2949322608009

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

Inspection

	A F	or the	2019 calendar year, or tax year beginning $$	ending (JUN 30, 2020	
	Bca	heck if pplicable	C Name of organization	_	D Employer identifi	cation number
		Addres	- LEIDLEI COLLEGE FUND USA, INC		12 61500	4.0
	LX	Name change			13-61590	40
	\vdash]initial return]Final return/	Number and street (or P.O. box if mail is not delivered to street address) 55 BEDFORD AVENUE	Room/suite	E Telephone numbe	2500
	_	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,980,714.
	\vdash	_return ∏Applic	BUFFALO, NI 14210	EN	H(a) Is this a group re	
	_	⊥tion pendir	F Name and address of principal officer. ADDRAMODIR C.O. IMMO	for subordinates		
		•	empt status	· ()	H(b) Are all subordinates in	list. (see instructions)
Sh	1 1	ax-exe	e: ► WWW.RIDLEY.ON.CA		H(c) Group exemptio	
じン			organization: X Corporation	I Vear		A State of legal domicile: NY
16		rt I	Summary	1 1 1001	orionnacon: 22021	y cate of logar commons.
(7	_			OVIDI	E EDUCATIONA	L
	Activities & Governance	;	ASSISTANCE TO STUDENTS.			
	ern		Check this box 🕨 📖 if the organization discontinued its operations or dispose	ed of mor	e than 25% of its net as	ssets.
	Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	14
	ಳ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14
~1	ies	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	0
2022	ivit		Total number of volunteers (estimate if necessary)		6	
2	Act		Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
2		b	Net unrelated business taxable income from Form 990-T, line 39		7b	
			0	-	Prior Year 497,036.	Current Year 381,617.
FEB	ne		Contributions and grants (Part VIII, line 1h)	-	497,030.	0.
	Revenue	ŀ	Program service revenue (Part VIII, line 2g)	-	216,549.	223,625.
	Be	,	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	210,545.	0.
Ž			Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	713,585.	605,242.
SCANNED			Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		342,000.	778,000.
\mathcal{Z}		1	Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)	⊢	0.	0.
S	"	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.
	pen	ĺ		0.		
	EX		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		68,641.	69,693.
			Total expenses Add lines 13-17 (must equal Part-IX-column (A)-filine 25)		410,641.	847,693.
8		19	Revenue less expenses Subtract line 18 from line 12		302,944.	-242,451.
599018	ces			В	eginning of Current Year	End of Year
3	sets		Total assets (Part X, line 16)	-	7,132,298.	6,915,548.
12	ABS		Total liabilities (Part X, line 26)		0.	0.
72>	Fund B		Net assets or fund balances Subtract line 21 from line 20		7,132,298.	6,915,548.
$\overline{\sim}$	Pa		Signature Block			
2021			lties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
ေခ	true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch prepare	r has any knowledge.	
-			N Aldra		10/23/2020	
HUG	Sigr	1	Signature or officer		Date	
£	Her	е	ALEXANDER C.O. HANSEN, TREASURER		_ _	
M			Type or print name and title		Data	TT BTIN
M			Print/Type preparer's name Preparer's signature		Date Check	PTIN
(S)	Paid		EUGENE G. KERSHNER EUGENE G. KERSHN	10/20/20 If self-employ		
75	Prep		Firm's name CHIAMPOU TRAVIS BESAW & KERSHNER		Firm's EIN	16-1468002
91	Use	Only	Firm's address 45 BRYANT WOODS NORTH		D. 71	6 630-2400
<u>क</u>			AMHERST, NY 14228		Phone no. / 1	6-630-2400
N			S discuss this return with the preparer shown above? (see instructions)			X Yes No Form 990 (2019)
5	93200	01 01-2	D-20 LHA For Paperwork Reduction Act Notice, see the separate instruction	ns.	/n	Form 330 (2019)

Forn	1 990 (2019) RIDLEY COLLEGE FUND USA, INC	13-6159040 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission TO PROVIDE EDUCATIONAL ASSISTANCE TO STUDENTS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported	rs, the total expenses, and
4a	(Code) (Expenses \$ 781,558 · including grants of \$ 778,000 ·) (Revenue	381,617.)
70	THE FUND MANAGES THE ENDOWED ASSETS USED TO GRANT SCHOLA	
		IE FUND ALSO
	OFFERS FINANCIAL ASSISTANCE TO RIDLEY COLLEGE (A NOT FOR	PROFIT PRIVATE
		THE CURRENT
	YEAR, THE FUND DISTRIBUTED 22 SCHOLARSHIPS/BURSARIES TO	STUDENTS OF
	RIDLEY COLLEGE.	
4b	(Code) (Expenses \$	e \$)
		·
4c	(Code) (Expenses \$	ə\$)
		
4d	Other program services (Describe on Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 781,558.	
		Form 990 (2019)

Part IV Checklist of Required Schedules RIDLEY COLLEGE FUND USA, INC

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
_	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	·		
J	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		X
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," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		х
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
3	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		1	
a	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	,	440		х
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
U	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

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Part IV Checklist of Required Schedules (continued) RIDLEY COLLEGE FUND USA, INC

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23		х
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	 	
248	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		ļ	
	Schedule K. If "No," go to line 25a	24a	İ	Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_
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-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		 -
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			ļ
	instructions, for applicable filing thresholds, conditions, and exceptions)		•	İ
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			x
_	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b	 	X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f	200		
·	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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	35b	L	
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	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	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	х	
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			l
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter ·0· if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b. 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	١.	v	
	(gambling) winnings to prize winners?	1c_	X	(2010)

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			V	N ₁ -
٥-	Fata-than sumber of ampleyage reported on Form W.2. Transmittel of Wage and Tay Statements		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
.	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
U	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		\mathbf{x}
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
-	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х.
b	If "Yes," enter the name of the foreign country			\Box
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		L
6a	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		<u> </u>
þ	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).			$\left[\frac{1}{\mathbf{x}}\right]$
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_ ^ _
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			х
	to file Form 8282?	7c		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year	70	<u> </u>	
e		7e 7f		\vdash
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		\vdash
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		\Box
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			1 1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			1 1
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b	12a	$\vdash \vdash \vdash$	· ·
		1		j }
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		<u>'</u>
а	Note: See the instructions for additional information the organization must report on Schedule O	100		<u> </u>
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans			
c	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 on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O			1
		Form	990	(2019)

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 on Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management						
		-	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 14	Ŀ					
	If there are material differences in voting rights among members of the governing body, or if the governing		1				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O		Ì				
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14	<u> </u>	l	•			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2	X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, trustees, or key employees to a management company or other person?	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6		Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	۱_		v			
	more members of the governing body?	7a	 	Х			
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			х			
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		_			
8	The governing body?	8a	x				
a b	Each committee with authority to act on behalf of the governing body?	8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00					
•	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	}	х				
	2a Did the organization have a written conflict of interest policy? If "No," go to line 13						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
46	In Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	X				
14 15	Did the organization have a written document retention and destruction policy?	14	<u> </u>				
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?						
	The organization's CEO, Executive Director, or top management official	15a		Х			
	Other officers or key employees of the organization	15b	\vdash	X			
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	<u> </u>					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
	tion C. Disclosure						
	List the states with which a copy of this Form 990 is required to be filed ► NY						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) avaıla	able			
	for public inspection. Indicate how you made these available. Check all that apply						
	Own website						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d fınar	ncial				
•	statements available to the public during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's books and records THOTHY I COPETI - 617-443-1120						
	TIMOTHY J. COFFIN - 617-443-1120 55 BEDFORD AVENUE, BUFFALO, NY 14216						
	SO DEDICKE AVERGE, DOLLARO, MI 14210	Form	aan (20101			

Form 990 (2019)

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

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

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

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

 See instructions for the order in which to list the persons above

Name and title	Check this box if neither the organizat (A)	(B)			(0	C)			(D)	(E)	(F)
hours per week week (itst any hours for related organizations below line)	• •	1 ' '	_ر, ا	Position			1		1 ' '	Reportable	Estimated
Name		1 -	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
(1) TIMOTHY J. COFFIN			\vdash	cer an	nd a d	Irecto	ctor/trustee)				
(1) TIMOTHY J. COFFIN		1 '	rector					l	I .	_	compensation
TIMOTHY J. COFFIN			p io a	<u></u>			sated	ŀ	. •	(VV-2/1099-IVIISC)	
(1) TIMOTHY J. COFFIN			traste	al trus		ag.	mpen	l	(** 2, 1000 111100)		and related
(1) TIMOTHY J. COFFIN		1 *	qaq	upou	_	a e	est co oyee	20			organizations
TIMOTHY J. COFFIN			A P	Instit) Jijo	Key	Hgh	Form			
C(2) WILLIAM S. CLEARY	(1) TIMOTHY J. COFFIN	0.30									_
VICE PRESIDENT	PRESIDENT		X		Х				0.	0.	0.
(3) ROBERT M. WILSON JR.	(2) WILLIAM S. CLEARY	0.30								•	
X	VICE PRESIDENT		Х		Х		<u> </u>		0.	0.	0.
Color	(3) ROBERT M. WILSON JR.	0.30		l				ŀ	_	_	_
DIRECTOR	SECRETARY		Х		Х		L.		0.	0.	0.
Director Color	(4) PETER B. COFFIN	0.30]	İ							_
Director X			X	L			<u> </u>		0.	0.	0.
O	(5) JAMES C. ROGERS	0.30	1								_
Director X			X		<u> </u>		lacksquare	_	0.	0.	0.
O		0.30	1								
DIRECTOR			X	Ш		_	L		0.	0.	0.
O		0.30	١							•	•
DIRECTOR			X.		_		<u> </u>	_	0.	0.	0.
(9) ALEXANDER C.O. HANSEN TREASURER (10) MICHELLE M. MANDEVILLE DIRECTOR (11) BRUCE L. CARROW DIRECTOR (12) BRITT FRANKLIN DIRECTOR (13) BRIAN IGGULDEN DIRECTOR (14) HAL WILSON O. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		0.30								•	0
TREASURER			X		H	<u> </u>	╙	<u> </u>	<u> </u>	0.	0.
Column C		0.30	Į.,		.	1				0	0.
DIRECTOR X			ΙΔ.	_	Λ	<u> </u>		ļ	U .	U •	0.
Columbia		0.30	₩.						_	n	0.
DIRECTOR X		0.30	_		├-	├	\vdash	<u> </u>	0.	~	- 0 •
(12) BRITT FRANKLIN		0.30	v						<u> </u>	n	0.
DIRECTOR X		0 30	<u> </u>				\vdash		- 0.		•
(13) BRIAN IGGULDEN		0.30	x		ŀ				0.5	0.	0.
DIRECTOR X 0. 0. (14) HAL WILSON 0.30		0.30	^			_	├┈				
(14) HAL WILSON 0.30		0.30	x						0.	0.	0.
		0.30		\vdash	H	\vdash	\vdash				
		- 0.30	x						0.	0.	0.
			ᢡ	\vdash	\vdash	\vdash	+			•	
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			1								
-						<u> </u>	Π				
	-		1								

Form 990 (2019) RIDLEY C									13-61	590	40	Pa	age 8
Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A) Name and title	(B) Average hours per week	offi	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than	th an	(D) Reportable compensation from	(E) Reportable compensation from related	1	Esti amo	(F) mate ount o ther	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer	the organization (W-2/1099-MISC)	C)	orga	m the nızatı relate	ed	
		<u> </u>	Ĕ	5	, Š	₹5	ਣ						
										\top			
											_		
										\downarrow			
		_								\downarrow			
						_				\downarrow			
1b Subtotal		<u></u>				<u> </u>		0.		0.			0.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
 d Total (add lines 1b and 1c) Total number of individuals (including but incompensation from the organization 	not limited to th	ose	liste	ed at	bove	e) wh	no re						(
compensation from the organization								· · · - ··			Y	es	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			кеу б	empl	loye	e, oı	r higl	hest compensated emp	loyee on		3		x
4 For any individual listed on line 1a, is the s	•							•	the organization		4		х
and related organizations greater than \$15 Did any person listed on line 1a receive or	accrue comper	nsati	ion f	rom	any	unr			dual for services				
rendered to the organization? If "Yes," con Section B. Independent Contractors	npiete Scheaul	e J r	or su	JCN J	pers	ion				<u> </u>	5		X
 Complete this table for your five highest co the organization. Report compensation for 	•	•							•	ensat	ion fro	m	
(A)	-					<u> </u>		(B)			(C)		•
Name and business	address	NC	ONE	<u> </u>			\dashv	Description of s	ervices	Cor	mpens	ation	
							+						
•			_				+						
							+				. 		
<u></u>							+						
2 Total number of independent contractors (including but n	ot lır	nite	d to	thos	se lis	ted	above) who received m	ore than				

\$100,000 of compensation from the organization

Pa	rt VI	II Statement of Re	ver	iue			•				
		Check if Schedule O	ont	ains a res	onse	or note to any lin	ne in this l	Part VIII			
								A)	(B)	(C)	(D)
							Totalı	evenue	Related or exempt	Unrelated business revenue	Revenue excluded from tax under
									function revenue	business revenue	sections 512 - 514
S S	1 1	Federated campaigns		1a		_					-
E T	1 a	· -		1b	1						
င် နို	b	•		<u> </u>	-						į
Contributions, Gifts, Grants and Other Similar Amounts	C	•		1c							
	d	· · · · · · · · · · · · · · · · · · ·		<u>1d</u>							
	е	J			-						i
흕	f	All other contributions, gifts,	grant	s, and							i
호美		similar amounts not included	abov	/e 1f		381,617.					Ï
탈	g	Noncash contributions included in	lines	1a-1f 1g	\$						١
a C	h	Total. Add lines 1a-1f						381,617.			ļ
		 				Business Code					
ė	2 a	1									
ا کے ج	b							, <u>.</u>			
Sel	c										
E S	d			-							
Pag		-									
Program Service Revenue	e										,
- 1	f	All other program service	reve	nue							
	9										
	3	Investment income (include	ling	dividends	ınter	est, and		155 202			155 202
		other similar amounts)				>		155,292.			155,292.
	4	Income from investment of	f tax	exempt I	ond p	proceeds -					
	5	Royalties	_			<u> </u>					
				(i) Re	al	(ii) Personal					
	6 a	Gross rents	6a								
	b	Less rental expenses	6ь								,
	С	Rental income or (loss)	6c								
	d	Net rental income or (loss)	_			•					
	7 a	Gross amount from sales of		(ı) Secu	rities	(II) Other					
		assets other than inventory	7a	2,443	,805.						
	h	Less cost or other basis	Ť								
e l		and sales expenses	7b	2,375	472.	1.					
E	^		7c		, 333.						
Other Revenue	ر د		70		,	•		68,333.			68,333.
<u>.</u>	d	Gross income from fundraising	10 AV	ents (not				,			1
ξĺ	ва		iy cv	-	- 1						
١		including \$	L	of							ł
ı		contributions reported on	line	1c) See							1
		Part IV, line 18			8a	1					+
	b	•			86	·					
	С	, ,		_		_	-				
	9 a	Gross income from gamin	g ac	tivities Se				i			
		Part IV, line 19			9a					•	•
	b	Less direct expenses			9ь						
	С	Net income or (loss) from	gam	ing activit	es	<u> </u>					
	10 a	Gross sales of inventory, l	ess	returns							1
1		and allowances			10a	·			•		
	b	Less cost of goods sold			10b						İ
1		Net income or (loss) from	sales	s of invent	orv	•				-	_
						Business Code					
20.	11 a										
Miscellaneous Revenue	b										
188	C	-							<u> </u>		
Σ	d							_			
		Total. Add lines 11a-11d						605,242.	0.	0.	223,625.
	12	Total revenue See instructio	กร			▶		000,444.	١. ٠.	٠.	223,023.

932009 01-20-20

Part IX | Statement of Functional Expenses

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 response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b, Total expenses Management and general expenses Program service expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 778,000 778,000 individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (nonemployees) Management 9,000. 9,000. **b** Legal c Accounting Lobbying Professional fundraising services. See Part IV, line 17 53,114. 53,114 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 7,116. 3,558. 3,558 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 Depreciation, depletion, and amortization 22 23 Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) FILING FEES AND OTHER 463. 463 b All other expenses 781,558. 66,135. 0. 847,693. Total functional expenses. Add lines 1 through 24e Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X		,	
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		543,881.	1	713,472.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	6,280.	4	8,558.	
	5	Loans and other receivables from any current or				
		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
		controlled entity or family member of any of thes	e persons		5	
	6	Loans and other receivables from other disquali	ied persons (as defined			
		under section 4958(f)(1)), and persons described	I in section 4958(c)(3)(B)		6	
şţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a	<u> </u>		
	b	Less accumulated depreciation	10b	5 500 105	10c	<u> </u>
	11	Investments - publicly traded securities	6,582,137.	11	6,193,518.	
	12	Investments - other securities See Part IV, line 1		12		
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets		14	.,-	
	15	Other assets See Part IV, line 11	7 122 200	15	C 015 540	
	16	Total assets. Add lines 1 through 15 (must equa	al line 33)	7,132,298.	16	6,915,548.
	17	Accounts payable and accrued expenses		17		
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities)- 4 N/ - 4 O - L - 4 J - D		20	
	21	Escrow or custodial account liability Complete F			21	
Liabilities	22	Loans and other payables to any current or form				
Ē		trustee, key employee, creator or founder, subst			22	 _
<u>.e</u>		controlled entity or family member of any of thes	·		23	
	23	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated	•		24	
	24 25	Other liabilities (including federal income tax, pa	•			*****
	25	parties, and other liabilities not included on lines			1	
		of Schedule D	17-24) Complete Falt X		25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
	20	Organizations that follow FASB ASC 958, che	ck here X			
es		and complete lines 27, 28, 32, and 33.				
anc	27	Net assets without donor restrictions		7,132,298.	27	6,915,548.
Bal	28	Net assets with donor restrictions			28	
5		Organizations that do not follow FASB ASC 9	58, check here 🕨 🗔			
2		and complete lines 29 through 33.	,			
S O	29	Capital stock or trust principal, or current funds			29	
set	30	Paid-in or capital surplus, or land, building, or eq	uipment fund		30	
As	31	Retained earnings, endowment, accumulated in			31	
Net Assets or Fund Balances	32	Total net assets or fund balances	,	7,132,298.	32	6,915,548.
-	33	Total liabilities and net assets/fund balances		7,132,298.	33	6,915,548.
						Form 990 (2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Part

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

13-6159040 RIDLEY COLLEGE FUND USA, INC Reason for Public Charity Status (All organizations must complete this part) See instructions

he	organ	ization is not a private foundation because it is. (For lines 1 through 12, check only one box.)
1	\sqsubseteq	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,
		crty, and state
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in
		section 170(b)(1)(A)(iv). (Complete Part II)
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in
		section 170(b)(1)(A)(vi). (Complete Part II)
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or
		university
10		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from
		activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment
		income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975
		See section 509(a)(2). (Complete Part III)
11		An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
12		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or
		more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in
		lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
a		Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving
		the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting
		organization. You must complete Part IV. Sections A and B.

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (vi) Amount of other (ı) Name of supported in your governing document (described on lines 1 10 organization support (see instructions) support (see instructions) above (see instructions)) Total

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported

organization(s) You must complete Part IV, Sections A and C.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 RIDLEY COLLEGE FUND USA, INC 13-61590 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received (Do not										
	include any "unusual grants ")	139,445.	119,417.	52,785.	497,036.	381,617.	1,190,300.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	139,445.	119,417.	52,785.	497,036.	381,617.	1,190,300.				
	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,		9								
	column (f)						277,545.				
6	Public support. Subtract line 5 from line 4						912,755.				
	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total				
	Amounts from line 4	139,445.	119,417.	52,785.	497,036.	381,617.	1,190,300.				
8	Gross income from interest,	ŕ			·	-					
_	dividends, payments received on				•						
	securities loans, rents, royalties,										
	and income from similar sources	156,190.	151,208.	161,566.	183,919.	155,292.	808,175.				
9	Net income from unrelated business	,		·			· · · · · · · · · · · · · · · · · · ·				
	activities, whether or not the										
	business is regularly carried on										
10	Other income Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI)										
11	Total support. Add lines 7 through 10						1,998,475.				
	Gross receipts from related activities,	etc. (see instruction	ns)			12					
	First five years. If the Form 990 is for	,	· ·	d fourth or fifth ta	i Ny vear as a section						
	organization, check this box and stop	•	11101, 0000110, 11111	o, 1001111, 01 111111	,		ightharpoons				
Sec	ction C. Computation of Publ	ic Support Per	rcentage	- · · · · · · · · · · · · · · · · · · ·		. —					
	Public support percentage for 2019 (I			olumn (fl)		14	45.67 %				
	Public support percentage from 2018					15	49.76 %				
	33 1/3% support test - 2019. If the o			n line 13, and line 1	ı 14 ıs 33 1/3% orm						
	stop here. The organization qualifies	-				,	$\triangleright X$				
b	33 1/3% support test - 2018. If the c				line 15 is 33 1/3%	or more, check th	-				
_	and stop here. The organization quali					,	ightharpoons				
17a	10% -facts-and-circumstances test	•			13. 16a. or 16b. a	and line 14 is 10%	or more.				
	and if the organization meets the "fac	_									
	meets the "facts-and-circumstances"		•	-	· ·		•				
h	10% -facts-and-circumstances test	_	•		_	7a, and line 15 is 1	10% or				
,	more, and if the organization meets the										
	organization meets the "facts-and-circ										
12	Private foundation. If the organization		-		-						
.0	Titale regulation if the organization	dia not officer a t	CON OFFICE TO, TOE	., .OD, 17 a, O: 17 D		dule A (Form 990					

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

<u>C-</u>	qualify under the tests listed be	low, please comp	plete Part II)				
	ction A. Public Support		T	1			
	ndar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and					!	
	membership fees received (Do not					/	
	include any "unusual grants ")					 	
2	Gross receipts from admissions,	ĺ				/	
	merchandise sold or services per- formed, or facilities furnished in					/	
	any activity that is related to the					/	
	organization's tax-exempt purpose					/	
3	Gross receipts from activities that				/	1	
	are not an unrelated trade or bus-				/		
	iness under section 513				/		
4	Tax revenues levied for the organ-				/		
•	ization's benefit and either paid to						
	or expended on its behalf						
_	· -		_		 		
Э	The value of services or facilities				/		
	furnished by a governmental unit to						
	the organization without charge		<u> </u>		+/		
	Total. Add lines 1 through 5				+/	 	
7a	Amounts included on lines 1, 2, and			İ	/		
	3 received from disqualified persons				A		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that			/			
	exceed the greater of \$5,000 or 1% of the			/			
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support	•••					
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(É) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,			/	Ĭ	-	
	dividends, payments received on			/			
	securities loans, rents, royalties, and income from similar sources			ľ			
	Unrelated business taxable income				_		
	(less section 511 taxes) from businesses		/				
	acquired after June 30, 1975		/				
	· · · · · · · · · · · · · · · · · · ·		- /-			<u> </u>	
	Add lines 10a and 10b Net income from unrelated business		/				<u>. </u>
11	activities not included in line 10b.		/				
	whether or not the business is		/				
	regularly carried on		<i></i>				
12	Other income Do not include gain or loss from the sale of capital		/				
	assets (Explain in Part VI)		/		ļ		
	Total support (Add lines 9, 10c, 11, and 12)				<u> </u>		<u> </u>
14	First five years. If the Form 990 is for t	he organization's	s _i first, second, thir	d, fourth, or fifth t	tax year as a section	ın 501(c)(3) organız	zation,
	check this box and stop here		<u>/</u>				<u>▶</u> ∟
Sec	ction C. Computation of Public	: Support Pé	rcentage			·····	
15	Public support percentage for 2019 (lin	ne 8, column (Ñ, d	divided by line 13,	column (f))		15	
16	Public support percentage from 2018 S	<u>Schedule A,∕Part</u>	III, line 15			16	%
	tion D. Computation of Invest						
17	Investment income percentage for 201	9 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from 20					18	%
	33 1/3% support tests - 2019. If the o	,		on line 14, and lin	e 15 is more than 3	33 1/3%, and line 1	17 is not
	more than 33 1/3%, check this box and	- /					ightharpoons
h	33 1/3% support tests - 2018. If the c						and
	line 18 is not more than 33 1/3%, chec	*					ightharpoons
20	Private foundation. If the organization	,					
	3 09-25-19	/		_,,,,			or 990-EZ) 2019
							•

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)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)			
Sec	tion 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			l
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
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		~
h	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	~~~	
_	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
Ŭ	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
42	Was any supported organization not organized in the United States ("foreign supported organization")? If	•		
74	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
h	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		*****
_	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		
50	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	- "		
Ja	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		1	·
	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	l i		
	was accomplished (such as by amendment to the organizing document)	5a		-
h	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		
c	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			
٠	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			
•	(as 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		
Qa	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		
h	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		
_	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		
102	Was the organization subject to the excess business holdings rules of section 4943 because of section			
.00	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
-	response and the contract of t			

10b

determine whether the organization had excess business holdings)

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov 20, 1970 (explain in	Part VI) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E	
Sec	tion 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		
	non 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)	-		1
_ a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
_ d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
	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		
Sect	on 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	1		
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionall		ted Type III supporting orga	anization (see
-	instructions)	5	,,	`

Schedule A (Form 990 or 990-EZ) 2019

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _(continued)					
Sect	on D - Distributions		<u> </u>	Current Year				
1	Amounts paid to supported organizations to accomplish exe	empt purposes						
2	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 purpos	es of supported organization	ns _					
4	Amounts paid to acquire exempt-use assets		·					
_5	Qualified set-aside amounts (prior IRS approval required)							
6	Other distributions (describe in Part VI) See instructions							
7	Total annual distributions. Add lines 1 through 6							
8	Distributions to attentive supported organizations to which t	the organization is responsive	e					
	(provide details in Part VI) See instructions							
9	Distributable amount for 2019 from Section C, line 6		-					
10	Line 8 amount divided by line 9 amount	T						
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
1	Distributable amount for 2019 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2019 (reason-							
	able cause required- explain in Part VI) See instructions			<u> </u>				
3	Excess distributions carryover, if any, to 2019	ļ	,					
	From 2014							
<u> </u>	From 2015							
c	From 2016							
d	From 2017							
	From 2018							
	Total of lines 3a through e							
	Applied to underdistributions of prior years		<u></u>					
	Applied to 2019 distributable amount							
_ <u>-</u> !	Carryover from 2014 not applied (see instructions)							
	Remainder Subtract lines 3g, 3h, and 3i from 3f							
4	Distributions for 2019 from Section D,							
	line 7 \$	l						
	Applied to underdistributions of prior years			·				
	Applied to 2019 distributable amount Remainder Subtract lines 4a and 4b from 4							
	Remaining underdistributions for years prior to 2019, if							
5	any Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions							
6	Remaining underdistributions for 2019 Subtract lines 3h							
Ü	and 4b from line 1. For result greater than zero, explain in							
	Part VI See instructions							
7	Excess distributions carryover to 2020. Add lines 3							
•	and 4c			ı				
8	Breakdown of line 7			1				
	Excess from 2015			-				
	Excess from 2016							
	Excess from 2017		· - · · · · · · · · · · · · · · · · · ·					
	Excess from 2018		-					
	Excess from 2019		<u> </u>					

Schedule A (Form 990 or 990-EZ) 2019

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

RIDLEY COLLEGE FUND USA TNC Employer identification number 13-6159040

Pa	rt I Organizations Maintaining Donor Advise	-	or Acco	unts.Complete if the
L	organization answered "Yes" on Form 990, Part IV, lin			,-
	ga	(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at end of year			·
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets hold in depar advise	d fundo	
	are the organization's property, subject to the organization's	-	u iuiius	Yes No
6		-	rod only	L Tes L No
0	Did the organization inform all grantees, donors, and donor a for charitable purposes and not for the benefit of the donor of		-	
	impermissible private benefit?	or donor advisor, or for arry other purpose c	onlennig	□ Voc □ No
Pai	t II Conservation Easements. Complete if the org	sanization answered "Ves" on Form 990. Pr	art IV June 7	Yes No
1	Purpose(s) of conservation easements held by the organizati		art IV, IIII 6 /	
•	Preservation of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	historically	r important land area
		· —	-	/ important land area
	Protection of natural habitat	Preservation of a	certified n	istoric structure
_	Preservation of open space			- h h H h h
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form o	a conserv	
	day of the tax year		<u> </u>	Held at the End of the Tax Year
	Total number of conservation easements		2a	
D	Total acreage restricted by conservation easements		2b	
C.	Number of conservation easements on a certified historic stri	, ,	2c	<u> </u>
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structur	t t	1
_	listed in the National Register		2d	<u> </u>
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	organizatio	n during the tax
	year ▶			
4	Number of states where property subject to conservation eas	<u> </u>		
5	Does the organization have a written policy regarding the per	- · · · · · · · · · · · · · · · · · · ·		
	violations, and enforcement of the conservation easements it			L Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation eas	sements during the year
_	<u> </u>			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easeme	nts during the year
	\$			
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(h	ı)(4)(B)(ı)	
	and section 170(h)(4)(B)(ii)?			└── Yes
9	In Part XIII, describe how the organization reports conservation	·		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statemen	nts that de	scribes the
_	organization's accounting for conservation easements		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Pa	t III Organizations Maintaining Collections of		her Simi	lar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		<u></u>
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement an	d balance	sheet works
	of art, historical treasures, or other similar assets held for pub			f public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items	3	
Ь	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	alance she	et works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	rance of p	ublic service,
	provide the following amounts relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X		>	\$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial	gain, provid	de
	the following amounts required to be reported under FASB A	SC 958 relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		•	\$
b	Assets included in Form 990, Part X		•	s

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

932051 10-02-19

Schedule D (Form 990) 2019

Sche		COLLEGE FU						159040 Page 2
Pa	rt III Organizations Maintaining C	Collections of A	rt, Histor	ical Tr	easures, o	or Other	Similar Ass	sets(continued)
3	Using the organization's acquisition, access	on, and other record	ds, check ar	y of the	following that	ıt make sıgı	nificant use of	ts
	collection items (check all that apply)							
а	Public exhibition	C	ı ∐∐ Loa	n or exc	hange progra	am		
b	Scholarly research	•	e LU Oth	er				<u> </u>
С	Preservation for future generations							
4	Provide a description of the organization's c	ollections and expla	n how they	further t	the organizati	on's exemp	ot purpose in P	art XIII
5	During the year, did the organization solicit of	or receive donations	of art, histo	rical trea	sures, or oth	er sımılar a	ssets	
	to be sold to raise funds rather than to be m	aintained as part of	the organiza	ition's c	ollection?			Yes No
Pai	t IV Escrow and Custodial Arran		ete if the or	ganızatıc	on answered '	"Yes" on Fo	orm 990, Part I	V, line 9, or
	reported an amount on Form 990, Pa	rt X, line 21						<u>-</u> .
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for cor	tribution	ns or other as	sets not in	cluded	
	on Form 990, Part X?						L	Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tab	е				
								Amount
С	Beginning balance						1c	
d	Additions during the year						1d	
е	Distributions during the year						1e	
f	Ending balance						1f	
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for esc	row or c	ustodial acco	unt liability	<i>?</i>	Yes No
_	If "Yes," explain the arrangement in Part XIII							
Pai	t V Endowment Funds. Complete	if the organization ar	swered "Ye	s" on Fo	1			
		(a) Current year	(b) Prior	year	(c) Two year	rs back (d	Three years bac	k (e) Four years back
1a	Beginning of year balance				ļ			
þ	Contributions				<u> </u>			
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs						<u> </u>	
f	Administrative expenses				<u> </u>			
g	End of year balance				1			<u> </u>
2	Provide the estimated percentage of the cur	rent year end baland		olumn (a	a)) held as			
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С		%						
	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	ession of the organiz	ation that a	re held a	ind administe	red for the	organization	[] []
	by							Yes No
	(i) Unrelated organizations							3a(i)
	(ii) Related organizations							3a(ii)
b	If "Yes" on line 3a(ı), are the related organiza	-			•			3b
1000	Describe in Part XIII the intended uses of the		owment tun	os				
Par	t VI Land, Buildings, and Equipm		0 D-4 N/ Io		Can Farm 000	Don't V lin	o 10	
	Complete if the organization answere							(a) Deal color
	Description of property	(a) Cost or o		• •	t or other (other)		umulated eciation	(d) Book value
		basis (investi	nem,	Dasis	(otrier)	черге	Ciation	
	Land							
	Buildings						- 	
	Leasehold improvements	-					+	
	Equipment	-						
	Other Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X. column i	B), line 1	10c)		•	0.
			. ,	_,, ,	/			

Schedule D (Form 990) 2019

Part VIII Investments - Other Securities.			
Complete if the organization answered "Yes"			d of war market walks
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or en	d-or-year market value
(1) Financial derivatives			 .
(2) Closely held equity interests			
(3) Other	. —	-	
(A)			
(B)			
(C)			
(D)			
(E)			- ^-
(F)			
(G)			
(H)			
Total (Col (b) must equal Form 990, Part X, col (B) line 12)		<u>. </u>	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			d of year market value
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or en	d-or-year market value
(1)			
(2)			
(3)			······································
(4)			
(5)	-		
(6)	·	*	
(7)			. <u> </u>
(8)			
(9)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	F 000 Dart IV I had	444 Cas Farm 000 Bart V line 15	
Complete if the organization answered "Yes"	on Form 990, Part IV, line Description	Tid See Form 990, Part X, line 15	(b) Book value
	Description		(b) Book value
(1)			-
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	451		
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.	: 15)		<u></u>
	F 000 Dod IV kan	110 or 116 Coo Form 000 Bort V line 26	
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	The of Thi See Form 990, Part A, line 25	(b) Book value
			(b) Book Value
(1) Federal income taxes			
(2)			
(3)	·····		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Column (b) must equal Form 990, Part X, col (B) line		<u></u>	<u></u>
Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under	FASB ASC 740 Check he		
			nedule D (Form 990) 2

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

2019

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990.

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

Open to Public Inspection

Name of the organization

Employer identification number

2 T T	DLEY COLLEGE	FIIND IISA	TNC			13-61590	40
Par				tside the United States. Comple	te if the organ		
	Form 990, Part IV		•				
1			n maintain recor	ds to substantiate the amount of its gra	nts and other	assistance,	
•		_		the selection criteria used to award the			Yes X No
2	For grantmakers, Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	arants and of	ther assistance ou	tside the
	United States						
3				an be duplicated if additional space is n	eeded)		(0 T-4-1
	(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, pro- gram services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, specific type (s) in the region	(f) Total expenditures for and investments in the region
						 	
	•						
	- 1-						
		•	•		· •	-	
							<u> </u>
	Subtotal	0					0.
Ь	Total from continuation sheets to Part I	<u>،</u>	0				0.
c	Totals (add lines 3a			 		· · · · · ·	
-	and 3b)	О .	0		_		0.

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

Schedule F (Form 990) 2019

13-6159040

Schedule F (Form 990) 2019

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

Ĭ Š		·		İ			019
(i) Method of valuation (book, FMV, appraisal, other)							Schedule F (Form 990) 2019
(h) Description of noncash assistance							Sched
(g) Amount of noncash assistance	.0					xempt	
(f) Manner of cash disbursement	ЭНЕСК				•	recognized as tax-e	
(e) Amount of cash grant	778,000.CHECK					foreign country, er	
(d) Purpose of grant	SCHOLARSHIPS AND FINANCIAL ASSISTANCE					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter of other organizations or entities	
(c) Region	CANADA	,				bove that are provided a sec	
(b) IRS code section and EIN (if applicable)						recipient organization the grantee or couother organizations of	
1 (a) Name of organization					·	 2 Enter total number of recipient organizations listed a by the IRS, or for which the grantee or counsel has i 3 Enter total number of other organizations or entities 	

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Schedule F (Form 990) 2019 RIDLEY COLLEGE FUND USA, INC 13-6159040

[Part III] Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16

Part III can be duplicated if additional space is needed 13-6159040

(h) Method of valuation (book, FMV, appraisal, other)			a				Schedule F (Form 990) 2019
(g) Description of noncash assistance							Schedu
(f) Amount of noncash assistance							
(e) Manner of cash disbursement							
(d) Amount of cash grant		-					
(c) Number of cash grant cash grant							
(b) Region							•
(a) Type of grant or assistance (b) Region				•			

"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)

Schedule F (Form 990) 2019

Yes X No

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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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection 📥

Name of the organization

RIDLEY COLLEGE FUND USA, INC

Employer identification number 13-6159040

FORM 990, PART VI, SECTION A, LINE 2:

JOHN AND WILLIAM CLEARY, ROBERT WILSON JR. AND ANDREW WILSON AND TIM AND PETER COFFIN, ARE ALL MEMBERS OF THE BOARD OF DIRECTORS, EACH HAVE A FAMILY RELATIONSHIP AND SUCH RELATIONSHIPS ARE DISCLOSED TO ALL MEMBERS OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

THE MEMBERS OF THE BOARD ARE PROVIDED WITH A COPY TO REVIEW FOR COMPLETENESS AND ACCURACY BEFORE SUBMISSION. SUCH REVIEW AND APPROVAL IS SUBMITTED TO THE ORGANIZATION'S BOARD MINUTES AND DOCUMENTED BY BOARD RESOLUTION.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY EACH BOARD MEMBER OF THE ORGANIZATION IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST AND DISCLOSURE FORM, PROVIDING SUFFICIENT INFORMATION ABOUT HIS/HER PERSONAL INTERESTS AND RELATIONSHIPS SO THE ORGANIZATION CAN 1) DETERMINE WHETHER ANY POTENTIAL OR ACTUAL CONFLICT OF INTEREST MAY EXIST, AND 2)MONITOR SERIVCE ASSIGNMENTS TO AVOID PLACING THE BOARD MEMBER IN A POSITION WHERE THERE MAY BE AN APPEARANCE, POTENTIAL OR ACTUAL, OF A CONFLICT OF INTEREST OR A QUESTION OF OBJECTIVITY. THE COMPLETED CONFLICT OF INTEREST AND DISCLOSURE FORMS ARE RETURNED TO THE ORGANIZATION.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION WILL MAKE ALL APPLICABLE DOCUMENTS AVAILABLE UPON REQUEST AT IT'S OFFICES AT 55 BEDFORD AVENUE, BUFFALO, NY 14216. A NOMINAL FEE IS

CHARGED IF COPIES ARE REQUESTED.

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization RIDLEY COLLEGE FUND USA, INC	Employer identification number 13-6159040
PART XII LINE 2C:	
THE ORGANIZATION HAS A BOARD OF DIRECTORS WHO ACCEPTS ALL	
RESPONSIBILITY FOR THE AUDIT AND THE FINANCIAL STATEMENTS	OF THE
ORGANIZATION. THERE HAS BEEN NO CHANGE.	
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