

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	2017 calendar year, or tax year beginning	, 2017	, and ending		, 20
B ~		C Name of organization			D Employer Identifica	ation number
	heck if ap	JONES DAY FOUNDATION			34-157045	5
<u></u>	Addres change					
L	Name	hange Number and street (or P O box if mail is not deliver	ed to street address)	Room/suite	E Telephone number	
	Instral r	etun 901 LAKESIDE AVENUE			(216) 586-7	7028
L	Final re termina		foreign postal code			
	Amend	CLEVELAND, OH 44114			G Gross receipts \$	19,870.
	Applica	F Name and address of principal officer LIZ.	ANNE THOMAS		H(a) is this a group retu subordinates?	irn for Yes X No
	_	1420 PEACHTREE ST. NE # 800) ATLANTA, GA 303	309	H(b) Are all subordinates i	ncluded? Yes No
ī	Tax-exe	mpt status X 501(c)(3) 501(c) () ◀	(insert no) 4947(a)(1)	or \$ 527	If "No," attach a	list (see instructions)
J	Websit	N/A			H(c) Group exemption n	umber 🕨
ĸ	Form o	organization X Corporation Trust Association	on Other ►	L Year of forma	tion 1987 M State	of legal domicile OH
Pa	art i	Summary				
		Briefly describe the organization's mission or most significant	onificant activities TO MA	KE CONTRIBUT	TIONS TO SELE	CTED
بو		CHARITABLE ORGANIZATIONS.				
anc	•					
ern	2	Check this box If the organization discontinu	ed its operations or dispos	ed of more than 25%	6 of its net assets	
8	1	Number of voting members of the governing body (Pa	•		1 1	12.
જ	I	Number of independent voting members of the government of the gove		•		12.
Activities & Governance	l .	Total number of individuals employed in calendar year				0.
Ξ	l	Fotal number of volunteers (estimate if necessary)	• • • • • • •			18.
Act						0.
_		Fotal unrelated business revenue from Part VIII, colum	, ,		1	
	- "	Net unrelated business taxable income from Form 990	J-1, IIIne 34	 	Prior Year	Current Year
		Contributions and marks (Dod VIII) has 460		 	15,031,000.	1,652.
ge		Contributions and grants (Part VIII, line 1h)			0.	0.
Revenue	1	Program service revenue (Part VIII, line 2g)			24,078.	18,218.
å	i	nvestment income (Part VIII, column (A), lines 3, 4, a		• • • • • • • • -	• 0.	10,210.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9		∄・・・・・	15,055,078.	19,870.
		Total revenue - add lines 8 through 11 (must equal F				
	1	Grants and similar amounts paid (Part IX, column (A),	192		4,218,785.	4,588,723.
	14	Benefits paid to or for members (Part IX, colum∰A), I Salaries, other compensation, employee benefi∰ Par	7919 O D 2018 · · S	- · · · ·	0.1	0.
es	15	1 —1	ILX.	<u> </u>	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), 니in	n n n n n n n n n n n n n n n n n	<u> </u>	0.	0.
Ϋ́	b	Total fundraising expenses (Part IX, column (D), line 2	os <u>uen, ui</u>	<u> </u>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 1	1f-24e)		962.	1,283.
	18	Total expenses Add lines 13-17 (must equal Part IX,	column (A), line 25)		4,219,747.	4,590,006.
	19	Revenue less expenses Subtract line 18 from line 12	<u></u>		10,835,331.	-4,570,136.
s or				Begi	nning of Current Year	End of Year
Assets Baland	20	Total assets (Part X, line 16)			15,463,149.	10,893,013.
t As	24	Total liabilities (Part X, line 26)	. <i></i>		0.	0.
Fund	22	Net assets or fund balances Subtract line 21 from lin	e 20	<u> </u>	15,463,149.	10,893,013.
Pa	rt II	Signature Block				
Uni	der pen	alties of perjury, I declare that I have examined this return,	including accompanying sched	dules and statements,	and to the best of my	knowledge and belief, it is
true	s, correc	tt, and complete Declaration of preparer (other than officer) i	based on all information of Wr	non preparer has any i	i	4 43
٥.	}	raul a Thate				1-18
Sig		Signature of officer			Date	
He	re	PAUL A. GRATER	TREASU	JRER		
_	}	Type or print name and title				
_		Print/Type preparer's name Prepare	r's signature	Date	Check If	PTIN
Paid	1				self-employed	
	parer	Firm's name		···	Firm's EIN ▶	·····
use	Only	Firm's address			Phone no	
Ma	y the I	RS discuss this return with the preparer shown	above? (see instructions	s)		. Yes X No
	<u> </u>	work Reduction Act Notice, see the consects instru		<u> </u>	 	50m QQA (2017)

JSA 7E1010 1 000 76331G 703K 7/9/2018

9:42:19 AM V 17-5.2F

Form 990 (2017)	Page 2
Part III Statement of Program Service Accomplishments	D
Check if Schedule O contains a response or note to any line in the Briefly describe the organization's mission	ıs Part III
ATTACHMENT 1	
Did the organization undertake any significant program services during t	he year which were not listed on the
prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O	
Did the organization cease conducting, or make significant changes	s in how it conducts, any program
services?	Tes A No
Describe the organization's program service accomplishments for eac expenses. Section 501(c)(3) and 501(c)(4) organizations are required the total expenses, and revenue, if any, for each program service reported	o report the amount of grants and allocations to others
a (Code) (Expenses \$ 600,000 including grants of \$	600,000) (Revenue \$
WE CONTRIBUTED TO THE CLEVELAND CLINIC FOUNDATION	
NEW BUILDING FOR CLEVELAND CLINIC CHILDREN'S.	
	100000000000000000000000000000000000000
b (Code) (Expenses \$ 358,700 including grants of \$ WE CONTRIBUTED TO HOPE FOR A HEALTHIER HUMANITY TO	
TO IDENTIFY AND ADDRESS THE ROOT CAUSES FOR MIGRAT	
AND TO HELP IMPROVE THE NUTRITION PRACTICES OF WOM	
CHILDREN IN EL SALVADOR.	
c (Code) (Expenses \$ 340,000 including grants of \$	240,000)/Povonuo C
WE CONTRIBUTED TO THE NATIONAL PARTNERSHIP FOR NEW	
ASSIST IMMIGRANTS IN APPLYING FOR U.S. CITIZENSHIP	
INTO AMERICAN SOCIETY.	
	1
d Other program services (Describe in Schedule O)	
	evenue \$
e Total program service expenses ► 4,588,723.	,

Form **990** (2017) PAGE 2



Part	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)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
_	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I,	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
Ū	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	_		
9	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
4.4	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
11	· · · · · · · · · · · · · · · · · · ·			
	VII, VIII, IX, or X as applicable		-	-
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	11a		X
	complete Schedule D, Part VI	114		
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11ь		Х
_	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	115	\vdash	
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ف.	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
a		114		X
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11e		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	116		
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f		X
4.0	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X	 		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		X
	Schedule D, Parts XI and XII	120		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	426	Ì	X
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	\vdash	X
	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	445	X	1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	_^	+
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5	X	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u>├</u> ^	-
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	46		Х
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	+^
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			X
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	┼	+^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	\vdash	1-A
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40	1	X
	If "Yes," complete Schedule G, Part III		1000	(2017

		00 (2017) Chacklist of Demined Cabadulae (continued)	-		Page 4
20 di the organization operate one or more hospital facetises? If "Yes," complete Schedule H. 20 bi If "Yes" to line 20s, did the organization attach a copy of its audited financial statements to this return?	rart	Checklist of Required Schedules (continued)	— ₁	Yes	No
b If "Yes" to line 20a, did the organization ratech a copy of its audited financial statements to this return", 20b 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 1º If "Yes," complete Schedule I, Parts I and III. 21 X Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III. 22 D Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of horganizations current and former officers, directors, trustees, key employees, and highest compensated 2 memployees? If "Yes," complete Schedule I. 24 D Did the organization and and former officers, directors, trustees, key employees, and highest compensated 2 through 24d and complete Schedule IV. 24 and complete Schedule IV. 24 and through 24d and complete Schedule IV. 25 and 2	20 a	Did the organization operate one or more hospital facilities? If "Yes " complete Schedule H	20a		X
21 Did the organization report more than \$5,000 of grants or other assistance to any demestic organization or domestic government on Part IX, column (A), line 1? If Yes," complete Schedule I, Parts I and III. 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. 23 Did the organization asswer Yes* to Part VIII. Section A, line 3, 4, or 5 about compensation of the organization asswer Yes* to Part VIII. Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 3, 1, 2002? If Yes," answer lines 24b through 24d and complete Schedule K If Yio," go to line 25a. 24a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year of the organization with a disqualified person during the year? If Yes," complete Schedule I, Part I. 26c Did the organization as an 5010(12) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes," complete Schedule I, Part I II. 27b Did the organization aware that it engaged in an excess benefit transaction with a disqualified person of unity the year organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contribution or employee thereof; a grant selection committee member, or to a 35% controlled entity or flampiny member of any of these persons? If Yes, complete Schedule I, Part IV. 27c Did the organization provide a grant or other assistance to an officer, director, trustee, key employees or disqualified persons? If Yes, complete Schedule I, Part IV. 28c Did the organization and party to		• • • • • • • • • • • • • • • • • • • •			
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 If Yes, "complete Schedule I, Parts I and III. 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization has were referred to the complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24 librough 24d and complete Schedule K If "No," go to line 25a. 24b 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 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. 25c Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II. 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II. 25b It the organization as that it engaged in an excess benefit transaction with a disqualified person and any of the organization promises of the second of the complete schedule L, Part II. 25c Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, inghest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV. 26b A family member of any of these persons? If "Yes," complete Schedule L, Part IV. 27c Did the organization aparty to a business transaction with one of the following parties (see Schedule L Part IV. 28d Vas the organization aparty to a business transaction with one of the following parties (see Schedule L Part IV		Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		X	
Did the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organizations current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," ensure through 24a and complete Schedule K If "No," go to line 259. 25a Did the organization minimal an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 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! "Yes," complete Schedule L, Part I. 25b Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year! "Yes," complete Schedule L, Part I. 25b Did 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 organizations prior Forms 990 or 990-E72 If "Yes," complete Schedule L, Part I. 27c 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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or farmly member of any of these persons? If "Yes," complete Schedule L, Part IV. 27c Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV. 28d Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV. 28d Vas the organization and party to a business transaction with one of the following parties (see Schedule L, Part IV. 29d Did the organization re	22	$ \hbox{ Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on } \\$			J
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," assiver lines 246 through 24d and complete Schedule K. "Yos," or to line 259. 24 Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 25 Dd the organization amainan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?. 26 Dd the organization amainan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?. 26 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 27 Dd the organization are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I is the organization in exemption of the organization in the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule I, Part II. 28 Dd the organization provide a grant or other assistance to an officer, director, trustee, key employees, usualized persons of the "Yes," complete Schedule I, Part III. 29 Dd the organization are party to a business transaction with one of the following prates (see Schedule I, Part III). 29 Dd the organization are provided as a party to a business transaction with one of the following prates (see Schedule I, Part III). 29 Dd the organization are current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV. 29 Dd the organization are current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key e	23	·	22		Х
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 5100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a. b Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception?. c Did the organization aminatian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. 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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II. 25b 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," complete Schedule L, Part III. 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, esubstantial 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 IV. 28 Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV. 29 Did the organization feecing the schedule former officer, director, trustee, or key employee? If "Yes," complete Schedule R. 29 Did the o		organization's current and former officers, directors, trustees, key employees, and highest compensated			x
through 24d and complete Schedule K. If "No." go to line 25a. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 5a Section 501(c)(13), 501(c)(14), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person unduring the year? 15a Section 501(c)(13), 501(c)(14), and 501(c)(29) organizations. Did the organization expert and that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if" "res," complete Schedule L, Part II. 25b Is 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, bighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III. 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. 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV. 28 A current or former officer director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28 A current or former officer director, trustee, or key employee? If "Yes," complete Schedule M. 29 Did the organization receive more than 325,000 in non-cash contributions? If "Yes," complete Schedule N, Part IV. 30 Did the organization engage in any transaction with a conservation contributions? If "Yes," compl	24 a		23		<u> </u>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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)(13), and 501(c)(12) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," "complete Schedule L, Part I			240		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d 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 any any of the year? If "Yes," complete Schedule L, Part I. 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 organizations prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II. 25 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," complete Schedule L, Part III. 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 IV. 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV. 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 31 Did the organization one one of the complete Schedule R. Part II. 32 Did the organization one one of the complete Schedule R. 33 Did the organization one one of th	h	•	-		<u> </u>
to defease any tax-exempt bonds?			240		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	·		240		
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 of unity they ear? If "Yes," complete Schedule L, Part I. 25a 15 bis the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b 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," complete Schedule L, Part II. 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. 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) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28a 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, and part I. If Yes," complete Schedule M, Part I. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part II. 31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, and Part I, Iii, And Part I, Iiii A the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organizatio	d				
b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I. 25b					
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // 1"Yes," complete Schedule L. Part II			25a		Х
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	b				
25b 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," complete Schedule L, Part II. 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 IV. 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) 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 20 An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 21 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 22 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 22 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I. 23 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. 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I. 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable rel					
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," complete Schedule L, Part II			25b		X
disqualified persons? If "Yes," 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	26				
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 IV. 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) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28b		current or former officers, directors, trustees, key employees, highest compensated employees, or	i	1	
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		disqualified persons? If "Yes," complete Schedule L, Part II	26		X
entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV instructions for applicable filling thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. c 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 key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family me		· ·			
Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. c 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 undirect owner? If "Yes," complete Schedule L, Part IV. 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 30 1 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I. 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.			20-		X
Schedule L, Part IV. c 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. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 31 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. 32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 34 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O			20a	ļ	 ``
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	O		28h		Х
was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	•	·			
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	·				X
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29	·			X
conservation contributions? If "Yes," complete Schedule M			-		
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	••		30		Х
Part I	31				
complete Schedule N, Part II			31		Х
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	32		22		x
sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22	· · · · · · · · · · · · · · · · · · ·			 ``
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	33		1		X
or IV, and Part V, line 1	34	·	—		
Did the organization have a controlled entity within the meaning of section 512(b)(13)?			1		X
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35 a		35a		X
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
related organization? If "Yes," complete Schedule R, Part V, line 2		controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	36				
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI				ļ	X
Part VI	37	· · · · · · · · · · · · · · · · · · ·			
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X					
19? Note. All Form 990 filers are required to complete Schedule O				 	X
	38	· · · · · · · · · · · · · · · · · · ·	1	,	
r aan /		13. Note. Air Form 330 mers are required to complete Schedule O		1	

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			\Box
	The state of the s		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	}	I	ı
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			ı
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0.			ı
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			х
	account)?	4a		
D	If "Yes," enter the name of the foreign country	1		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
5.2	(FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
	and services provided to the payor?	7a		_X
	If "Yes," did the organization notify the donor of the value of the goods or services provided? \dots	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		v
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	_		x
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		$\frac{\lambda}{X}$
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79 7h		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	 ' ' 	-	
0	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	1		1
þ	Gross income from other sources (Do not net amounts due or paid to other sources			ļ
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	┨ ┃		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
d	Is the organization licensed to issue qualified health plans in more than one state?	134		
h	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

34-1570455 JONES DAY FOUNDATION Form 990 (2017) 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 Section A. Governing Body and Management Yes No 12 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 12 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 Х 3 Did the organization delegate control over management duties customarily performed by or under the direct x supervision of officers, directors, or trustees, or key employees to a management company or other person? . . Х 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a X 8ь Each committee with authority to act on behalf of the governing body?........... Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at Χ 9 the 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, Yes No 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c 13 13 Х 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? 15a 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 Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed \triangleright OH, 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Another's website | X | Upon request | Other (explain in Schedule O) Own website 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

20 State the name_address, and telephone number of the person who possesses the organization's books and records ▶ PAUL A GRATER 901 LAKESIDE AVE CLEVELAND, OH 44114

financial statements available to the public during the tax year

76331G 703K 7/9/2018

Form 990 (20)17)		JONE	es day fou	JNDATION				34-15	70455	Page 7
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontra	actors								

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

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

(A) Name and Title	(B) Average hours per week (list any	I I						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1)LIZANNE THOMAS	1.00										
PRESIDENT/TRUSTEE	0.	Х		х				0.	o.)	0.	
(2)MARY ELLEN POWERS	.50										
VICE PRESIDENT/TRUSTEE	0.	Х		Х				0.	0.	0.	
(3)ROBERT L. THOMSON	.50										
TRUSTEE	0.	X						0.	0.	0.	
(4)GREGORY M. SHUMAKER	.50										
TRUSTEE	0.	x						0.	0.	0.	
(5)LUIS RIESGO	.50								, , , , , , , ,		
TRUSTEE	0.	x					İ	0.	0.	0.	
(6)MARCO LOMBARDI	.50	1			Г						
TRUSTEE	0.	x				ļ		0.	0.	0.	
(7)CHRISTOPHER LOVRIEN	.50					1					
TRUSTEE	0.	Х			1			0.	0.	0.	
(8)JOHN R. PHILLIPS	.50										
TRUSTEE	0.	Х	'					0.	0.	0.	
(9) PETER J. WANG	.50				-			-			
TRUSTEE	0.	Х						0.	0.	0.	
(10)KEVYN ORR	.50										
TRUSTEE	0.	X						0.	0.	0.	
(11)SOPHIE HAGEGE	.50				<u> </u>						
TRUSTEE	0.	X					ł	0.	0.	0.	
(12)TINA TABACCHI	.50				T						
TRUSTEE	0.	Х						0.	0.	0	
(13) PAUL A. GRATER	2.00										
TREASURER	0.	<u> </u>		Х		<u></u>		0.	0.	0	
(14)ELENA KAPLAN	3.00										
SECRETARY	0.	L		Х				0.	0.	0	

Form 990 (2017)

JSA 7E1041 1 000

Page	8
Page	0

Part VII Section A. Officers, Directors, Tr	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours per week (list any hours for	box,	unle: er an	Pos heck ss pe	rson	than ous both	an ee)	(D) Reportable compensation from the	(E) Reportab compensation related organization	n from	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-		from the organization and related organizations
					-						
	 				-		-				
		-	-								
		 		-	-		_				
		-	\vdash	_	<u> </u>						
		_	-		-		_				
	 						_				
	ļ	_	_								
	<u> </u>						L				
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A .						* * *	0.		0.	0. 0.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				o re	eceived more than	\$100,000 o	f	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	cer, directo	or, or ch ind	trı	uste ual	e,	key e	emp	oloyee, or highes	t compensa	ated	Yes No
4 For any individual listed on line 1a, is the organization and related organizations grandvidual	eater than	\$15	50,0	007	i II	"Yes	3, "				4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co 'es," comple	mpen te Scl	satı hedu	on ule	fron <i>I for</i>	n any such	un per	related organizati son	on or individ	dual •••	5 X
Complete this table for your five highest componentation from the organization Report of year.	pensated i	ndepe on fo	ender the	ent e ca	con	tracto	ers t	that received more	e than \$100 hin the orga	,000 c nizatio	of n's tax
(A) Name and business add	dress							(B) Description of se	ervices		(C) Compensation
NONE NONE											
							+				
Total number of independent contractors (i more than \$100,000 in compensation from the contractors of t				nıte	_	thos	se I	listed above) who	received		
TOTAL THE TOTAL OF THE COMPONE CONTROL OF THE CONTROL OF TH						•					

Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c	Federated campaigns 1a Membership dues 1b Fundraising events 1c				
ıs, Gıfı ımılar	d e	Related organizations 1d Government grants (contributions) 1e				
ther S	f	All other contributions, gifts, grants, and similar amounts not included above . 1f 1,652				
and O	9	Noncash contributions included in lines 1a-1f \$				
- 1	<u> </u>	Total Add lines 1a-1f	1,652.			
ᇙᅵ		Business Code				İ
ا ﴿	2a					
Program Service Revenue	b				ļ	
	С				ļ	
Š	d				<u> </u>	
ag	е					_
60	f	All other program service revenue			L	<u> </u>
<u> </u>	9	Total Add lines 2a-2f	0		,	
	3	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 2	18,218			18,218
1	4	Income from investment of tax-exempt bond proceeds .	0			
ļ	5	Royalties	0		<u> </u>	
		(i) Real (ii) Personal				
ŀ	6a	Gross rents	j			
	b	Less rental expenses			N.	
	c	Rental income or (loss)				
	d	Net rental income or (loss)	0			
ļ	7a	Gross amount from sales of (i) Securities (ii) Other				
l		assets other than inventory]		Ì	
}	_					
-	ь	Less cost or other basis				ļ
i		and sales expenses				
}	c	Gain or (loss)	0		1	1
ļ	d	Net gain or (loss)			 	
enne	8a	Gross income from fundraising	İ			
Š.		events (not including \$				}
8		of contributions reported on line 1c)				
Other Rev		See Part IV, line 18 a			ļ	1
ŏ		Less direct expenses b	·		1	
ļ	c	Net income or (loss) from fundraising events ▶	0	 	 -	
	9a	Gross income from gaming activities See Part IV, line 19				
Į	b	Less direct expenses b	ļ			
- 1	c	Net income or (loss) from gaming activities ▶	0			
	10a	Gross sales of inventory, less returns and allowances a				
	b	Less cost of goods sold	0			
ŀ	_ <u>-</u>	Miscellaneous Revenue Business Code			 	
Ì						
}	11a				 	
	b				+	
	C				 	
,	d	All other revenue			 	+
	e 12	Total Add lines 11a-11d	0		 	
	12	Total revenue See instructions	19,870		.1	18,218

Part IX	Statement	of	Functional	Expenses
---------	-----------	----	-------------------	----------

Sec	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)								
	Check if Schedule O contains a resp								
	Do not include amounts reported on lines 6b, 7b, Total expenses Program service expenses general expenses expenses expenses								
1	Grants and other assistance to domestic organizations								
	and domestic governments See Part IV, line 21	4,166,675.	4,166,675.						
2	Grants and other assistance to domestic		-		.				
_	individuals See Part IV, line 22	0.							
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals See Part IV, lines 15 and 16	422,048.	422,048.						
4	Benefits paid to or for members	0.		·					
	Compensation of current officers, directors,								
	trustees, and key employees	0.							
6	Compensation not included above, to disqualified				·				
-	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	0.							
7	Other salaries and wages	0.							
	Pension plan accruals and contributions (include								
-	section 401(k) and 403(b) employer contributions)	0.							
9	Other employee benefits	0.							
10	Payroll taxes	0.							
	Fees for services (non-employees)								
	Management	0.							
	Legal	0.							
	Accounting	0.							
	Lobbying	0.							
	Professional fundraising services See Part IV, line 17.	0.							
f	Investment management fees	0.							
	Other (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O)	0.							
12	Advertising and promotion	0.							
13	Office expenses	0.							
14	Information technology	0.							
15	Royalties	0.							
16	Occupancy	0.							
17	Travel	0.			 				
18	Payments of travel or entertainment expenses	_							
	for any federal, state, or local public officials	0.							
	Conferences, conventions, and meetings	0.							
	Interest	0.							
21	,	0.							
	Depreciation, depletion, and amortization	0.							
	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 (A)			Ì					
	FILING FEE	200.		200.					
-	BANK FEES	922.	-	922.					
_	SUPPLIES	161.		161.					
d									
	All other expenses								
	Total functional expenses Add lines 1 through 24e	4,590,006.	4,588,723.	1,283.					
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				······································				
	fundraising solicitation. Check here								
	following SOP 98-2 (ASC 958-720)	0.							

Part X	- · · · · · · · · · · · · · · · · · · ·			(*************************************
	Check if Schedule O contains a response or note to any line in this Pa	art X		X
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	0.	1	0
2	Savings and temporary cash investments	15,463,149.	2	10,893,013.
3	Pledges and grants receivable, net	0.	3	0
4	Accounts receivable, net	0.	4	0
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees			
6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0.	5	0
8 G	Notes and loans receivable, net	0.	7	0
Assets 8		0.	8	0
۰ 9	Inventories for sale or use	0.	9	0
1 -	Prepaid expenses and deferred charges		9	
108	Land, buildings, and equipment cost or			
Ι.	other basis Complete Part VI of Schedule D	0		0
i	D Less accumulated depreciation		10c	0
11	Investments - publicly traded securities		11	0
12	Investments - other securities See Part IV, line 11		12	0
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets	0.	14	0
15	Other assets See Part IV, line 11	0.	15	0
16	Total assets. Add lines 1 through 15 (must equal line 34)	15,463,149.		10,893,013
17	Accounts payable and accrued expenses	0.		0
18	Grants payable		18	0
19	Deferred revenue		19	0
20	Tax-exempt bond liabilities		20	0
21	Escrow or custodial account liability Complete Part IV of Schedule D	0.	21	0
န္မ 22	Loans and other payables to current and former officers, directors,			
≌	trustees, key employees, highest compensated employees, and			
Liabilities	disqualified persons Complete Part II of Schedule L	0.	22	0
⊐ ₂₃	Secured mortgages and notes payable to unrelated third parties	0.	23	0
24	Unsecured notes and loans payable to unrelated third parties	0.	24	0
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D	0.	25	0
26	Total liabilities. Add lines 17 through 25	0.	26	0
es	Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
ည် အ 27	Unrestricted net assets	15,443,162.	27	10,873,026
g 28	Temporarily restricted net assets	19,987.	28	19,987
29	Permanently restricted net assets	0.	29	0
Net Assets or Fund Balances 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
30 ل ا	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
X 32	Retained earnings, endowment, accumulated income, or other funds		32	
23 Se	Total net assets or fund balances	15,463,149.	_	10,893,013
34	Total liabilities and net assets/fund balances	15,463,149.		10,893,013
		.,,,	, ,,,	Form 990 (201

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

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

of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in

Form 990 (2017)

Χ

2c

3a

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust. ► Attach to Form 990 or Form 990-EZ

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

OMB No 1545-0047

JONES DAY FOUNDATION

Employer identification number 34-1570455

								<u> </u>
Pa		Reason for Public Cha			-			
The	org	anization is not a private foui	ndation because it	is (For lines 1 through	h 12, ch	eck only	one box.)	_
1	Ш	A church, convention of chu	irches, or associat	tion of churches descr	ibed in s	ection 1	70(b)(1)(A)(i).	
2	Ш	A school described in section	on 170(b)(1)(A)(ii)	. (Attach Schedule E (Form 99	0 or 990	-EZ)) //	
3		A hospital or a cooperative	hospital service of	rganization described i	n sectio	n 170(b)	(1)(A)(iii). 👢) '
4		A medical research organiz	ation operated in a	conjunction with a hos	pital des	cribed in	section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st	ate					
5		An organization operated f	or the benefit of	a college or universit	y owned	or ope	rated by a governme	ntal unit described in
		section 170(b)(1)(A)(iv). (C		J	•	•	, ,	
6		A federal, state, or local go		nmental unit describe	d in secti	ion 170(b)(1)(A)(v).	
7	Х	An organization that norma				•		m the general public
		described in section 170(b)	•	•		3-		J
8		A community trust describe			Part II)			
9		An agricultural research org				perated	in conjunction with a	land-grant college
		or university or a non-land-				-	•	-
		university	J	(,		,,,	
10		An organization that norma receipts from activities rela support from gross investmacquired by the organization	ted to its exempt filent income and uitnessend uitnessend 19 nafter June 30, 19	unctions - subject to c nrelated business tax 1975 See section 509 (certain e able inco a)(2). (C	xception me (less omplete	s, and (2) no more that s section 511 tax) from Part III)	n 331/3 % of its
11	<u> </u>	An organization organized	•	•	•			
12	ш	An organization organized a	•	•				•
		of one or more publicly su	· ·					
	Г	Check the box in lines 12a t				-		
а		Type I A supporting orga	•	•	•		- · · · · ·	• • • • •
	the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the							
	_	$_{ m extstyle$	•	·				
b	L	Type II A supporting org	·					
	control or management of the supporting organization vested in the same persons that control or manage the supported							
	Γ	_ organization(s). You must	•					
С	L	Type III functionally integ						ly integrated with,
	F-	its supported organization		· ·				
d	L	Type III non-functionally	-		•		• •	
	that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness					l an attentiveness		
		requirement (see instructi	•	•				
е	L	Check this box if the organic						i, Type III
		functionally integrated, or			porting o	rganizat	ion	
t		ter the number of supported			• • • •			• • • • • • • • • • • • • • • • • • • •
<u> 9</u>		ovide the following information ame of supported organization			<i>(</i> 1)		(-) A	(w) Amount of
	(1) 14	arrie or supported organization	(11) = 114	(described on lines 1-10	listed in yo	ur governing	support (see	(vi) Amount of other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
(A)					į			
								
(B)								
·C\								
(C)								
(D)								
, —		<u></u>		· · · · · · · · · · · · · · · · · · ·			·	
(E)								
					ļ. <u> </u>	ļ		
Tot	a i					1		

V 17-5.2F

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

Schedule A (Form 990 or 990-EZ) 2017

Part II

Schedule A (Form 990 or 990-EZ) 2017

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	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")	1,643,431	2,410,000	3,700,000	15,031,000	1,652	22,786,083			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0			
4	Total Add lines 1 through 3	1,643,431	2,410,000.	3,700,000	15,031,000.	1,652.	22,786,083			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0			
6	Public support Subtract line 5 from line 4					<u></u>	22,786,083			
	Section B. Total Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
7 8	Amounts from line 4	1,643,431	2,410,000	3,700,000 7,178	15,031,000 24,078.	1,652	22,786,083			
9	Net income from unrelated business activities, whether or not the business is regularly carried on		1,52				0			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0			
11	Total support. Add lines 7 through 10						22,848,873			
12	Gross receipts from related activities, etc. (s	see instructions) .				12				
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here										
Sec	tion C. Computation of Public Sup						00.72			
14	Public support percentage for 2017 (In						99.73%			
15	5 Public support percentage from 2016 Schedule A, Part II, line 14									
16a	16a 331/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this									
b	box and stop here. The organization qualifies as a publicly supported organization									
	this box and stop here. The organization qualifies as a publicly supported organization									
17a	17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported									
b	organization	2016. If the organization meets on meets the "	ganization did n s the "facts-and 'facts-and-circun	ot check a box d-circumstances nstances" test	on line 13, 16 " test, check t The organization	a, 16b, or 17a, his box and st on qualifies as a	and line op here. i publicly			
18	Private foundation. If the organization instructions	did not check	a box on line 13	, 16a, 16b, 17a	, or 17b, check	this box and see	,			
				· · · · · · · · · · · · · · · · · · ·		Schedule A (Form 9				

D	•

300	If the organization fails to qua			,		.,	
		(a) 2013	(b) 2014	T (a) 2015	(4) 2016	(-) 2017	/ (D Total
	ndar year (or fiscal year beginning in)	(a) 2013	(0) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees					/	1
2	received (Do not include any "unusual grants ")		ļ				
-	Gross receipts from admissions, merchandise						1
	sold or services performed, or facilities					/	1
	furnished in any activity that is related to the					<i>!</i>	1
_	organization's tax-exempt purpose				/		
3	Gross receipts from activities that are not an						1
	unrelated trade or business under section 513 .				/		
4	Tax revenues levied for the						1
	organization's benefit and either paid to				J#		1
	or expended on its behalf				/		
5	The value of services or facilities			/			1
	furnished by a governmental unit to the						ı
	organization without charge						
6	Total Add lines 1 through 5,						
7 a	Amounts included on lines 1, 2, and 3			/			1
	received from disqualified persons						
þ	Amounts included on lines 2 and 3		/	'			i
	received from other than disqualified persons that exceed the greater of \$5,000					}	ı
	or 1% of the amount on line 13 for the year						ı
С	Add lines 7a and 7b		/				
8	Public support (Subtract line 7c from						
	line 6)		/				
ec	tion B. Total Support			·		•	
	ndar year (or fiscal year beginning in)	(a) 2013	/ (b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	/			.,	 	<u>`</u>
0 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar sources						I
b	Unrelated business taxable income (less					1200	
	section 511 taxes) from businesses						I
	acquired after June 30, 1975						I
	Add lines 10a and 10b	<u></u>	· · · · · · · · · · · · · · · · · · ·				
1	Net income from unrelated business			 			<u> </u>
•	activities not included in line 10b, whether or not the business is regularly						
2	Other pages Do not polyide gain as						
2	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
3	Total support (Add lines 9, 10c, 11,						
•	and 12)						
4	/	the organiz	ation's first sooi	and third fourth	or fifth toy u	oor oo o oostion	E01/a)/3)
•	First five years If the Form 990 is for organization, check this box and stop here.						
	tion C. Computation of Public Supp						
5	Public support percentage for 2017 (line 8,			mn (f))			
6						15	9
_	Public support percentage from 2016 Sched			<u> </u>		16	9
_	tion D. Computation of Investment			40 1 40		T T	
7	Investment income percentage for 2017 (line					17	9
3	Investment income percentage from 2016 S					18	
9 a	331/3% support tests - 2017. If the orga						
	17 is not more than 331/3%, check this						
b	331/3% support tests - 2016. If the organ						
	line 18 is not more than 331/3%, check to		•				_
0	Private foundation. If the organization d	d not check	a box on line	14, 19a, or 191	o, check this b	ox and see instr	uctions 🕨
A						Schedule A (Form 9	

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)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1		i
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).	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	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b_		
С	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	3с		
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	4a		
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	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
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)	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6_		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9а	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 .	9a		
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.	9b		
С	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.	9c		
10 a		10a		
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)	10b		

Schedule A (Form 990 or 990-EZ) 2017

Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	ization	S	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov 20, 1970 (expla	ın ın Part VI) See
instructions. All other Type III non-functionally integrated supporting organization	ations r	nust complete Section	ns A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)	İ		1
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)	i_		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions)	y integr	ated Type III supportin	g organization (see

Schedule A (Form 990 or 990-EZ) 2017

JONES DAY FOUNDATION 34-1570455 Schedule A (Form 990 or 990-EZ) 2017 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2017 Pre-2017 Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI) See instructions Excess distributions carryover, if any, to 2017 а From 2013 c From 2014 d From 2015 From 2016 Total of lines 3a through e Applied to underdistributions of prior years h Applied to 2017 distributable amount Carryover from 2012 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2017 from Section D, line 7 Applied to underdistributions of prior years Applied to 2017 distributable amount Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Schedule A (Form 990 or 990-EZ) 2017

Part VI See instructions

Breakdown of line 7 Excess from 2013....

c Excess from 2015.... d Excess from 2016.... Excess from 2017....

b Excess from 2014....

and 4c

Excess distributions carryover to 2018 Add lines 31

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

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

JONES DAY FOUNDATION

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

Open to Public Inspection

▶ Go to www.irs gov/Form990 for instructions and the latest information. Name of the organization

Employer identification number 34-1570455

Par	General Information of Form 990, Part IV, line 14		Outside the U	nited States. Complete if	f the organization answer	ed "Yes" on
1	For grantmakers. Does the orga	inization mainta	in records to s	substantiate the amount of	its grants and other	
	assistance, the grantees' eligibil	ity for the grant	ts or assistanci	e, and the selection criteria		
	grants or assistance?				L	X Yes No
2	For grantmakers. Describe in		ganization's p	rocedures for monitoring	the use of its grants a	and other
	assistance outside the United St	ates				
3	Activities per Region (The follow	wing Part I, line	3 table can be	e duplicated if additional sp	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
_(1)	EUROPE			GRANTMAKING	···	395,047
_(2)	EAST ASIA AND THE PACIFIC			GRANTMAKING		27,000
_(3)						
_(4)	·					
(5)						
_(6)	<u> </u>					
_(7))					
_(8))					
_(9))					
(10))					
(11))					

c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule F (Form 990) 2017

(12)

(13)

(14)

(15)

(16)

(17)

3a Sub-total

b Total from continuation sheets to Part I

422,047

422,047

Schedule F (Form 990) 2017

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,

rait	Part IV, line 15, for any recipient who received	sipient who received	more than \$5,000	art II can be o	Part II can be duplicated if additional space is needed	ional space is	s needed		
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
<u> </u>			EUROPE/ICELAND/GREENLAND	SEE PART IV	25,000	EFT			
(2)			EUROPE/ICELAND/GREENLAND	SEE PART IV	69,627	EFT			
(6)		THE STATE OF THE S	EUROPE/ICELAND/GREENLAND	SEE PART IV	150,000	EFT			
9		AND THE PROPERTY OF THE PROPER	EUROPE/ICELAND/GREENLAND	SEE PART IV	15,228	EFT			
· (4)	- A A A A A A A A A A A A A A A A A A A		EAST ASIA/PACIFIC	SEE PART IV	27,000	EFT			
2 9		The state of the s	EUROPE/ICELAND/GREENLAND	SEE PART IV	20,193	EFT			
5			EUROPE/ICELAND/GREENLAND	SEE PART IV	30,000	LET			
			EUROPE/ICELAND/GREENLAND	PART	85,000	EFT			
(6)	,	*							
6)		, s y	2						
(10)	4								
(11)		*							
(12)		, ,							
(13)	*		1						
(15)		,							
(16)									
2 Ent	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	anizations listed ab	ove that are recognized as (charities by the	foreign country, re	cognized as tax	x-exempt ▼		. &
	by the IRS, or for which the grantee of coursel has provided a section 501(5) equivalently face.	or counser has pro-	אומפת ש אפרטיטון אם ו(ב)(א)						8.
2	Enter total number of other organizations of critical	duois of chance.						Schedule F (Schedule F (Form 990) 2017

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

Part III Grants an

Part III can	be duplicated it add	Part III can be duplicated it additional space is needed						
(a) Type of grant or assistance	or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(9)								
(7)						;		
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)							:	
(16)								
(17)		1					-	
(18)								
				:			Sche	Schedule F (Form 990) 2017

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

Schedule F (Form 990) 2017

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE F

THE FOUNDATION APPROVES GRANTS LOCATED OUTSIDE THE U.S. ON A REQUEST BY REQUEST BASIS OR, IN THE CASE OF DISASTER RELIEF, AS DETERMINED BY THE TRUSTEES. THE FOUNDATION CONFIRMS THE CHARITABLE PURPOSE OF THE GRANT AND REQUIRES THE DONEE TO CERTIFY THE FUNDS WILL BE USED IN COMPLIANCE WITH ALL APPLICABLE LAWS AND TO PROVIDE PERIODIC REPORTS.

SCHEDULE F

PART II, LINE 1(1) - SUPPORT TO PARTIALLY FUND A YOUTH WORKER TO HELP UNDERPRVILEGED CHILDREN.

SCHEDULE F

PART II, LINE 1(2) - SUPPORT TO FUND A ROUNDTABLE AND CONFERENCE FOR INTERNATIONAL AND COMPARATIVE LAW.

SCHEDULE F

PART II, LINE 1(3) - SUPPORT TO FUND ONE YEAR SCHOLARSHIPS FOR 6 IMPOVERISHED STUDENTS FROM DEVELOPING COUNTRIES.

SCHEDULE F

PART II, LINE 1(4) - SUPPORT TO VOLUNTEER MUSICIANS TO PROVIDE MUSIC THERAPY LESSONS TO RAPE AND INCEST VICTIMS IN SENEGAL.

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE F

PART II, LINE 1(5) - SUPPORT TO PROVIDE ASSISTANCE IN HONG KONG TO ASYLUM

SEEKERS, REFUGEES, AND EFFORTS TO COMBAT HUMAN TRAFFICKING.

SCHEDULE F

PART II, LINE 1(6) - SUPPORT TO FUND EXPENSES FOR 3 YOUTH START COURSES

FOR AT RISK YOUTH.

SCHEDULE F

PART II, LINE 1(7) - SUPPORT OF THE LEGAL ADVICE SERVICE PROGRAM

PROVIDING ASSISTANCE TO WORKING PARENTS.

SCHEDULE F

PART II, LINE 1(8) - FUND THE CONSTRUCTION AND EQUIPPING OF A YOUTH

CENTER AT LUZIRA PRISON IN UGANDA.

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

JONES DAY FOUNDATION

Name of the organization

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

► Attach to Form 990.

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

Open to Public

Employer identification number

34-1570455

&

× Yes

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part | General Information on Grants and Assistance

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNITED STATES HOLOCAUST MEMORIAL MUSEUM							
100 RAOUL WALLENBERG WASHINGTON, DC 20024	52-1309391	501 (C) (3)	110,000				SEE PART IV
(2) SAINT MARTIN DE PORRES HIGH SCHOOL							
6111 LAUSCHE AVENUE CLEVELAND, OH 44103	52-2401852	501(C)(3)	60,000				SEE PART IV
(3) HOPE FOR A HEALTHIER HUMANITY							
230 VERNON AVENUE STATEN ISLAND, NY 10309	52-2303126	501 (C) (3)	358,700				SEE PART IV
(4) LEGAL AID SOCIETY OF THE DISTRICT OF COLUMB	L.,						
1331 H STREET, NW WASHINGTON, DC 20005	53-0196600	501 (C) (3)	90,000				SEE PART IV
(5) CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA							
1910 MAGNOLIA AVE. LOS ANGELES, CA 90007	95-1690975	501 (C) (3)	75,000				SEE PART IV
(6) GREATER HOUSTON COMMUNITY FOUNDATION							
2120 WOODWAY DRIVE HOUSTON, TX 77056	23-7160400	501 (C) (3)	25,000			į	SEE PART IV
(7) GROUP PLAN COMMISSION							
1240 HURON ROAD CLEVELAND, OH 44114	46-1908475	501 (C) (3)	100,000				SEE PART IV
(8) INTERNATIONAL SENIOR LAWYERS PROJECT							
31 WEST 52ND ST NEW YORK, NY 10019-6131	52-2241212	501 (C) (3)	40,000				SEE PART IV
(9) BOUNCE CHILDREN'S FOUNDATION							
255 BIRCHWOOD AVENUE DEERFIELD, IL 60015	47-4495431	501 (C) (3)	125,000				SEE PART IV
(10) CLASSROOMS TO CORPORATIONS		=					
30799 PINETREE ROAD PEPPER PIKE, OH 44124	46-1566361	501 (C) (3)	15,000				SEE PART IV
(11) COMMUNITIES IN SCHOOLS OF THE NATION'S CAPI							
1023 31ST STREET NW WASHINGTON, DC 20007	75-1581607	501 (C) (3)	50,000				SEE PART IV
(12) THE UNIVERSITY OF MT UNION							
1972 CLARK AVENUE ALLIANCE, OH 44601	34-0714687	501 (C) (3)	25,000				SEE PART IV
2 Enter total number of section 501(c)(3) and government		organizations lis	organizations listed in the line 1 table.	je		▲ : : : : : :	
3 Enter total number of other organizations listed in the line 1 table	ed in the line	1 table				A	

JSA 7E1288 1 000 76331G 703K 7/9/2018

V 17-5.2F 9:42:19 AM

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

Schedule I (Form 990) (2017)

27

PAGE

SCHEDULEI (Form 990)

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.

Open to Public Inspection 2017

Employer identification number

34-1570455

OMB No 1545-0047

JONES DAY FOUNDATION

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Attach to Form 990.

° N × 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part I General Information on Grants and Assistance

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) HARVARD LAW SCHOOL							
1585 MASSACHUSETTS AVE CAMBRIDGE, MA 02138	04-6037213	501 (C) (3)	116,904				SEE PART IV
(2) GLOBAL STRATEGIES							
828 SAN PABLO AVENUE ALBANY, CA 94706	68-0406388	501 (C) (3)	100,000				SEE PART IV
(3) CITIZEN SCHOOLS							
308 CONGRESS STREET BOSTON, MA 02210	04-3259160	501 (C) (3)	250,000				SEE PART IV
(4) TEXAS RIO GRANDE LEGAL AID, INC				· ·			
301 SOUTH TEXAS AVENUE MERCEDES, TX 78570	74-1675230	501 (C) (3)	150,000				SEE PART IV
(5) NATIONAL IMMIGRANT JUSTICE CENTER							
208 S LA SALLE STREET CHICAGO, IL 60604	36-1877640	501(C)(3)	80,000				SEE PART IV
(6) NATIONAL PARTNERSHIP FOR NEW AMERICANS							
1818 S PAULINA STREET CHICAGO, IL 60608	45-3419142	501 (C) (3)	340,000				SEE PART IV
(7) CLEVELAND ORCHESTRA	! 		~				
11001 EUCLID AVENUE CLEVELAND, OH 44106	34-0714468	501 (C) (3)	150,000				SEE PART IV
(8) ILLINOIS HOLOCAUST MUSEUM AND EDUCATION CEN							
9603 WOODS DRIVE SKOKIE, IL 60077	36-3156154	501 (C) (3)	75,000				SEE PART IV
(9) CRISTO REY ATLANTA JESUIT HIGH SCHOOL							
680 WEST PEACHTREE STREET, NW	45-5550340	501 (C) (3)	75,000				SEE PART IV
(10) LAWYERS WITHOUT BORDERS INC							
750 MAIN STREET HARTFORD, CT 06103	06-1574889	501 (C) (3)	120,000				SEE PART IV
(11) ST VINCENT CHARITY DEVELOPMENT FOUNDATION							
2351 EAST 22ND ST CLEVELAND, OH 44115	27-1602445	501 (C) (3)	130,000				SEE PART IV
(12) TAHIRIH JUSTICE CENTER							
6402 ARLINGTON BLVD FALLS CHURCH, VA 22042	54-1858176	501 (C) (3)	25,000				SEE PART IV
2 Enter total number of section 501(c)(3) and government		rganizations lis	organizations listed in the line 1 table	le		A : : : : : : : : : : : : : : : : : : :	
3 Enter total number of other organizations listed in the lin	ed in the line	1 table	le 1 table			A	

JSA 7E12881000 76331G 703K 7/9/2018

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

9:42:19 AM

SCHEDULE 1 (Form 990)

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.

2017	Open to Public

OMB No 1545-0047

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

Employer identification number 34-1570455

Assistance
Grants and
nformation on
General
Partl

JONES DAY FOUNDATION

Department of the Treasury Internal Revenue Service Name of the organization

- ş | × Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . .
 - 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) HOUSTON HEALTH FOUNDATION							
P O BOX 20272 HOUSTON, TX 77225	27-2920745	501(C)(3)	150,000				SEE PART IV
(2) CHILDREN'S LAW CENTER INCORPORATED							
616 H STREET NW WASHINGTON, DC 20001	52-1961588	501 (C) (3)	86,406.				SEE PART IV
(3) DELEWARE'S COMBINED CAMPAIGN FOR JUSTICE							
P O BOX 2113 WILMINGTON, DE 19899	22-2804785	501 (C) (3)	30,000				SEE PART IV
(4) ATLANTA VOLUNTEER LAWYERS FOUNDATION							
235 PEACHTREE STREET NE ATLANTA, GA 30303	58-1364400	501 (C) (3)	100,000				SEE PART IV
(5) THE CLEVELAND CLINIC FOUNDATION							
9500 EUCLID AVENUE DVB CLEVELAND, OH 44106	34-0714585	501 (C) (3)	600,000				SEE PART IV
(6) KIND, INC							
1300 L STREET NW WASHINGTON, DC 20005	26-2763038	501(C)(3)	30,000				SEE PART IV
(7) HISPANIC FEDERATION UNIDOS CAMPAIGN							
55 EXCHANGE PLACE NEW YORK, NY 10005	13-3573852	501 (C) (3)	50,000				SEE PART IV
(8) THE POSSE FOUNDATION, INC							
14 WALL STREET NEW YORK, NY 10005	13-3840394	501(C)(3)	200,000				SEE PART IV
(9) ABA FUND FOR JUSTICE AND EDUCATION							
321 N CLARK STREET CHICAGO, IL 60654	36-6110299	501(C)(3)	25,000				SEE PART IV
(10) LAWYERS COMMITTEE FOR CIVIL RIGHTS UNDER LA							
1401 NEW YORK AVE WASHINGTON, DC 20005	52-0799246	501(C)(3)	125,000				SEE PART IV
(11) FRIENDS OF NOTRE-DAME DE PARIS, INC							
1717 PENNSYLVANIA AVE WASHINGTON, DC 20006	81-4458934	501(C)(3)	75,000				SEE PART IV
(12)							
2 Enter total number of section 501(c)(3) and government		organizations lis	organizations listed in the line 1 table			A : : : : : : : : : : : : : : : : : : :	35.
3 Enter total number of other organizations listed in the lin	ed in the line	1 table	e 1 table			A	

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 7E12881000 76331G 703K 7/9/2018

V 17-5.2F

9:42:19 AM

29 PAGE

Schedule 1 (Form 990) (2017)

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 displicated if additional space is needed

	Part III can be duplicated if additional space is	ice is needed				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
		-				
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	information re	quired in Part I,	line 2, Part III, c	olumn (b), and any o	ther additional

SUPPLEMENTAL INFORMATION #1

GRANTEES ARE REQUIRED TO PROVIDE REPORTS OF HOW FUNDS ARE USED.

SUPPLEMENTAL INFORMATION #2

UNITED STATES HOLOCAUST MEMORIAL MUSEUM - FUNDING FOR RESEARCH ON THE

HISTORY OF THE HOLOCAUST

SAINT MARTIN DE PORRES HIGH SCHOOL - HELP FUND THE CONSTRUCTION OF A NEW

SCHOOL BUILDING.

Schedule I (Form 990) (2017)

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 Part III

	Part III can be duplicated if additional space is needed	se is needed			-	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book FMV, appraisal, other)	(f) Description of non-cash assistance
-						
7					:	
ო						
4						
v						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional	nformation rec	quired in Part I, I	line 2, Part III, c	olumn (b), and any o	ther additional

- WE CONTRIBUTED TO FUND A PROGRAM TO Supplemental information. Provide the information required in Parti, line 2, Pinformation HOPE FOR A HEALTHIER HUMANITY

IDENTIFY AND ADDRESS THE ROOT CAUSES FOR MIGRATION TO THE U.S. AND TO

 Ξ HELP IMPROVE THE NUTRITION PRACTICES OF WOMEN AND YOUNG CHILDREN IN

SALVADOR

LEGAL AID SOCIETY OF THE DISTRICT OF COLUMBIA - SUPPORT TO FUND SOCIAL

SECURITY AND HOUSING REPRESENTATION FOR LOW INCOME RESIDENTS.

CHILDREN'S BUREAU OF SOUTHERN CALIFORNA - GENERAL SUPPORT

PAGE 31

JONES DAY FOUNDATION

Page 2

34-1570455

Schedule I (Form 990) (2017)

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal other)	(f) Description of non-cash assistance
-						
. ~						
₆						
4						
လ						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	nformation re	quired in Part I, I	ine 2, Part III, c	olumn (b), and any o	ther additional

GREATER HOUSTON COMMUNITY FOUNDATION - FUNDING FOR HUMAN TRAFFICKING

ROUNDTABLE PROGRAM

GROUP PLAN COMMISSION - SUPPORT TO HELP FUND THE CLEVELAND PUBLIC SQUARE

PROJECT

INTERNATIONAL SENIOR LAWYERS PROJECT - GENERAL SUPPORT

BOUNCE CHILDREN'S FOUNDATION - START UP FUNDING FOR CHANGING THE LIVES OF

CHRONICALLY ILL CHILDREN AND FAMILIES IN THE CHICAGO AREA.

JONES DAY FOUNDATION

Schedule I (Form 990) (2017)

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 Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book FMV, appraisal, other)	(f) Description of non-cash assistance
-						
- 7						
9						
4						
y v						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	nformation re	quired in Part I, I	ine 2, Part III, c	olumn (b), and any o	ther additional

CLASSROOMS TO CORPORATIONS - SUPPORT FUTURES INITIATIVE TO EXPAND

INFORMATION TECHNOLOGY PROGRAM TO MORE STUDENTS.

COMMUNITIES IN SCHOOLS OF THE NATION'S CAPITAL - ASSIST LOW INCOME PUBLIC

SCHOOL STUDENTS AND THEIR FAMILIES WITH ACCESS TO PUBLIC PROGRAMS IN

ORDER TO IMPROVE ATTENDANCE AND PERFORMANCE.

THE UNIVERSITY OF MT. UNION - FUNDING FOR THE SPIRIT OF AMERICA AWARD TO

PROMOTE BIPARTISAN COOPERATIOIN IN THE U.S. CONGRESS.

Schedule 1 (Form 990) (2017)

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 Part III

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

HARVARD LAW SCHOOL - SUPPORT TO FUND INTELLECTUAL PROPERTY RULE OF LAW IN CHINA CONFERENCE EXPENSES AND TO FUND THE HARVARD LAW SCHOOL PROJECT ON

DISABILITY.

GLOBAL STRATEGIES - SUPPORT TO PROVIDE TREATMENT TO SURVIVORS OF SEXUAL

VIOLENCE IN AFRICA.

CITIZEN SCHOOLS - SUPPORT TO EXPAND THE PROGRAM TO EXTEND THE REACH OF

CITIZEN SCHOOLS' SIGNATURE APPRENTICE EXPERIENCE.

Schedule 1 (Form 990) (2017)

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 Part III

	Part III can be duplicated II additional space is needed	מב וא וובבחבת				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal other)	(f) Description of non-cash assistance
-						
2						
, e-						
P						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	Information re	quired in Part I, I	line 2, Part III, c	olumn (b), and any o	ther additional

TEXAS RIO GRANDE LEGAL AID, INC. - SUPPORT TO ASSIST INDIVIDUALS DETAINED

IN AN IMMIGRATION AND CUSTOMS ENFORCEMENT DETENTION CENTER IN LAREDO,

TEXAS.

NATIONAL IMMIGRANT JUSTICE CENTER - SUPPORT TO ASSIST INDIVIDUALS

DETAINED IN AN IMMIGRATION AND CUSTOMS ENFORCEMENT DETENTION CENTER IN

LAREDO, TEXAS.

JONES DAY FOUNDATION

Schedule 1 (Form 990) (2017)

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 Part III

במור זון כמון אם מחלווכמוכת זו מתמוונטו ומו מאמים וא וזככתכת	22212				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal other)	(f) Description of non-cash assistance
Part IV Supplemental Information Provide the information required in Part II line 2. Part III. column (b): and any other additional	information re	durred in Part I	line 2. Part III. c	olumn (b): and any o	ther additional

NATIONAL PARTNERSHIP FOR NEW AMERICANS - SUPPORT TO ASSIST IMMIGRANTS IN

APPLYING FOR U.S. CITIZENSHIP AND INTEGRATING INTO AMERICAN SOCIETY.

THE CLEVELAND ORCHESTRA - GENERAL SUPPORT

ILLINOIS HOLOCAUST MUSEUM AND EDUCATION CENTER - SUPPORT FOR "TAKE A

STAND CENTER" CAMPAIGN.

CRISTO REY ATLANTA JESUIT HIGH SCHOOL - HELP FUND THE CONSTRUCTION OF A

NEW HIGH SCHOOL BUILDING.

Schedule I (Form 990) (2017)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed

	-					
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
m						
4						
w						
ဖ						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	nformation re	quired in Part I, I	ine 2, Part III, o	olumn (b), and any o	ther additional

LAWYERS WITHOUT BORDERS INC. - GENERAL SUPPORT

ST. VINCENT CHARITY DEVELOPMENT FOUNDATION - HELP FUND A PROGRAM TO

PROVIDE PRO BONO LEGAL ASSISTANCE TO LOW INCOME PATIENTS.

TAHIRIH JUSTICE CENTER - EMERGENCY FUNDS TO SUPPORT PREVIOUSLY TRAFFICKED

WOMEN AND CHILDREN IN HOUSTON AFTER HURRICANE HARVEY.

34-1570455

Schedule I (Form 990) (2017)

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 Part III

(f) Description of non-cash assistance Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV appraisal other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV ന 2 g

HOUSTON HEALTH FOUNDATION - SUPPORT THE HUMAN TRAFFICKING ASSESSMENT AND information

OUTREACH PROJECT IMPLEMENTED BY THE CITY OF HOUSTON IN THE WAKE OF

HURRICANE HARVEY

CHILDREN'S LAW CENTER INCORPORATED - SUPPORT TO FUND EXPANSION OF

MEDICAL-LEGAL PARTNERSHIP WITH A CLINIC IN NORTHWEST WASHINGTON, D.C.

DELEWARE'S COMBINED CAMPAIGN FOR JUSTICE - ESTABLISH AN ENDOWMENT IN

RECOGNITION OF JUSTICE RANDY J. HOLLAND TO SUPPORT LEGAL AID ON DOMESTIC

VIOLENCE AND FAMILY LAW RELATED ISSUES.

Schedule I (Form 990) (2017)

PAGE 38

JONES DAY FOUNDATION

Schedule 1 (Form 990) (2017)

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 Part III

	(a) Type of grant or assistance recipients	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal other)	(f) Description of non-cash assistance
-						
7 .						
				3		
r.						
ی رد						
>						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	nformation rec	quired in Part I, I	ine 2, Part III, c	olumn (b), and any o	ther additional

ATLANTA VOLUNTEER LAWYERS FOUNDATION - SUPPORT FOR COMMUNITY ADVOCATE AND

ATTORNEY PLACED IN ELEMENTARY SCHOOLS TO ASSIST FAMILIES OF STUDENTS WITH

LEGAL ISSUES IMPACTING FAMILY STABILITY.

THE CLEVELAND CLINIC FOUNDATION - SUPPORT FOR BUILDING A NEW HOME FOR

CLEVELAND CLINIC CHILDREN'S.

KIND, INC. - LEGAL ASSISTANCE FOR UNACCOMPANIED MINORS FACING

DEPORTATION.

JONES DAY FOUNDATION

Schedule I (Form 990) (2017)

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 Part III

	במור זו כמון כב מחלווכמוכת וו ממחוויסוומי פלמככ ופ ווככמכמ	2000				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
7						
,						
4						
ις.						
ဖ						
		_				
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information	nformation rec	quired in Part I, I	ine 2, Part III, c	olumn (b); and any o	ther additional

HISPANIC FEDERATION UNIDOS CAMPAIGN - SUPPORT THE UNIDOS PUERTO RICO

HUMANE RELIEF CAMPAIGN.

THE POSSE FOUNDATION, INC. - SUPPORT THE 2018 SUMMER IMMERSION PROGRAM

FOR U.S. VETERANS.

ABA FUND FOR JUSTICE AND EDUCATION - FUNDING OF STIPENDS FOR INTERNS

WORKING WITH THE ABA RULE OF LAW INITIATIVE.

Schedule I (Form 990) (2017)

PAGE 40

Schedule I (Form 990) (2017)

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 Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal, other)	(f) Description of non-cash assistance
4						
9						
'						
art IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	information re	quired in Part I,	I, line 2, Part III, c	olumn (b), and any o	iher additional

LAWYERS COMMITTEE FOR CIVIL RIGHTS UNDER LAW - FUNDING FOR ASSOCIATE

COUNSEL TO LEAD EFFORTS TO PROMOTE PEACEFUL PROTESTS.

FRIENDS OF NOTRE-DAME DE PARIS, INC. - SUPPORT FOR THE RESTORATION OF THE

NOTRE DAME DE PARIS CATHEDRAL.

PAGE 41

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 34-1570455

JONES DAY FOUNDATION

FORM 990, PART III, LINE 4D GRANTS TO OTHER ORGANIZATIONS

FORM 990, PART VI, LINE 8B

THE ORGANIZATION DOES NOT HAVE COMMITTEES.

FORM 990, PART VI, LINE 9

LIZANNE THOMAS

1420 PEACHTREE STREET, NE SUITE 800

ATLANTA, GA 30309

MARY ELLEN POWERS

51 LOUISIANA AVE. NW

WASHINGTON, DC 20001

ROBERT L. THOMSON

EDINBURGH TOWER, 29TH FLOOR, THE LANDMARK, 15 QUEEN'S RD CENTRAL

HONG KONG

GREGORY M. SHUMAKER

51 LOUISIANA AVE. NW

WASHINGTON, DC 20001

LUIS RIESGO

Name of the organization

JONES DAY FOUNDATION

Employer identification number 34-1570455

51 LOUISIANA AVE. NW

WASHINGTON, DC 20001

MARCO LOMBARDI

VIA TURATI 16-18, 2ND FLOOR

20121 MILAN, ITALY

CHRISTOPHER LOVRIEN

555 SOUTH FLOWER STREET

50TH FLOOR

LOS ANGELES, CA 90071

JOHN R. PHILLIPS

21 TUDOR STREET

LONDON EC4Y ODJ, UNITED KINGDOM

PETER J. WANG

4TH FLOOR

27 ZHONGSHAN DONG YI ROAD

SHANGHAI 200002, CHINA

KEVYN ORR

51 LOUISIANA AVE. NW

WASHINGTON, DC 20001

34-1570455

SOPHIE HAGEGE

2, RUE SAINT-FLORENTIN

75001 PARIS, FRANCE

TINA TABACCHI

77 WEST WACKER DRIVE

CHICAGO, IL 60601

ELENA KAPLAN

1420 PEACHTREE STREET, N.E.

SUITE 800

ATLANTA, GA 30309

FORM 990, PART VI, LINE 11B

FORM 990 IS REVIEWED BY EACH MEMBER OF THE BOARD PRIOR TO BEING FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C

THE CONFLICT OF INTEREST POLICY APPLIES TO ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE FOUNDATION. CONFLICTS OF INTEREST ARE REQUIRED TO BE DISCLOSED AND MEMBERS WHO HAVE A CONFLICT ARE NOT PERMITTED TO VOTE ON THE MATTER OR PARTICIPATE IN DECISION MAKING OTHER THAN BY PROVIDING INFORMATION REQUESTED BY THE DISINTERESTED DECISION MAKERS.

FORM 990, PART VI, LINE 19

NO DOCUMENTS AVAILABLE TO THE PUBLIC.

JONES DAY FOUNDATION

Employer identification number 34-1570455

Page 2

FORM 990, PART X, LINE 18

THE FOUNDATION REPORTS ON A CASH BASIS. AS OF DECEMBER 31, 2016 AND 2017,

THE FOUNDATION HAS GRANTS PAYABLE OF \$3,610,046 AND \$6,644,406,

RESPECTIVELY.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

IN FURTHERANCE OF THE PURPOSES SET FORTH IN OUR ARTICLES OF
INCORPORATION, WE ENGAGE IN GRANT-MAKING AROUND THE WORLD, INCLUDING
THE COMMUNITIES IN WHICH WE LIVE AND WORK. OUR PHILANTHROPY IS
DIRECTED TO ORGANIZATIONS THAT:

- PROMOTE THE RULE OF LAW, INCLUDING THE ADVANCEMENT OF CIVIL AND HUMAN RIGHTS,
- FOSTER INNOVATION IN ACADEMICS, MEDICINE AND THE ARTS,
- IMPROVE LIVING CONDITIONS AND ECONOMIC OPPORTUNITIES FOR PEOPLE IN IMPOVERISHED SETTINGS (PARTICULARLY CHILDREN AND WOMEN), AND
- PROVIDE SUPPORT AND COMFORT TO PEOPLE SUFFERING FROM NATURAL AND OTHER DISASTERS.

FORM 990, PART VIII - INVESTMENT INCOME			ATTACHMENT 2	
DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INVESTMENT INTEREST	18,21	8.		18,218.
TOTALS	18,21	8.		18,218.