		lepreciation			
	Land				₹ <u>#₹**</u> 07			
	Buildings .							
	Leasehold improvements							
	Equipment							
	Other							
Total	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990 Part	Y column (R) line	10c)				0.

Schedule D (Form 990) 2017 J. N. PEW JR. CHI	ARITABLE TRUST			23-6299309	_Page \$
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11b. See Form 990), Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value			end-of-year market va	alue
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) PARTNERSHIP INVESTMENTS	256,997,124.	ADJUSTED CO	OST		
(B)					
(C)		†			
(D)		i			
(E)	,				
(F)				 	_
(G)					
(H)				-	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	256,997,124.	A LEGISLAND STATE OF THE STATE	医卵巢系统系统	(主教室》) "美罗斯	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
Part VIII Investments - Program Related.		Total And bearing street	W. 1621 E3C 11 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	American Marie Character	
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c. See Form 990	Part Y line 13		
(a) Description of investment	(b) Book value			end-of-year market va	alue
(1)	(2)				
(2)					
(3)					
(4)					
(5)		 			
			 		
<u>(6)</u> (7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		CHAPTER TO THE CHAPTER	TO THE THE WOLLD'S TO THE	L. W. L. Miller William Co.	
Part IX Other Assets.	<u> </u>	The state of the s	Landing Section and Supergrave and Personal Section 197	CONTRACTOR OF THE PROPERTY OF	Carrie, are
Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990) Part X line 15		
	Description .	110.00010	, 1 4.17, 1110 10.	(b) Book va	lue
(1)				(-,	
(2)					
(3)					
(4)					
(5)		·			
(6)	· · · · · · · · · · · · · · · · · · ·				*
(8)					
(9)				<u> </u>	
	- 1E \		1		
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X: Other Liabilities.		· · · · · · · · · · · · · · · · · · ·			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		rm 990, Part X, line	25.	
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(A)	. I .				

Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)

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

(5) (6) (7) (8) (9)

Pärt XI: Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recovenes of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part IV, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part I, line 18.) Ford XIII Supplemental Information.	
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2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses and losses per audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments C Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b 4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II, line 18.) Fairt XIII Supplemental Information.	
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c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.) 5 Part XIII Supplemental Information. rovide 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 X, line 2, Part X, line 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 X, line 2, Part X, line 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 X, line 2, Part X, line 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 X, line 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 X, line 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 X, line 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 X, line 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 X, line 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 X, line 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 3, and	
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Part XIII Supplemental Information. 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 III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1b and 2b; Part V, line 4; Part X, line 2b and 2b; Part V, lines 1b and 2b; Part V, line 4; Part X, line 2b and 2b; Part V, line 4b and 2b; Part V, line	
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 III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1b and 2b; Part V, line 4; Part X, line 2, Part III, lines 1b and 2b; Part V, line 4; Part X, line 2b; Part III, lines 1b and 2b; Part III,	
	·
<u> </u>	

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public inspection :

Name of the organization **Employer identification number** 23-6299309 J. N. PEW JR. CHARITABLE TRUST Párt 13 | General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, Yes

the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed) (c) Number of (e) If activity listed in (d) (b) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and independent expénditures offices (by type) (such as, fundraising, prois a program service, for and gram services, investments, grants to in the region describe specific type investments contractors recipients located in the region) of service(s) in the region in the region in the region SEE ATTACHED

٥. 3 a Sub-total b Total from continuation 0 0. sheets to Part I c Totals (add lines 3a 0. and 3b) Schedule F (Form 990) 2017

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

Schedule F (Form 990) 2017

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance (g) Amount of noncash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt cash disbursement (f) Manner of of cash grant (e) Amount by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of grant (c) Region and EIN (if applicable) (b) IRS code section (a) Name of organization

Schedule F (Form 990) 2017

Enter total number of other organizations or entities

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23-6299309

J. N. PEW JR. CHARITABLE TRUST

Part III. Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Schedule F (Form 990) 2017

Schedule F (Form 990) 2017 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (c) Number of recipients cash grant Part III can be duplicated if additional space is needed (b) Region (a) Type of grant or assistance

Sched	ule F (Form 990) 2017 J. N. PEW JR. CHARITABLE TRUST	23-6299309	Page 4
Part	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)	X 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, don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	X 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)	X 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, don't file with Form 990)	Yes	X No

Schedule F	(Form 990) 2017 J. N. PEW JR. CHARITABLE TRUST	23-6299309	Page 5
Part V	Supplemental Information		
كتنت	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounts	no method amounts of	
	investments vs. expenditures per region); Part II, line 1 (accounting method), Part III (accounting method		
	(estimated number of recipients), as applicable. Also complete this part to provide any additional inform	ation. See instructions.	
			
		<u> </u>	
			
		- <u></u> -	
			
			
			
			
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SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

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20	Open to F

OMB No 1545-0047

å [Schedule I (Form 990) (2017) TO PROVIDE SUPPORT TO THE **Employer identification number** PEW CHARITABLE TRUSTS (h) Purpose of grant 23-6299309 or assistance x Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) ó (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of 17,748,757 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) For Paperwork Reduction Act Notice, see the Instructions for Form 990. 56-2307147 501(C)(3), 509(A)(1) Enter total number of other organizations listed in the line 1 table J. N. PEW JR. CHARITABLE TRUST ? Part II. General Information on Grants and Assistance (p) criteria used to award the grants or assistance? ONE COMMERCE SQUARE, 2500 MARKET ST 1 (a) Name and address of organization PHILADELPHIA, PA 19103-7077 THE PEW CHARITABLE TRUSTS or government Name of the organization . Part II

Page 2		Se Ce]		i			-				(2017)
23-6299309 P		(f) Description of noncash assistance										Schedule I (Form 990) (2017)
	90, Part IV, line 22.	(e) Method of valuation (book, FMV, appraisal, other)					ditional information					
	ared "Yes" on Form 9	(d) Amount of non- cash assistance					(b), and any other ad	ļ			!	
	organization answe	(c) Amount of cash grant					e 2, Part III, column					
LE TRUST	. Complete if the	(b) Number of recipients					ured in Part I, lin		TRUSTS.			
Schedule I (Form 990) (2017) J. N. PEW JR. CHARITABLE	Part III: Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance				•	* Part IV. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	PART I, LINE 2:	THE ENTITY EXCLUSIVELY SUPPORTS THE PEW CHARITABLE			732102 11-01-17

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-E2.

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

2017
Open to Public
Inspection

Name of the organization Employer identification number 23-6299309 J. N. PEW JR. CHARITABLE TRUST FORM 990, PART I, LINE 1. DESCRIPTION OF ORGANIZATION MISSION: THE ORGANIZATION PROVIDES SUBSTANTIAL SUPPORT TO THE PEW CHARITABLE TRUSTS, A PUBLIC CHARITY DESCRIBED IN INTERNAL REVENUE CODE SECTIONS 501(C)(3) AND 170(B)(1)(A)(VI), WHICH CONDUCTS AND FUNDS PROGRAMS DESIGNED TO IMPROVE PUBLIC POLICY, MAINTAIN PUBLIC AWARENESS OF SIGNIFICANT ISSUES AND TRENDS AND INVIGORATE CIVIC LIFE. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE ORGANIZATION PROVIDES SUBSTANTIAL SUPPORT TO THE PEW CHARITABLE TRUSTS. A PUBLIC CHARITY DESCRIBED IN INTERNAL REVENUE CODE SECTIONS 501(C)(3) AND 170(B)(1)(A)(VI), WHICH CONDUCTS AND FUNDS PROGRAMS DESIGNED TO IMPROVE PUBLIC POLICY, MAINTAIN PUBLIC AWARENESS OF SIGNIFICANT ISSUES AND TRENDS AND INVIGORATE CIVIC LIFE. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: THE ORGANIZATION PROVIDES SUBSTANTIAL SUPPORT TO THE PEW CHARITABLE TRUSTS, A PUBLIC CHARITY DESCRIBED IN INTERNAL REVENUE CODE SECTIONS 501(C)(3) AND 170(B)(1)(A)(VI), WHICH CONDUCTS AND FUNDS PROGRAMS DESIGNED TO IMPROVE PUBLIC POLICY, MAINTAIN PUBLIC AWARENESS OF SIGNIFICANT ISSUES AND TRENDS AND INVIGORATE CIVIC LIFE. FORM 990, PART VI SECTION B, LINE 11B: THE GLENMEDE TRUST COMPANY, N.A. IS SOLE TRUSTEE. THE FORM 990 IS PREPARED IN DETAIL BY AN OUTSIDE ACCOUNTING FIRM. ONCE IN FINAL FORMAT, THE FORM 990 IS PROVIDED TO AN OFFICER OF THE TRUST COMPANY WHO REVIEWS AND SIGNS THE RETURN BEFORE FILING WITH THE INTERNAL REVENUE SERVICE.

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization J. N. PEW JR. CHARITABLE TRUST	Employer identification number 23-6299309
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ENTITY'S CONFLICT-OF-INTEREST POLICY IS MONITORED BY TRUSTEE'S	
COMPLIANCE DEPARTMENT.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE SUPPORTED CHARITY HAS RECEIVED A FULL COPY OF THE ENTITY'S GOVERNING	
DOCUMENTS. THE DOCUMENTS ARE ALSO AVAILABLE UPON REASONABLE REQUEST.	
	
	

SCHEDULE R (Form 990)

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

2017

OMB No 1545-0047

▶ Attach to Form 990.

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

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

CHARITABLE TRUST

J. N. PEW JR.

Name of the organization

Department of the Treasury Internal Revenue Service

Open to Public Employer Identification number

23-6299309

(g) Section 512(b)(13) å × controlled entity? Direct controlling Yes × entity Identification of Related Tax-Exempt Organizations. Complete of the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. HARITABLE TRUSTS HARITABLE TRUSTS HARITABLE TRUSTS Direct controlling entity THE PEW THE PEW THE PEW End-of-year assets XX <u>e</u> Public charity status (if section 501(c)(3)) INE 12D, INE 12D, INE 12D, INE 7 0-11 0-111 0-11 Total income Exempt Code Œ section 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 3 Legal domicile (state or Legal domicile (state or foreign country) foreign country) PENNSYLVANIA PENNSYLVANIA PENNSYLVANIA PENNSYLVANIA SUPPORTING ORGANIZATION CONDUCT AND FUND PUBLIC SUPPORTING ORGANIZATION SUPPORTING ORGANIZATION Primary activity Primary activity PROGRAMS C/O THE GLENMEDE TRUST COMPANY, 1650 MARKET C/O THE GLENMEDE TRUST COMPANY, 1650 MARKET 1650 MARKET COMMERCE SQUARE, 2005 MARKET STREET THE PEW CHARITABLE TRUSTS - 56-2307147 Name, address, and EIN (if applicable) THE PEW MEMORIAL TRUST - 23-6234669 MABEL PEW MYRIN TRUST - 23-6234666 Name, address, and EIN of related organization C/O THE GLENMEDE TRUST COMPANY, of disregarded entity THE MEDICAL TRUST - 23-2131641 PHILADELPHIA, PA 19103 PHILADELPHIA, PA 19103 PHILADELPHIA, PA 19103 PHILADELPHIA, PA 19103 Part II

Schedule R (Form 990) 2017

J. N. PEW JR. CHARITABLE TRUST

23-6299309

Continuation of Identification of Related Tax-Exempt Organizations

Part II

Schedule R (Form 990)

(g) Section 512(b)(13) controlled organization? å Yes × × × CHARITABLE TRUSTS THE PEW CHARITABLE TRUSTS THE PEW CHARITABLE TRUSTS Direct controlling THE PEW Public charity status (if section 501(c)(3)) LINE 12D, LINE 12D, INE 12D, 0-III hii-o III-0 Exempt Code section 501(C)(3) 501(C)(3) 501(C)(3) 9 Legal domicile (state or foreign country) PENNSYLVANIA PENNSYLVANIA PENNSYLVANIA SUPPORTING ORGANIZATION SUPPORTING ORGANIZATION SUPPORTING ORGANIZATION Primary activity KNOLLBROOK TRUST - 23-6407577 C/O THE GLENMEDE TRUST COMPANY, 1650 MARKET PHILADELPHIA, PA 19103

J. HOWARD PEW FREEDOM TRUST - 23-6234671

C/O THE GLENMEDE TRUST COMPANY, 1650 MARKET PHILADELPHIA, PA 19103

MARY ANDERSON TRUST - 23-6234670

C/O THE GLENMEDE TRUST COMPANY, 1650 MARKET Name, address, and EIN of related organization PHILADELPHIA, PA 19103 Page 2

23-6299309

Schedule R (Form 990) 2017 J. N. PEW JR, CHARITABLE TRUST

23-6299309
Line Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

Committee organizations treated as a partnership during the tax year.	rinership during the ta	x year.										
(a)	(q)	(၁)	(p)	<u>.</u>	(e)	(£)	(6)	3	3	<u> </u>		(K
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity		Predominant income SI (related, unrelated, excluded from tax under)	Share of total income	Share of end-of-year	Disproportionate allocations?	amount in box 20 of Schedule		al or Per	General or Percentage managing ownership
		country)		sections	512-514)			Yes No	\neg	065) Yes No	2	
GLENMEDE TRUST CO., N.A 51-0412836, 1201 NORTH MARKET ST. SUITE 1501 MILMINGTON,	INVESTMENT	DE	N/A	N/A	V.	N/A	N/A	N/A	N/A	N/N		N/A
STRATEGIC OPPORTUNITIES - C/O THE GLENMEDE TRUST N.A 45-1137, 1201 H MARKET ST., SUITE 1501,	INVESTMENT	DE	N/A	N/A	A.	N/A	N/A	N/A	N/A	N/A		N/A
Part IV Identification of Related Organizations Taxable as a Corporation of Apart IV Organizations treated as a corporation or trust during the tax year.	ganizations Taxable a	as a Corpo	ration or Trust.	omplete if th	e organization	answered "Yes	on Form 990, F	art IV, line	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	nad one or	more r	elated
(a) Name, address, and EIN of related organization	<u> </u>	P Ein	(b) Primary activity	(c) Legal domicite (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		Section 512(b)(13) controlled entity?

732162 09-14-17

Schedule R (Form 990) 2017

23-6299309

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more rel	ated organizations listed ir		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	×
b Gift, grant, or capital contribution to related organization(s)			1p	×
c Gift, grant, or capital contribution from related organization(s)			10	×
d Loans or loan guarantees to or for related organization(s)			14	×
 Loans or loan guarantees by related organization(s) 			9	×
			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
f Dividends from related organization(s)				×
g Sale of assets to related organization(s)			5-	×
h Purchase of assets from related organization(s)			#	×
i Exchange of assets with related organization(s)			;	×
j Lease of facilities, equipment, or other assets to related organization(s)			<u>:</u>	×
k Lease of facilities, equipment, or other assets from related organization(s)			*	· ·
I Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)		1	×
m Performance of services or membership or fundralsing solicitations by related organization(s)	nization(s)		1m	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)		- 1u	×
 Sharing of paid employees with related organization(s) 			10	×
			***************************************	a sign
p Reimbursement paid to related organization(s) for expenses			dl d	×
q Reimbursement paid by related organization(s) for expenses			19	×
				7 7 7
 Other transfer of cash or property to related organization(s) 			1	× ;
اء.			18	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ho must complete thi	s line, including covered re	elationships and transaction thresholds.	
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	
(1) PCT PARTNERS, LLC	Ф	22,199,835.	FMV - CASH	
ADDITIONAL TRANSACTIONS INVOLVED GIFT TO A SUPPORTED (9) ORGANIZATION.				
[4]				
(5)				
732163 09-11-17			Schedule R (Form 990) 2017	n 990) 2017

Schedule R (Form 990) 2017 J. N. PEW JR. CHARITABLE TRUST

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.

tage							2017
(k) Percent				_			7 (066 u
(J) eneral or nanaging partner? es No							Rorn
Code V-UBI General or Percentage amount in box 20 managing of Schedule K-1 partner? (Form 1065) Yes No							Schedule R (Form 990) 2017
Code amount of Sche (Forn							υ,
(h) Disproportionale allocations?							
(g) Share of end-of-year assets							
(f) Share of total income							
Are all Are all Sol(c)(3) (er Ves No							
(d) Predominant income (related, unrelated, excluded from tax undersections 512-514)							
(c) Legal domicile (state or foreign country)							
(b) Primary activity							
(a) Name, address, and EIN of entity							

Schedule R (Form 990) 2017 PEW SR. CHARITABLE TRUST	23-6299309	<u> Page 5</u>
Part VII Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.		
PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:		
		-
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:		
PCT PARTNERS, LLC - C/O THE GLENMEDE TRUST CO., N.A.		
EIN: 51-0412836		
1201 NORTH MARKET ST., SUITE 1501		
WILMINGTON, DE 19801-1163		
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:		
PCT STRATEGIC OPPORTUNITIES LLC - C/O THE GLENMEDE TRUST		
CO., N.A.		
EIN: 45-1137819		
1201 NORTH MARKET ST., SUITE 1501		
WILMINGTON, DE 19801-1163		
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