

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation The Vertex Foundation Inc		A Employer identification number 82-3101518	
% KRISTA BOUDREAU			
Number and street (or P O box number if mail is not delivered to street address) 50 NORTHERN AVENUE	Room/suite	B Telephone number (see instructions) (617) 961-5104	
City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02210		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 11,084,096	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <u>(Part I, column (d) must be on cash basis)</u>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	10,000,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	10,000,000	0		
	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	2,202	0	0	2,202
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	157	0	0	157
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	240,858	0	0	239,300
	24 Total operating and administrative expenses. Add lines 13 through 23	243,217	0	0	241,659
	25 Contributions, gifts, grants paid	6,786,540			6,773,915
	26 Total expenses and disbursements. Add lines 24 and 25	7,029,757	0	0	7,015,574
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	2,970,243			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	8,113,561	11,084,096	11,084,096
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	8,113,561	11,084,096	11,084,096	
Liabilities	17	Accounts payable and accrued expenses	22,934	11,789	
	18	Grants payable	406,616	419,154	
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	429,550	430,943	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.				
	26	Capital stock, trust principal, or current funds	7,684,011	10,653,153	
	27	Paid-in or capital surplus, or land, bldg , and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds			
	29	Total net assets or fund balances (see instructions)	7,684,011	10,653,153	
30	Total liabilities and net assets/fund balances (see instructions) .	8,113,561	11,084,096		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	7,684,011
2	Enter amount from Part I, line 27a	2	2,970,243
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	10,654,254
5	Decreases not included in line 2 (itemize) ▶ _____	5	1,101
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	10,653,153

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 { }	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	1,808,137	2,014,692	0.897476
2017	75,352	38,452	1.959638
2016			
2015			
2014			

2 Total of line 1, column (d)	2	2.857114
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	1.428557
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	7,720,277
5 Multiply line 4 by line 3	5	11,028,856
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	11,028,856
8 Enter qualifying distributions from Part XII, line 4 ,	8	7,015,574

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	20
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	20
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . ▶	10	20
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 20 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ CA, DE, MA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12	Yes	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>KRISTA BOUDREAU</u> Telephone no ▶ <u>(617) 961-5104</u>			

Located at ▶ 50 NORTHERN AVENUE BOSTON MA ZIP+4 ▶ 02210

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		No
	Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	5b	No
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Total number of other employees paid over \$50,000.				

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services. ►		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	7,837,845
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	7,837,845
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	7,837,845
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	117,568
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,720,277
6	Minimum investment return. Enter 5% of line 5.	6	386,014

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	386,014
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	0
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	386,014
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	386,014
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	386,014

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	7,015,574
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7,015,574
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	7,015,574

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				386,014
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.				
b Total for prior years 2017, 2016, 2015				
3 Excess distributions carryover, if any, to 2019				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				74,920
e From 2018.				1,707,402
f Total of lines 3a through e.	1,782,322			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ <u>7,015,574</u>				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2019 distributable amount.				386,014
e Remaining amount distributed out of corpus	6,629,560			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,411,882			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	8,411,882			
10 Analysis of line 9				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				74,920
d Excess from 2018.				1,707,402
e Excess from 2019.				6,629,560

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
THE VERTEX FOUNDATION
50 NORTHERN AVE
BOSTON, MA 02210
(617) 341-6100

b The form in which applications should be submitted and information and materials they should include
WRITTEN LETTER

c Any submission deadlines
NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
CHARITABLE ORGANIZATIONS DESCRIBED IN SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	6,773,915
b <i>Approved for future payment</i> American Online Giving Foundation 2454 N McMullen Booth Rd Suite 43 Clearwater, FL 33759		PC	Donor advised fund matching gifts	392,680
Charitable Giving Union Mine Road Pitts Cleave Tavistock, Devon PL19 0NS UK		PC	Donor advised fund matching gifts	13,021
UK Online Giving Foundation Unit 9 Cirencester Office Park Tetbury Road Cirencester, Gloucestershire GL7 6JJ UK		PC	Donor advised fund matching gifts	13,505
Total			▶ 3b	419,206

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e). . .					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1)** Cash.
- (2)** Other assets.
- b** Other transactions
- (1)** Sales of assets to a noncharitable exempt organization.
- (2)** Purchases of assets from a noncharitable exempt organization.
- (3)** Rental of facilities, equipment, or other assets.
- (4)** Reimbursement arrangements.
- (5)** Loans or loan guarantees.
- (6)** Performance of services or membership or fundraising solicitations.
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> Signature of officer or trustee	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">2020-09-08</div> Date	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> Title

May the IRS discuss this return with the preparer shown below?
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00395735
	JENNIFER D RHODERICK				
	Firm's name ▶ ERNST & YOUNG US LLP				Firm's EIN ▶
	Firm's address ▶ 111 MONUMENT CIRCLE STE 4000 INDIANAPOLIS, IN 46204				Phone no (317) 681-7000

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
David Altshuler	VICE CHAIRMAN/DIRECTOR 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Michael Panni	CHAIRMAN/DIRECTOR 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, NE 02210				
Katharine Jensen	Executive Director/Director 15 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Paul Silva	Treasurer 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Julie Fogarty	SECRETARY 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Stacia MacNaught	Director 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Dottie Caplan	Director 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Sabine Hadida	Director 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Stephanie Frankline	Director 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
Kristy Grimm	Director 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				
David Gillen	Director 1 0	0	0	0
50 NORTHERN AVENUE BOSTON, MA 02210				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN ONLINE GIVING FOUNDATION 2454 N MCMULLEN BOOTH RD SUITE 43 CLEARWATER, FL 33759		PC	DONOR ADVISED FUND MATCHING GIFTS	1,168,198
CHARITABLE GIVING UNION MINE ROAD PITTS CLEAVE TAVISTOCK, DEVON PL19 0NS UK		PC	DONOR ADVISED FUND MATCHING GIFTS	29,755
UK ONLINE GIVING FOUNDATION 9 CIRENCESTER OFFICE PRK TETBURY RD CIRENCESTER, GLOUCESTERSHIRE GL7 6JJ UK		PC	DONOR ADVISED FUND MATCHING GIFTS	38,751
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICARES FOUNDATION 88 HAMILTON AVE STAMFORD, CT 06902		PC	GENERAL SUPPORT	25,000
AUSTRALIAN RED CROSS SOCIETY 23-47 VILLIERS ST NORTH MELBOURNE NORTH MELBOURNE, VICTORIA 3051 AS		PC	GENERAL SUPPORT	35,000
BARRETSTOWN FOUNDATION PO BOX 4435 NEW YORK, NY 10163		PC	GENERAL SUPPORT	275,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIOCOM INSTITUTE 10996 TORREYANA RD STE 200 SAN DIEGO, CA 92121		PC	GENERAL SUPPORT	5,000
BOSTON CHILDREN'S MUSEUM 308 CONGRESS ST BOSTON, MA 022101000		PC	GENERAL SUPPORT	56,000
CAMP SUNSHINE AT SEBAGO LAKE 35 ACADIA RD CASCO, ME 04015		PC	GENERAL SUPPORT	100,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAREER COLLABORATIVE 77 SUMMER ST BOSTON, MA 02110		PC	GENERAL SUPPORT	25,000
CHARLES RIVER CONSERVANCY 43 THORNDIKE ST S3-3 CAMBRIDGE, MA 02141		PC	GENERAL SUPPORT	2,000
CITY YEAR287 COLUMBUS AVE BOSTON, MA 02116		PC	GENERAL SUPPORT	510,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CRADLES TO CRAYONS 155 NORTH BEACON ST BRIGHTON, MA 02135		PC	GENERAL SUPPORT	5,000
DIRECT RELIEF 6100 WALLACE BECKNELL RD GOLETA, CA 93117		PC	GENERAL SUPPORT	50,000
DONORSCHOOSEORG 134 WEST 37TH ST FL 11 NEW YORK, NY 10018		PC	GENERAL SUPPORT	170,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EDVESTORS INC 140 CLARENDON ST STE 401 BOSTON, MA 02116		PC	GENERAL SUPPORT	15,000
ELEMENTARY INSTITUTE OF SCIENCE 608 51 ST SAN DIEGO, CA 92115		PC	GENERAL SUPPORT	75,000
ENTHUSE CHARITABLE TRUST UNIV OF YORK NATL STEM LEARNING CTR HESLINGTON, YORK YO10 5DD UK		PC	GENERAL SUPPORT	130,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOUNDATION FOR HOSPITAL ART 31 VILLAGE CENTRE WEST WOODSTOCK, GA 30188		PC	GENERAL SUPPORT	5,020
FRIENDS OF BOSTON'S HOMELESS 12 WISE ST JAMAICA PLAIN, MA 02130		PC	GENERAL SUPPORT	1,000
GRUBSTREET162 BOYLSTON ST FL 5 BOSTON, MA 02116		PC	GENERAL SUPPORT	200,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
I2LEARNING FOUNDATION 610 WEST END AVENUE APT 7A NEW YORK, NY 10024		PC	GENERAL SUPPORT	1,160,000
ISABELLA STEWART GARDNER MUSEUM 25 EVANS WAY BOSTON, MA 02115		PC	GENERAL SUPPORT	135,106
JUST - A - START 1035 CAMBRIDGE ST UNIT 12 CAMBRIDGE, MA 02141		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MASSACHUSETTS BIOTECHNOLOGY EDUCATION FOUNDATION 300 TECHNOLOGY SQ FL 8 CAMBRIDGE, MA 02139		PC	GENERAL SUPPORT	25,000
MASSACHUSETTS COALITION FOR THE HOMELESS 73 BUFFUM ST LYNN, MA 01902		PC	GENERAL SUPPORT	10,000
MUSEUM OF SCIENCE1 SCIENCE PARK BOSTON, MA 021141099		PC	GENERAL SUPPORT	215,500
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OPERATION GRATITUDEPO BOX 260257 ENCINO, CA 914260257		PC	GENERAL SUPPORT	15,000
PINE STREET INN444 HARRISON AVE BOSTON, MA 02118		PC	GENERAL SUPPORT	25,000
PROJECT CITIZENSHIP 4 FANEUIL SOUTH MARKET FL 3 BOSTON, MA 02109		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REBUILDING TOGETHER BOSTON 17 LENISTON ST ROSLINDALE, MA 02131		PC	GENERAL SUPPORT	5,000
RIZE MASSACHUSETTS 101 HUNTINGTON AVE STE 1300 BOSTON, MA 02199		PC	GENERAL SUPPORT	125,000
RONALD MCDONALD HOUSE CHARITIES INC 110 N CARPENTER ST CHICAGO, IL 606072101		PC	GENERAL SUPPORT	1,215,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SCIENCE DELIVERED4925 PANAMA PL SAN DIEGO, CA 92116		PC	GENERAL SUPPORT	2,805
SOUTH BOSTON NEIGHBORHOOD HOUSE 136 H ST BOSTON, MA 02127		PC	GENERAL SUPPORT	5,000
THE MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA ST STE 540 HOME BASE BOSTON, MA 021141101		PC	GENERAL SUPPORT	416,180
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED WAY OF MASS BAY 51 SLEEPER ST BOSTON, MA 02210		PC	GENERAL SUPPORT	18,600
ZEPHYR EDUCATION FOUNDATION 54 WIDGEON RD FALMOUTH, MA 02540		PC	GENERAL SUPPORT	25,000
MARY AALBUE - ADELPHI UNIVERSITY OFFICE OF STUDENT FINANCIAL SERVICE LEVERMORE HALL LOWER LEVEL 1 S AV GARDEN CITY, NY 115300701	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOY ARNOLD - ARIZONA STATE UNIVERSITY FINANCIAL AID AND SCHOLARSHIP SERVI PO BOX 870412 TEMPE, AZ 85287	NONE	I	SCHOLARSHIP RECIPIENT	5,000
VINCENT ACEDO-HOLMQUIST - ARIZONA STATE UNIVERSITY FINANCIAL AID AND SCHOLARSHIP SERVI PO BOX 870412 TEMPE, AZ 85287	NONE	I	SCHOLARSHIP RECIPIENT	5,000
BRYCE CORNELL - AUBURN UNIVERSITY MAIN CAMPUS SCHOLARSHIP/FINANCIAL AID- JILL KEB 108 MARY MARTIN HALL AUBURN, AL 36849	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMBROSE BEAN - AVE MARIA UNIVERSITY ATTN CASHIER 5050 AVE MARIA BLVD AVE MARIA, FL 34142	NONE	I	SCHOLARSHIP RECIPIENT	5,000
REGAN STIGALL - BAYLOR UNIVERSITY CASHIERS OFFICE ONE BEAR PLACE 97048 WACO, TX 76798	NONE	I	SCHOLARSHIP RECIPIENT	5,000
NATHAN LEADERS - BELLEVUE UNIVERSITY 1000 GALVIN ROAD SOUTH BELLEVUE, NE 68005	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LINDA BERTRAND - BENEDICTINE UNIVERSITY BUSINESS OFFICE 5700 COLLEGE ROAD LISLE, IL 60532	NONE	I	SCHOLARSHIP RECIPIENT	5,000
BRAYDEN MERRILL - BRIGHAM YOUNG UNIVERSITY BYU OFF-CAMPUS SCHOLARSHIPS A-41 ASB PROVO, UT 84602	NONE	I	SCHOLARSHIP RECIPIENT	5,000
AVERY JONES - BRIGHAM YOUNG UNIVERSITY BYU OFF-CAMPUS SCHOLARSHIPS A-41 ASB PROVO, UT 84602	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KAYLA MORGAN - BROWN UNIVERSITY BOX 1839 PROVIDENCE, RI 02912	NONE	I	SCHOLARSHIP RECIPIENT	5,000
JULIE LYONS - CABRINI COLLEGE CAVALIER EXPRESS CENTER 610 KING OF PRUSSIA ROAD RADNOR, PA 19087	NONE	I	SCHOLARSHIP RECIPIENT	5,000
SOPHIE MALCHUS-CALIFORNIA STATE UNI-NORTHRIDGE UNIVERSITY CASH SERVICES 18111 NORDHOFF STREET NORTHRIDGE, CA 913308214	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ISAAC RIZOR - CALIFORNIA UNI OF PENNSYLVANIA BURSARS OFFICE 250 UNIVERSITY AVENUE BOX 83 CALIFORNIA, PA 15419	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ADEN HALPERN - CARNEGIE MELLON UNIVERSITY STUDENT ACCOUNTS OFFICE 5000 FORBES AVENUE WARNER HALL A19 PITTSBURGH, PA 15213	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MAKENZIE DIEDRICH - CEDARVILLE UNIVERSITY 251 N MAIN ST CEDARVILLE, OH 45314	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOEL WALSH-CITADEL MILITARY COLLEGE SOUTH CAROLINA THE CITADEL ATTN TREASURER 171 MOULTRIE STREET CHARLESTON, SC 294096570	NONE	I	SCHOLARSHIP RECIPIENT	5,000
EMMA CANNING - COLLEGE OF THE HOLY CROSS OFFICE OF THE BURSAR 1 COLLEGE STREET WORCESTER, MA 016102395	NONE	I	SCHOLARSHIP RECIPIENT	5,000
PAIGE ELLENS - DUKE UNIVERSITY CASHIERING OFFICE BOX 90759 DURHAM, NC 27708	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KAYLEE REYNOLDS - EAST ARKANSAS COMMUNITY COLLEGE FINANCIAL AID 1700 NEWCASTLE ROAD FORREST CITY, AR 72335	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ALEXI KEHOE - EMMANUEL COLLEGE OFFICE OF STUDENT FINANCIAL SERVICE 400 THE FENWAY BOSTON, MA 02115	NONE	I	SCHOLARSHIP RECIPIENT	5,000
DAVID CARPENTER - FRANKLIN COLLEGE OFFICE OF FINANCIAL AID 101 BRANIGIN BLVD FRANKLIN, IN 46131	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KAITLYN ROSE - GEORGE MASON UNIVERSITY STUDENT ACCOUNTS 4400 UNIVERSITY DRIVE MS 2E2 FAIRFAX, VA 22030	NONE	I	SCHOLARSHIP RECIPIENT	5,000
JENNIFER STROBLE - GEORGIA STATE UNIVERSITY PO BOX 5099 ATLANTA, GA 30302	NONE	I	SCHOLARSHIP RECIPIENT	5,000
CHRISTA LUX - GRAND CANYON UNIVERSITY OFFICE OF FINANCIAL AID 3300 W CAMELBACK ROAD PHOENIX, AZ 85017	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
LINDSEY HOSKINS - HANOVER COLLEGE 517 BALL DRIVE HANOVER, IN 47243	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MICHAEL MICCIOLI - HARVARD UNIVERSITY HARVARD UNIVERSITY STUDENT ACCOUNTS 801 SMITH CAMPUS CENTER 1350 MASSA CAMBRIDGE, MA 02138	NONE	I	SCHOLARSHIP RECIPIENT	5,000
BETHANY KHARRAZI - HOBART WILLIAM SMITH COLLEGES CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH, PA 15213	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RACHEL WALL - LOUISIANA STATE UNIVERSITY LSU BURSAR OPERATIONS 125 THOMAS BOYD HALL BATON ROUGE, LA 70803	NONE	I	SCHOLARSHIP RECIPIENT	5,000
FRANCESCA WEIS - LOUISIANA TECH UNIVERSITY OFFICE OF THE COMPTROLLER PO BOX 7924 RUSTON, LA 71272	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ELIZABETH LONG - MANSFIELD UNI OF PENNSYLVANIA 31 SOUTH ACADEMY ST MANSFIELD, PA 16933	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRITTANY MCCULLOUGH - MESSIAH COLLEGE ONE COLLEGE AVE MECHANICSBURG, PA 17055	NONE	I	SCHOLARSHIP RECIPIENT	5,000
HENRY ROBBINS - MIAMI UNIVERSITY- OXFORD MIAMI UNIVERSITY BURSAR CAMPUS AVENUE BUILDING 301 S CAMP OXFORD, OH 45056	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MITCHELL HILBRANDT - MICHIGAN STATE UNIVERSITY 556 E CIRCLE DR ROOM 252 EAST LANSING, MI 48824	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REBECCA WITTE - MICHIGAN STATE UNIVERSITY 556 E CIRCLE DR ROOM 252 EAST LANSING, MI 48824	NONE	I	SCHOLARSHIP RECIPIENT	5,000
HOLLY WALSH - MIDDLE TENNESSEE STATE UNIVERSITY SCHOLARSHIP 1301 EAST MAIN STREET MURFREESBORO, TN 37132	NONE	I	SCHOLARSHIP RECIPIENT	5,000
JACOB WARREN - MISSISSIPPI STATE UNIVERSITY SPONSORED STUDENTS PO BOX 5316 MISSISSIPPI STATE, MS 39762	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ELIZABETH HIGH - MOUNT HOLYOKE COLLEGE STUDENT FINANCIAL SERVICES 50 COLLEGE STREET SOUTH HADLEY, MA 010751492	NONE	I	SCHOLARSHIP RECIPIENT	5,000
SIERRA LEWIS - MOUNT VERNON NAZARENE UNIVERSITY MOUNT VERNON STUDENT FINANCIAL SERV 800 MARTINSBURG ROAD MOUNT VERNON, OH 43050	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MCKENNA POZSGAI - MT HOOD COMMUNITY COLLEGE 26000 SE STARK ST GRESHAM, OR 97030	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MIKENZIE ROBERTS - NORTHWESTERN UNIVERSITY NORTHWESTERN UNIVERSITY STUDENT FIN 1ST FLOOR 555 CLARK STREET EVANSTON, IL 60208	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MATTHEW SAUTTER-ROCHESTER INSTITUTE OF TECHNOLOGY STUDENT FINANCIAL SERVICES 25 LOMB MEMORIAL DRIVE ROCHESTER, NY 146235603	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MAGGIE DONOVAN - SAINT ANSELM COLLEGE FINANCIAL SERVICES BILLING 100 SAINT ANSELM DRIVE 1733 MANCHESTER, NH 03102	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAMBRIA BABBITT - SEATTLE PACIFIC UNIVERSITY STUDENT FINANCIAL SERVICES 3307 THIRD AVENUE WEST SUITE 114 SEATTLE, WA 981191922	NONE	I	SCHOLARSHIP RECIPIENT	5,000
HANNAH ROGERS - SOUTH DAKOTA STATE UNIVERSITY SDSU CASHIERS OFFICE SAD 136 BOX 2201 BROOKINGS, SD 57007	NONE	I	SCHOLARSHIP RECIPIENT	5,000
SYDNEY HARGROVE - TEXAS A & M UNIVERSITY FINANCIAL AID PO BOX 30016 COLLEGE STATION, TX 77842	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KATELYN STERNER - THE UNIVERSITY OF ALABAMA STUDENT ACCOUNT SERVICES BOX 870120 TUSCALOOSA, AL 35487	NONE	I	SCHOLARSHIP RECIPIENT	5,000
CAMERON MAHANKE - THE UNIVERSITY OF ALABAMA STUDENT ACCOUNT SERVICES BOX 870120 TUSCALOOSA, AL 35487	NONE	I	SCHOLARSHIP RECIPIENT	5,000
GABRIELLE CAPESIUS - THE UNI OF TEXAS AT AUSTIN STUDENT ACCOUNTS RECEIVABLE PO BOX 7398 AUSTIN, TX 787137398	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HAYLEY ZUPANCIC-UNIVERSITY OF CALIFORNIA-BERKELEY FINANCIAL AID 201 SPROUL HALL 1960 BERKELEY, CA 94720	NONE	I	SCHOLARSHIP RECIPIENT	5,000
WILLIAM WARD - UNIVERSITY OF CALIFORNIA-BERKELEY FINANCIAL AID 201 SPROUL HALL 1960 BERKELEY, CA 94720	NONE	I	SCHOLARSHIP RECIPIENT	5,000
CLAY CATLIN - UNIVERSITY OF CHICAGO UNIVERSITY OF ILLINOIS PAYMENT CENT 28393 NETWORK PLACE CHICAGO, IL 606731283	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NICOLE GILL - UNIVERSITY OF DELAWARE STUDENT SERVICES BUILDING 30 LOVETT AVENUE NEWARK, DE 19715	NONE	I	SCHOLARSHIP RECIPIENT	5,000
OWEN BUBCZYK - UNIVERSITY OF DELAWARE STUDENT SERVICES BUILDING 30 LOVETT AVENUE NEWARK, DE 19715	NONE	I	SCHOLARSHIP RECIPIENT	5,000
KATHERINE RIPPON - UNIVERSITY OF DELAWARE STUDENT SERVICES BUILDING 30 LOVETT AVENUE NEWARK, DE 19715	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOGAN KELLY - UNIVERSITY OF GEORGIA HOLMES-HUNTER ACADEMIC BUILDING 101 HERTY DR ATHENS, GA 30606	NONE	I	SCHOLARSHIP RECIPIENT	5,000
LOGAN TWOHEY - UNI OF ILLINOIS AT URBANA-CHAMPAIGN 620 E JOHN ST CHAMPAIGN, IL 61820	NONE	I	SCHOLARSHIP RECIPIENT	5,000
JACOB FELDMANN - UNIVERSITY OF IOWA UI SERVICE CENTER 2700 UNIVERSITY CAPITOL CENTRE IOWA CITY, IA 52242	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MONTGOMERY MCBEE - UNIVERSITY OF KENTUCKY STUDENT ACCOUNT SERVICES 18 FUNKHOUSER BUILDING LEXINGTON, KY 405060054	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ELYSE DOMINGUE - UNIVERSITY OF LOUISIANA-LAFAYETTE PO BOX 44444 LAFAYETTE, LA 70504	NONE	I	SCHOLARSHIP RECIPIENT	5,000
STEPHANIE JOHNSON-UNIVERSITY OF MICHIGAN-ANN ARBOR UNIVERSITY OF MICHIGAN OFFICE OF FI 2500 STUDENT ACTIVITIES BLDG 515 E ANN ARBOR, MI 48109	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CADEN PROCTOR - UNIVERSITY OF MICHIGAN-ANN ARBOR UNIVERSITY OF MICHIGAN OFFICE OF FI 2500 STUDENT ACTIVITIES BLDG 515 E ANN ARBOR, MI 48109	NONE	I	SCHOLARSHIP RECIPIENT	5,000
KIRA WOODHOUSE - UNIVERSITY OF MICHIGAN-ANN ARBOR UNIVERSITY OF MICHIGAN OFFICE OF FI 2500 STUDENT ACTIVITIES BLDG 515 E ANN ARBOR, MI 48109	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MICAELA VAUGHN - UNIVERSITY OF MISSOURI-COLUMBIA CASHIERS OFFICE 325 JESSE HALL COLUMBIA, MO 65211	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CARTER BAUTCH - UNIVERSITY OF NEBRASKA-LINCOLN FINANCIAL AID PO BOX 880411 LINCOLN, NE 685880411	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ZACHERY SCHEIB - UNIVERSITY OF NEW HAMPSHIRE 11 GARRISON AVENUE DURHAM, NH 03824	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ZOE SCHROEDER - UNIVERSITY OF NORTH CAROLINA STUDENT ACCOUNTS 1 UNIVERSITY HEIGHTS 003 RAMSEY LI ASHEVILLE, NC 28804	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WILLIAM RINK - UNIVERSITY OF NORTHERN COLORADO CAMPUS BOX 28 501 20TH ST GREELEY, CO 80639	NONE	I	SCHOLARSHIP RECIPIENT	5,000
PAYTON MORRIS - UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST OFFICE ROOM 221 FRA PHILADELPHIA, PA 191046270	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ELSE MAYO - UNIVERSITY OF PUGET SOUND STUDENT FINANCIAL SERVICES 1500 N WARNER ST CBM 1039 TACOMA, WA 984161039	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ▶ 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HAYDEN JENKINS - UNIVERSITY OF SOUTH ALABAMA OFFICE OF FINANCIAL AID 390 ALUMNI CIRCLE MEISLER HALL SUIT MOBILE, AL 36688	NONE	I	SCHOLARSHIP RECIPIENT	5,000
RILEY COLEMAN - UNI OF SOUTH CAROLINA-COLUMBIA BURSAR - USC ID J90679736 1244 BLOSSOM STREET - SUITE 128 COLUMBIA, SC 29208	NONE	I	SCHOLARSHIP RECIPIENT	5,000
CODY JONES - UNIVERSITY OF SOUTH FLORIDA PO BOX 864571 ORLANDO, FL 328864571	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TAYLOR KING - UNIVERSITY OF UTAH FINANCIAL AID 201 SOUTH 1460 EAST ROOM 105 SALT LAKE CITY, UT 84112	NONE	I	SCHOLARSHIP RECIPIENT	5,000
KELLY EDDY - UNIVERSITY OF VERMONT 223 WATERMAN BUILDING 85 SOUTH PRO BURLINGTON, VT 05405	NONE	I	SCHOLARSHIP RECIPIENT	5,000
EVAN WAARA - UNIVERSITY OF WASHINGTON UNIVERSITY OF WASHINGTON - SCHOLARS PO BOX 24967 SEATTLE, WA 981241967	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ELYSE MANCILLA - UNIVERSITY OF WISCONSIN-MADISON FINANCIAL OFFICE 333 E CAMPUS MALL 9701 MADISON, WI 53715	NONE	I	SCHOLARSHIP RECIPIENT	5,000
ZOE GARVEY - VIRGINIA POLYTECHNIC INSTITUTE STUDENT SERVICES BUILDING 800 WASHINGTON STREET SW SUITE 150 BLACKSBURG, VA 24061	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MARCO ROSALES - WESTERN WASHINGTON UNIVERSITY STUDENT BUSINESS OFFICE MS9004 516 HIGH STREET BELLINGHAM, WA 98225	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THOMAS STIGALL - UNIVERSITY OF TEXAS AT AUSTIN UNIVERSITY OF TEXAS AT AUSTIN STUDE PO BOX 7398 AUSTIN, TX 787137398	NONE	I	SCHOLARSHIP RECIPIENT	5,000
SEAN SMITH - DALHOUSIE UNIVERSITY 6299 SOUTH ST 44 PO BOX 15000 HALIFAX, NOVA SCOTIA B3H 4R2 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
AARON HART - QUEEN'S UNIVERSITY 74 UNION STREET GORDON HALL KINGSTON, ONTARIO K7L 3N6 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRENDAN SMITH - CAPE BRETON UNIVERSITY 1250 GRAND LAKE ROAD SYDNEY, NOVA SCOTIA B1M 1A2 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
JESSIE SYLVAIN - TRINITY WESTERN UNIVERSITY 7600 GLOVER ROAD LANGLEY, BRITISH COLUMBIA V2Y 1Y1 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
KARLEEN MUHLEGG - MCGILL UNIVERSITY 3600 MCTAVISH ST STE 3200 MONTREAL, QUEBEC H3A 0G3 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total			▶ 3a	6,773,915

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LEAH BOURQUE - QUEEN'S UNIVERSITY 74 UNION STREET GORDON HALL KINGSTON, ONTARIO K7L 3N6 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
MIRIAM SCHROEDER - SAINT MARY'S UNIVERSITY 923 ROBIE STREET HALIFAX, NOVA SCOTIA B3H 3C3 CA	NONE	I	SCHOLARSHIP RECIPIENT	5,000
Total ► 3a				6,773,915

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: The Vertex Foundation Inc

EIN: 82-3101518

TY 2019 General Explanation Attachment**Name:** The Vertex Foundation Inc**EIN:** 82-3101518**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	FORM 990-PF, PART II, BALANCE SHEET	FORM 990PF, PART II, line 17 and line 20	THE PART II, LINES 17 AND 20 BEGINNING BALANCES WERE ADJUSTED FROM THE PRIOR YEAR RETURN AS FILED TO RECLASS ACCRUED EXPENSES FROM PART II, LINE 22 TO PART II, LINE 17

TY 2019 Other Decreases Schedule

Name: The Vertex Foundation Inc
EIN: 82-3101518

Description	Amount
FOREIGN CURRENCY TRANSACTION ADJUSTMENTS	1,101

TY 2019 Other Expenses Schedule**Name:** The Vertex Foundation Inc**EIN:** 82-3101518**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BOSTON DAY OF SERVICE	90,000	0	0	90,000
INTERNATIONAL DAY OF SERVICE	80,900	0	0	80,900
DAY OF SERVICE PROMO MATERIALS	11,476	0	0	9,918
SERVICE CONTRACT	48,850	0	0	48,850
UNITED WAY BOARD SVS TRAIN	9,000	0	0	9,000
STATE OF CALIFORNIA	632	0	0	632

TY 2019 Other Professional Fees Schedule**Name:** The Vertex Foundation Inc**EIN:** 82-3101518

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ISTS ADMIN AND WEBSITE DESIGN	2,202	0	0	2,202

TY 2019 Taxes Schedule**Name:** The Vertex Foundation Inc**EIN:** 82-3101518

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
VAT TAX	132	0	0	132
FRANCHISE TAX	25	0	0	25

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047
		2019
Name of the organization The Vertex Foundation Inc		Employer identification number 82-3101518

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
The Vertex Foundation IncEmployer identification number
82-3101518**Part I****Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE BOSTON, MA 02210	\$ 10,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)

Name of organization The Vertex Foundation Inc	Employer identification number 82-3101518
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions) Use duplicate copies of Part II if additional space is needed</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<div></div> <div></div> <div></div> <div></div>	<div></div> \$	

Name of organization The Vertex Foundation Inc	Employer identification number 82-3101518
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	