Form	9	9	0
Departm	nent o	f the	Treasury

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.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

G h Open to Public Inspection

OMB No. 1545-0047

Interr	nal Reve	enue Servio	ce		Information	about Form	990 and its	instructions	s is at www.	irs.gov/f	form990.		In	spection	on	
A F	or th	e 2016	i cale	ndar year, or ta	x year begi	inning	07	/01,2016	6, and end	ling			5/30 ,20			
Bc	heck if ap		C Nam	e of organization							D Employer id	lentifi	ication num	ıber		
	_	Ĺ	PE	W RESEARCH	CENTER											
	Addre			g Business As	<u> </u>				1		20-0881724					
	Name	e change		ber and street (or P		s not delivered	to street addre	SS)	Room/suite	9	E Telephone r					
	Initial	return		15 L STREET	-			1-	800		(202) 41	.9-4	4300			
	Termi Amen	inated		or town, state or pro		and ZIP or fore	eign postal coo	le					~ ~	4 - 0	0 - 0	
	returr	n L		SHINGTON, D		MEQUA		av			G Gross receip H(a) Is this a gro			· ·	,959.	
	pendi			·		-	AEL DIMC	-	1 20026		subordinates	s?		Yes	X No	
-	Tay ay	iomet ato		15 L STREET						- 07	H(b) Are all subor		included?	Yes	No	
		empt sta		X 501(c)(3)	501(c) () ┥ (in	isert no.)	4947(a)(1)	or 5	527	-			Juons)		
		of organiz			Trust	Association	Other		I Voor	of forma	H(c) Group exem tion: 2004 M	· · ·		micilo	PA	
	art I	-	mary		11030	Association	Outor	-	Lica	orionna		olai	c or regar de	intelle.		
				, ibe the organizatio	on's mission	or most signif	icant activitie	s PEW R	ESEARCH	I CENT	ER IS A N	IONE	PARTISA	AN		
e	-			NK – A SOUR												
anc		NO P	POLIC	CY POSITION	S; IT IS	A SUBSI	LDIARY C)F THE P	EW CHAR	ITABL	LE TRUSTS.					
/err	2	Check	this b	ox 🕨 📄 if the d	organization	discontinued	its operatio	ns or dispos	ed of more t	han 25%	6 of its net asset	s.				
ĝ	3	Numbe	er of v	oting members of	the governing	g body (Part \	/I, line 1a)					3			8.	
ა ა	4			dependent voting								4			7.	
Activities & Governance	5			r of individuals em								5			224.	
cti∨	6	Total n	umbe	r of volunteers (est	imate if neces	ssary)						6			0.	
Ă	7a	Total u	nrelat	ed business reven	ue from Part	VIII, column (C), line 12					7a			0	
	b	Net un	relate	d business taxable	e income from	Form 990-T	, line 34 🔒			<u></u>		7b			0	
											Prior Year			rent Ye		
en	8	Contrib	outions	and grants (Part \	/III, line 1h)			COF	PY FOR	— ר	43,907,63		39		,583	
Revenue	9	Progra	m ser	vice revenue (Part)	VIII, line 2g)				NSPECTION	」	448,1			30	,203	
Re		mesu	nent n	icome (Fait viii, c	Joiunni (A), iii	165 5, 4, anu	/u)			┛┝───	F 2 0/	0.			$\frac{0}{172}$	
	11			ie (Part VIII, colun							53,80		20		2,173 ,959	
	12 13			e - add lines 8 thre	÷ ,						44,409,0	0.	39	,470	,959	
	14	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		
	15			er compensation,							19,003,40	21	.033	,675		
Expenses				fundraising fees (F									,	0		
tper				sing expenses (Pa						•		0.			-	
ŵ				ses (Part IX, colum						-	16,066,5	71.	19	,067	,723	
	18	Total e	xpens	es. Add lines 13-1	7 (must equa	al Part IX, colu	umn (A), line	25)		•	35,069,97			,398		
				s expenses. Subtra							9,339,63				,439	
ces				i.							nning of Current	Year	End	l of Yea	r	
Net Assets or Fund Balances	20	Total a	ssets	(Part X, line 16)						_	73,731,58	39.	73	,605	,906	
t As d B	21			es (Part X, line 26)							15,669,23	34.	16	,173	,990	
				r fund balances. S	Subtract line 2	1 from line 20	0			-	58,062,35	55.	57	,431	,916	
	rt II			e Block												
Une	der per e, corre	nalties of ect, and c	perjur complet	y, I declare that I ha e. Declaration of pre	ive examined t parer (other tha	his return, incl an officer) is ba	uding accom sed on all info	panying sched rmation of wh	lules and stat	tements, a has any k	and to the best o nowledge.	fmy	knowledge	and be	lief, it is	
											04/1	0/1	0010			
Sig	n		Signatu	re of officer							Date	9/2	2010			
He	re		•	AEL DIMOCK				PRESI	DENT							
				print name and title				1101								
		Print/T	ype pr	eparer's name		Preparer's s	ignature		Date		Check	if	PTIN			
Paic		RUSS	LEE	ARMSTRONG							self-employ	- · ·	P00288	8383		
	parer	Firm's name GRANT THORNTON LLP							Firm's EIN 🕨	36-	-605555					
	Only								Phone no.		5-561-4	1200				
Мау	the I	RS disc	uss th	nis return with the	preparer show	vn above? (se	ee instruction	is)			<u></u>		. X Y	es	No	
_				tion Act Notice, s										m 990	(2016)	

PEW	RESEARCH	CENTER
T 10 11	TCD D DT III COII	CDIGIDIC

For	rm 990 (2016)	Page 2
Pa	art III Statement of Program Service Accomplishments	
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	X
'	ATTACHMENT 1	
2	Did the organization undertake any significant program services during the year which were not listed on	
	prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O.	
3		
	services?	
4	Describe the organization's program service accomplishments for each of its three largest program se	rvices, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants an	d allocations to others,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ _{8,753,055.} including grants of \$) (Revenue \$))
	ATTACHMENT 2	
4b	(Code:) (Expenses \$ 10,210,848. including grants of \$) (Revenue \$)
	PEW RESEARCH CENTER'S GLOBAL ATTITUDES & TRENDS RESEARCH: WE	
	CONDUCT INTERNATIONAL RESEARCH ON AN ARRAY OF SUBJECTS, RANGING	
	FROM PEOPLE'S ASSESSMENTS OF THEIR OWN LIVES TO THEIR ATTITUDES	
	ABOUT THE CURRENT STATE OF THE WORLD. EVERY YEAR WE PUBLISH	
	DOZENS OF REPORTS AND ANALYSES ON THE RAPID CHANGES TAKING PLACE	
	AROUND THE GLOBE AND THE RELEVANT GEOPOLITICAL AND ECONOMIC EVENTS	
	OF THE DAY.	
4c	: (Code:) (Expenses \$ 4,603,038. including grants of \$) (Revenue \$	
	PEW RESEARCH CENTER'S METHODOLOGY RESEARCH: WE CONTINUE TO SEARCH	2,300.)
	FOR WAYS TO EXPAND AND STRENGTHEN THE TRADITIONAL METHODOLOGIES	
	THAT UNDERLIE SURVEY RESEARCH AND TO EXPLORE THE POTENTIAL OF	
	ALTERNATE METHODS OF CONDUCTING SURVEYS AND MEASURING PUBLIC	
	OPINION.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 14,765,856. including grants of \$) (Revenue \$ 27,903.)	
4e	Total program service expenses ► 38,332,797.	
	1020 1.000	Form 990 (2016)
	0022NL 700P 4/23/2018 2:49:30 PM V 16-7.16 0166181	PAGE 4

Form 9	90 (2016)		F	Page 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III.	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
a	complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	110		
D D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	110		
L.	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		х
Ь	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
a	-	114		х
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	
		TTe	Λ	
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10		37
	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	4.01	37	
4.0	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .	12b	Х	37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		Х

Form **990** (2016)

Form 990 (2016)

Page **4**

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. 20a No. 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule I, Part I and II. 20b 2 21 Did the organization report more than SS 000 of grants to or other assistance to any domestic individuals on part IX, column (A), line 12 If "Yes," complete Schedule I, Part I and II. 21 X 23 Did the organization report more than SS 1000 of grants to other assistance to or for domestics individuals on part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III. 22 X 24 Did the organization answer "Yes" to Draft WIJ, Section A, line 3, 4, or 5 about compensation of the organization as tax-exempt bords beyond a temporary period exception? 23 X 24 Did the organization as a tax-exempt bords beyond a temporary period exception? 24a X 24 Did the organization as a oro behalf of Issuer for bords outstanding at my time during the year? 24a X 25 Section S01(c)(3), S01(c)(4), and S01(c)(23) organizations. Did the organization engage in an excess benefit transaction with a disqualified person with a disqualified person with a disqualified person with a figure for bords outstanding at my time during the year? 25a X 25 Did the organization negate as or no behalf of	Part	V Checklist of Required Schedules (continued)			
b If Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization are attic, column (A), line 71 // Yes," complete Schedule / Parts in AII 2 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 71 // Yes," complete Schedule / Parts I and III. 2 23 Did the organization naveer Yes' to Part VII, Section A. line 3, 4, or 5 about compensation of more than organization have a tax-exempt bend issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If Yes," answer fines 24b through 24 and complete Schedule / J Yes," to the 25a. 24a 24 Did the organization and a any concern down at the organization area (14a, yor for box occurs) to the randization engage in a nexcess benefit transaction with a disqualified person a princ. 24a 25 Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in a nexcess benefit transaction with a disqualified person any other organization area and that the transaction. The randice thereof, a grant so other assistance to an officer, director, trustee, key employee, and the advector of the randice area organization area and that the transaction any of the organization area and that the anged 20 organization. 24a 25 Section 501(c)(3), 501(c)(2) organizitations. Did the organizitation engage in an axeess				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization near thx column (A), line 12 "Mix"s complete Schedule (<i>Part and I</i>). 21 X 22 Did the organization answer "Yes" to Part VI, Section A, line 3, 4, or 5 about componsation of the organization answer "Yes" to Part VI, Section A, line 3, 4, or 5 about componsation of the organization answer "Yes" to Part VI, Section A, line 3, 4, or 5 about componsation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 20021 "Nes" answer lines 244 X 24a Did the organization invest any proceeded tax-exempt bonds beyond a temporary period exception?. 24a X 24b Did the organization material proceeded to Lass-exempt bonds beyond a temporary period exception?. 24a X 24c Edit the organization invest any proceeded tax-exempt bonds beyond a temporary period exception?. 24d 24d 25a Section 501(cA), 501(cH), and 501(cJ(2)) organization onganization engine in an excess benefit transaction with a disqualified person during the year? 24d 25a X 25a Section 6.5. A organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any organization engine and the transaction has not been reported on any of the organization report any amount on Part X, line 5, c, orapize Schedule L, Part II.	20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		Х
domestic government on Part IX, column (A), line 17 II "Yes," completes Schedule I, Parts I and II. 21 X 22 Did the organization report more than S5 000 of grants or other assistance to or for domestic individuals on organization recore and former officers, directors, trustees, key employees, and highest compensation of the organization recore and former officers, directors, trustees, key employees, and highest compensation 23 X 24 Did the organization newer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization newe a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 20027 II "Yes," answer imes 24b Z4a 24 Did the organization anismian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Yes," complete Scheduke II. 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization avaits and a of the net and it organization avaits that it engaged in an excess benefit transactom with a disqualified person during the year? Z4d 250 Did the organization avaits. Line 1, Singe 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified person? Z6b 27 Did the organization avaits. Line 5, con 22 for receivables from or payables to any current or former officers, directors, trustees, complete Schedule L, Part II. Z7 28 Diz the organization	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
domestic government on Part IX, column (A), line 17 II "Yes," completes Schedule I, Parts I and II. 21 X 22 Did the organization report more than S5 000 of grants or other assistance to or for domestic individuals on organization recore and former officers, directors, trustees, key employees, and highest compensation of the organization recore and former officers, directors, trustees, key employees, and highest compensation 23 X 24 Did the organization newer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization newe a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 20027 II "Yes," answer imes 24b Z4a 24 Did the organization anismian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Yes," complete Scheduke II. 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization avaits and a of the net and it organization avaits that it engaged in an excess benefit transactom with a disqualified person during the year? Z4d 250 Did the organization avaits. Line 1, Singe 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified person? Z6b 27 Did the organization avaits. Line 5, con 22 for receivables from or payables to any current or former officers, directors, trustees, complete Schedule L, Part II. Z7 28 Diz the organization	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 21 /* yes, "complete Schedule / 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 have a tax-exempt bord issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 II "Yes," answer lines 24 24 Did the organization have a tax-exempt bord issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 II "Yes," answer lines 24 24a X 24 Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24b 24d		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
 Part IX, column (A), line 2? // "Yes," completes Schedule / Parts I and III. 21 Did the organization answer "Yes" to Part VII. Section A, line 3. 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 at of the last day of the year, that was issued after December 31, 2002? If "Yes," campletes Schedule I, TWO," go to fine 256. 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 at of the last day of the year, that was issued after December 31, 2002? If "Yes," camplete Schedule I/ NWO," go to fine 256. 24d Did the organization nation an escrew account other than a refunding escrew at any time during the year? 24d Did the organization admittin an escrew account other than a refunding escrew at any time during the year? 24d Did the organization admittin de person during the year? 24d Did the organization admittin de person during the year? 25a Section 501(c)(2), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction hear not been reported on any of the organization reproses 900 errors. 25b X. 25b Did the organization advected L. Part II. 25c Complete Schedule L. Part I. 27c X. 28 Was the organization advected compress 21. Vest, complete Schedule L. Part IV. 28 A tarnity member of a current or former officer, director, trustee, or key employee. If Yes," complete Schedule L. Part IV. 26 Did the organization reports any amount or other assistance to an officer, director, trustee, or quere to former officer, director, trustee, or key employee? If Yes," complete Schedule L. Part IV. 27 X. 28 Mas the organization reporte any chases persons? If Yes," complete Schedule L. Part IV. 29 Did the organization reporten	22				
23 Did the organization arwer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-axempt bond issue with an outstanding principal amount of more than \$100,000 as of the less thay othe year, that was issued after December 31, 2002? If "Yes," answer lines 24 ab through 24d and complete Schedule K If No." go to line 25a. 213 X 24a Did the organization have a tax-axempt bond issue with an outstanding principal amount of more than \$100,000 as of the less thay tothe year, that was issued after December 31, 2002? If "Yes," answer lines 24d at 24 244 X 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 24d 24d 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 24d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organizations priofers 990 or 990-E72 24d 25a x 25 Soction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organizations priofers and produce properties Schedule L, Part I 25a x 26 Did the organization properties argumation the priofer Schedule L, Part I 25a x 27 Did the organization properties argumation spriofer schedule L, Part II 22b x 27 Did the organization properties a grant or other assistance to an officer, director, trustee, key employees			22		Х
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "ves" complete Schedule J. 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "ves", answer lines 24b 24a X 24b Did the organization anti-tain an excrempt bond's beyond a temporary period exception?	23				
employees? If "Yes," complete Schedule J. 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No," go to line 25a. 24a X 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 24b 24d X 24b Did the organization invest any proceeds of tax-exempt bonds. 24d X 24d X 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization sections with a disqualified person during the year? 24d 24d X 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Schedule L, Part I 25a X 25a It 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 the enganization's prior Forms 90 or 900-E27 25b X 25a Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any oursent of forms. 26d X 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to a substandial contributor or emphyee thereof, a grant selection committee member, or to		-			
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No." go to line 25a. 24a x b Did the organization mixest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d 24d c Did the organization animatian an escrew account other than a refunding escrew at any time during the year 24d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization and as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organization. Did the organization and excess benefit transaction with a disqualified person in a prior year, and that the transaction these not been reported on any of the organization proved a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee therefol, a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee therefol, a grant or other assistance to an officer, director, trustee, key employee? 27 X 27 Did the organization aparty oa buisess transaction with oa disqualified person? 28a X 28 A family member of a current or former officer, director, trustee, or key employee? 7 28a X 29 Did			23	х	
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c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 31 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. 34 X 35a Did the organization. Sa, 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 35b	D		28h		x
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29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. 31 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. 33 X 34 Was the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 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 35b 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purpose? If "Yes," complete Schedule R,	C		280		x
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 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	30		20		v
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Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Image: Complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Image: Complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Image: Complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Image: Complete Schedule	31				
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			27		v
	20		31		
190 V	30	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	

Form **990** (2016)

JSA

Form 990 (2016)

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Par				
	Check if Schedule O contains a response or note to any line in this Part V	•••		•
	Enter the number reported in Box 3 of Form 1096. Enter -0 , if not applicable $ 1a $ 41		Yes	No
	Enter the number of Forms W-20 included in the Ta. Enter -0- in for applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c	Х	
0	reportable gaming (gambling) winnings to prize winners?	10	A	
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 224			
		2b	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20		
0	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	3a		х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		- 25
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . At any time during the calendar year, did the organization have an interest in, or a signature or other authority	50		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		x
h	If "Yes," enter the name of the foreign country:	Tu		
b				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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:			
	Initiation fees and capital contributions included on Part VIII, line 12	.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	isa		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
-				
	Enter the amount of reserves on hand	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		
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Form §	990 (2016) PEW RESEARCH CENTER 20-088.	L724	F	Page 6
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI			x
Sect	ion A. Governing Body and Management	<u> </u>		A
0001	Ion A. Governing Douy and Management		Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year $1a$	3		
1a	Enter the number of voting members of the governing body at the end of the tax year	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
2	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization become aware during the year of a significant diversion of the organizations assets in the 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			
·u	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sect	ion 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		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?	45.	37	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		x
h	with a taxable entity during the year?	104		21
D	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		
Sect	ion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright^{PA} ,			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5010	-)(3)e	
10	available for public inspection. Indicate how you made these available. Check all that apply.	551(0	5,0,5	, only)
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	nolicy	/ and
	financial statements available to the public during the tax year.	51551		,, unu
20		s: ►		
	State the name, address, and telephone number of the person who possesses the organization's books and record NIKOLAS WISSMANN 1615 L STREET, NW, SUITE 800 WASHINGTON, DC 20036 202-419-4300			
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Part VII	Compensation of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contra	actors								
	Check if Schedule (O contains	a response	or note to	anv lii	ne in this Part	VII			X

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

					C)					
(A)	(B)	(do r	not of		ition	e than c	200	(D)	(E)	(F)
Name and Title	Average hours per					is both		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any					or/trust		from	related	other
	hours for	9 <u>5</u>	In	Q	۲	en ⊥:	F	the	organizations	compensation
	related organizations	Individual trustee or director	stitu	Officer	Key employee	ghes	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	ctor	tiona	,	nplo	/ee		(₩-2/1033-10100)		and related
	line)	rust	al tru		yee	mpe				organizations
		ee	Institutional trustee			Highest compensated employee				
						fed				
(1)MICHAEL DELLI CARPINI	1.00									
BOARD MEMBER AND CHAIRMAN	0.	x		Х				0.	0.	0.
(2)PETER W. BERNSTEIN	1.00									
BOARD MEMBER	0.	х						0.	0.	0.
(3)SUSAN GLASSER	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(4)JANA BENNETT	1.00									
BOARD MEMBER	0.	X						0.	0.	0.
(5)ROBERT GROVES	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(6)HENRY MCGEE	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(7)R. JAMES G. MCMILLAN	2.00									
BOARD MEMBER & PCT SVP	48.00	X						0.	369,907.	41,737.
(8)DUNCAN WATTS	1.00									
BOARD MEMBER	0.	X						0.	0.	0.
(9)MICHAEL DIMOCK	50.00									
PRESIDENT	0.			Х				377,899.	0.	59,891.
(10)ELIZABETH MUELLER GROSS	50.00									
VICE PRESIDENT (UNTIL 5/2017)	0.			Х				290,859.	0.	67,167.
(11)CLAUDIA DEANE	50.00									
VICE PRESIDENT	0.			Χ				244,821.	0.	65,236.
(12)NIKOLAS WISSMANN	50.00									
DIR, FIN ADMN & CORP TREASURER	0.			Х				164,285.	0.	36,904.
(13)ALYCIA KANTOR	50.00									
DIR, LEGAL AFFAIRS & CORP SECR	0.			Х				0.	171,141.	29,561.
(14)JAMES BELL	50.00									
VICE PRESIDENT	0.				Х			221,947.	0.	57,076.

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Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (C) (B) (D) (E) (F) Name and title Position Reportable Reportable Estimated Average (do not check more than one amount of hours per compensation compensation from week (list any box, unless person is both an other from related officer and a director/trustee) compensation hours for the organizations Officer Former Individual trustee or director Highest compensated employee related Institutional trustee Key from the organization (W-2/1099-MISC) organization organizations employee (W-2/1099-MISC) and related below dotted organizations line) 15) HARRISON LEE RAINIE 50.00 DIRECTOR, INTERNET, SCIENCE&TECH Ο. Х 298,367. 0 63,098. AMY MITCHELL 50.00 16) DIRECTOR, JOURNALISM RESEARCH 0. Х 193,911. 0 49,580. 17) CARROLL DOHERTY 50.00 DIRECTOR, POLITICAL RESEARCH 0. Х 217,668 0 47,354. 18) JEFFREY PASSEL 50.00 SENIOR DEMOGRAPHER 0. 0 Х 205,450. 41,231. 19) ALAN COOPERMAN 50.00 DIRECTOR, RELIGION RESEARCH 0. 207,723 0 53,482. Х 1,299,811. 541,048. 357,572. 1b Sub-total ► 1,123,119. 254,745. 0 c Total from continuation sheets to Part VII, Section A 2,422,930. 612,317. 541,048. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of 2 reportable compensation from the organization **>** 47 Yes No 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated Х employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual 5 for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Х Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of 1 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation ATTACHMENT 3 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **>** 17

154 6E1055 2.000

Form 990 (2016) PEW RESEARCH CENTE							20-08817	24 Page 9
Par	t VII							
		Check if Schedule O co	ntains a respor	nse or note to an	y line in this Part V	<u>III</u>		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, and similar amounts not included Noncash contributions included in	tions) . 1f	39,000,000.				
aŭ	9 h	Total. Add lines 1a-1f			39,388,583.			
ne				Business Code				
Program Service Revenue	2a b c	CONTRACT REVENUE		900099	30,203.	30,203.		
s E	d							
grai	e							
Š	f	All other program service rev						
<u> </u>	g	Total. Add lines 2a-2f			30,203.			
	3	Investment income (inc	0					
		and other similar amounts).			0.			
	4	Income from investment of	•		0.			
	5	Royalties			52,173.			52,173.
			(i) Real	(ii) Personal				
	6a b c	Gross rents Less: rental expenses Rental income or (loss)						
	d	Net rental income or (loss)			0.			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses						
	C .	Gain or (loss)						
	d	Net gain or (loss)		· · · · · · •	0.			
Other Revenue	8a	Gross income from fundra events (not including \$ of contributions reported on [line 1c).					
her		See Part IV, line 18						
đ	b	Less: direct expenses						
	с 9а	Net income or (loss) from fun Gross income from gaming See Part IV, line 19	activities.		0.			
	b c	Less: direct expenses Net income or (loss) from g	b	0.	0.			
	10a	Gross sales of inventor returns and allowances	ory, less					
	b c	Less: cost of goods sold	es of inventory		0.			
		Miscellaneous Revenue	9	Business Code				
	11a							
	b							
	с							
	d	All other revenue						
	е	Total. Add lines 11a-11d			0.			
	12	Total revenue. See instruction			39,470,959.	30,203.		52,173.
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Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations mus				
Check if Schedule O contains a resp	I		(C)	
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors,				
trustees, and key employees	1,880,371.	1,574,380.	106,572.	199,419
6 Compensation not included above, to disgualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	14,534,910.	13,925,661.	400,070.	209,179
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	1,594,003.	1,525,701.	44,786.	23,516
9 Other employee benefits	1,934,830.	1,841,113.	57,179.	36,538
10 Payroll taxes	1,089,561.	1,030,709.	33,249.	25,603
11 Fees for services (non-employees):				
a Management	311,555.	279,636.	29,053.	2,866
b Legal	132,236.	120,579.	10,610.	1,047
c Accounting	17,847.	16,019.	1,664.	164
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ATCH 4	12,275,485.	12,252,281.	21,120.	2,084
(A) amount, list line 11g expenses on Schedule 0.)	139,280.	125,011.	12,988.	1,281
13 Office expenses	316,842.	287,718.	26,509.	2,615
14 Information technology	649,651.	591,287.	53,123.	5,241
15 Royalties	0.	07272077		0,211
	3,151,063.	2,841,784.	281,506.	27,773
16 Occupancy	493,745.	485,895.	7,145.	705
17 Travel	195,715.	105,055.	,,113.	705
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
	149,325.	142,117.	6,561.	647
19 Conferences, conventions, and meetings	0.	112,117.	0,301.	047
20 Interest	0.			
21 Payments to affiliates	1,049,579.	942,048.	97,875.	9,656
22 Depreciation, depletion, and amortization				1,020
23 Insurance	133,236.	121,875.	10,341.	1,020
24 Other expenses. Itemize expenses not covered				
above (List miscellaneous expenses in line 24e. If				
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O.)	0.00 1.00	007 000	17 100	1 (07
aDUES AND SUBSCRIPTIONS	226,129.	207,233.	17,199.	1,697
bHONORARIA	21,750.	21,750.		
c				
d				
e All other expenses	40.101.000	20.000	1 010	
25 Total functional expenses. Add lines 1 through 24e	40,101,398.	38,332,797.	1,217,550.	551,051
26 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)	0.			

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Form 990 (2016)

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-	n 990 (,					Page 11
Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response o	r note	e to any line in this P	art X		<u></u>
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			6,149,765.	1	2,094,005.
	2	Savings and temporary cash investments			0.	2	0.
	3	Pledges and grants receivable, net			59,740,668.	3	64,408,000.
	4	Accounts receivable, net			0.	4	0.
	5	Loans and other receivables from current and f	orme	r officers, directors,			
		trustees, key employees, and highest co	mper	nsated employees.			
		Complete Part II of Schedule L Loans and other receivables from other disqualified perso			0.	5	0.
	6	Loans and other receivables from other disqualified perso 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu organizations (see instructions). Complete Part II of Sche	and ontary of	contributing employers employees' beneficiary	0.	6	0.
ets	7	Notes and loans receivable, net			0.	7	0.
Assets	8	Inventories for sale or use			0.	8	0.
∢	9	Prepaid expenses and deferred charges			369,099.	-	641,000.
	-	Land, buildings, and equipment: cost or				- U	011,0001
	lou	other basis. Complete Part VI of Schedule D	10a	12.346.980.			
	h	Less: accumulated depreciation			7,472,057.	100	6,462,901.
	11	Investments - publicly traded securities			0.	-	0.
	12	Investments - other securities. See Part IV, line 11				12	0.
	13	Investments - program-related. See Part IV, line 11			0	13	0.
	14	Intangible assets				-	0.
	15	Other assets. See Part IV, line 11			0.		0.
	16	Total assets. Add lines 1 through 15 (must equal			73,731,589.		73,605,906.
	17	Accounts payable and accrued expenses			2,952,300.		3,913,512.
	18	Grants payable			0.		0.
	19	Deferred revenue			27,633.		6,700.
	20	Tax-exempt bond liabilities			0.	20	0.
	21	Escrow or custodial account liability. Complete Pa	rt IV o	of Schedule D	0.		0.
s	22	Loans and other payables to current and for					
Liabilities		trustees, key employees, highest compens					
lid		disqualified persons. Complete Part II of Schedule			0.	22	0.
Lia	23	Secured mortgages and notes payable to unrelate			0.		0.
	24	Unsecured notes and loans payable to unrelated t			0.		0.
	25	Other liabilities (including federal income tax, p				<u> </u>	
		parties, and other liabilities not included on lines					
		of Schedule D		, ,	12,689,301.	25	12,253,778.
	26	Total liabilities. Add lines 17 through 25			15,669,234.	26	16,173,990.
sec		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	check			-	
anc	27	Unrestricted net assets			7,849,616.	27	6,932,343.
3al;	28	Temporarily restricted net assets			50,212,739.	28	50,499,573.
ПЪГ	29	Permanently restricted net assets			0.	29	0.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.					
ts (30	Capital stock or trust principal, or current funds				30	
sse	31	Paid-in or capital surplus, or land, building, or equ	ipmer	nt fund		31	
Net Assets	32	Retained earnings, endowment, accumulated inco	, ome, o	or other funds		32	
Net	33	Total net assets or fund balances			58,062,355.	33	57,431,916.
_	34	Total liabilities and net assets/fund balances	•••		73,731,589.	34	73,605,906.
							Form 990 (2016)

Form 99	90 (2016)			Pa	ge 12
Part					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	39,4		
2	Total expenses (must equal Part IX, column (A), line 25)	2	40,1		
3	Revenue less expenses. Subtract line 2 from line 1	3		30,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	58,0	62,3	355.
5	Net unrealized gains (losses) on investments	5			0.
6	Donated services and use of facilities	6			0.
7	Investment expenses	7			0.
8	Prior period adjustments	8			0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
_	33, column (B))	10	57,4	31,9	916.
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	•		37	
	of the audit, review, or compilation of its financial statements and selection of an independent acc		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e	explain in			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se				77
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	aits.	3b		

Form 990 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Department of the Treasury Internal Revenue Service

OMB No. 1545-0047
2016
Open to Public

Inspection

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

Name of the organization				Employer identifi		
PEW RESEARCH CENTER				20-08817		
Part I Reason for Public Ch		0		,	•	
The organization is not a private fo		,	•	,		
	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) .					
4 A medical research organ		conjunction with a hos	spital described i	n section 170(b)(1)(A)	(iii). Enter the	
hospital's name, city, and					and the first section of the section	
5 An organization operated		a college or universit	ly owned or ope	erated by a governme	intal unit described	
section 170(b)(1)(A)(iv).	,			(1-)/4)/4)/)		
6 A federal, state, or local g					m the general pu	
7 X An organization that norr	-	-	ipport nom a go		on the general pu	
described in section 170(1 8 A community trust describ			Dort II.)			
 8 A community trust describ 9 An agricultural research of 	-		-	d in conjunction with a	land grant college	
or university or a non-land	-			-		
university:	-grain conege of a		lions). Enter the	name, city, and state of	The college of	
0 An organization that norm	ally receives: (1) m	ore than 331/2% of its	support from co	ntributions membersh	nin fees and gross	
receipts from activities re support from gross invest acquired by the organizat	lated to its exempt ment income and u ion after June 30, 1	functions - subject to unrelated business tax 1975. See section 509	certain exception able income (les (a)(2). (Complete	ns, and (2) no more tha s section 511 tax) from e Part III.)	n 331/3 % of its	
 An organization organized An organization organized 	•	•	•		orny out the purpe	
of one or more publicly s	•				• • • •	
Check the box in lines 12a						
	-			-		
a Type I . A supporting or		-				
the supported organizat supporting organization.						
b Type II . A supporting or				s supported organizati	on(c) by baying	
control or management						
organization(s). You mu		-	the same person		age the supported	
c Type III functionally int	-		ated in connectic	on with and functional	ly integrated with	
its supported organizatio					iy mogratoa min,	
d Type III non-functionally					ted organization(s)	
that is not functionally in			-			
requirement (see instrue			-	-		
e Check this box if the org	,	•			I. Type III	
functionally integrated, of	-				, , ,	
f Enter the number of supporte						
g Provide the following information	tion about the supp	orted organization(s).				
(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the organization	(v) Amount of monetary	(vi) Amount of	
		(described on lines 1-10 above (see instructions))	listed in your governing document?	support (see instructions)	other support (see instructions)	
			Yes No	interreterionoy	motraotioney	
A)						
~)						
В)						
_,						
C)						
D)						
,						
(E)						
•						
Fotal						

Schedule A (Form 990 or 990-EZ) 2016

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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.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,279,520.	39,438,092.	37,904,686.	43,907,635.	39,388,583.	192,918,516.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	32,279,520.	39,438,092.	37,904,686.	43,907,635.	39,388,583.	192,918,516.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.	
6	Public support. Subtract line 5 from line 4.						192,918,516.	
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
7	Amounts from line 4	32,279,520.	39,438,092.	37,904,686.	43,907,635.	39,388,583.	192,918,516.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	19,907.	75,994.	18,394.	27,860.	52,173.	194,328.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <u>ATCH 1</u>		11,801.	26,100.	25,943.		63,844.	
11	Total support. Add lines 7 through 10						193,176,688.	
12	Gross receipts from related activities, etc. (s	see instructions)				12	2,498,630.	
13	First five years. If the Form 990 is for organization, check this box and stop here	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax yea			
Sec	tion C. Computation of Public Sup							
14	Public support percentage for 2016 (li	ne 6, column (f)) divided by line	11, column (f))		14	99.87%	
15	Public support percentage from 2015	Schedule A, Pa	rt II, line 14			15	99.87%	
16a	331/3% support test - 2016. If the o	rganization did	not check the b	oox on line 13,	and line 14 is	331/3 % or mor	e, check	
	this box and stop here. The organization	on qualifies as a	publicly suppor	ted organizatio	n		. ► X	
b	331/3% support test - 2015. If the c	organization did	not check a bo	ox on line 13 o	or 16a, and line	15 is 331/3%	or more,	
	check this box and stop here. The organization qualifies as a publicly supported organization							
17a	a 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is							
	10% or more, and if the organization					-		
	Part VI how the organization meets t	he "facts-and-c	ircumstances" te	est. The organiz	zation qualifies	as a publicly s	upported	
	organization						► 🗀	
b	10%-facts-and-circumstances test - 2	2015. If the org	ganization did no	ot check a box	on line 13, 16	a, 16b, or 17a,	and line	
	15 is 10% or more, and if the orga						-	
	Explain in Part VI how the organization				-	-	publicly	
	supported organization						▶ □	
18	Private foundation. If the organization							
	instructions						<u>▶ ∟</u>	

Schedule A (Form 990 or 990-EZ) 2016

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Part III

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	16 (f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support			•			
	ndar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	16 (f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
	sources						
a	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly						
40	carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is f	or the organiza	tion's first seco	nd third fourth	or fifth tax ve	arasa	section 501(c)(3)
14	organization, check this box and stop here	-			•		
Sec	tion C. Computation of Public Sur						
15	Public support percentage for 2016 (line 8			mn (f))		15	%
16	Public support percentage from 2015 Sche					16	%
	tion D. Computation of Investme						
17	Investment income percentage for 2016 (li			13. column (f))		17	%
18	Investment income percentage from 2015		•			18	<u> </u>
	331/3% support tests - 2016. If the or						
	17 is not more than 331/3%, check th	-					
h	331/3% support tests - 2015. If the orga		-	•			
J	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		•	•			• H
JSA				,,			(Form 990 or 990-EZ) 2016
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Page 3

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status 2 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- С Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign b 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.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already b designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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.
- Did one or more disgualified persons (as defined in line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

Schedu	le A (Form 990 or 990-EZ) 2016		F	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations		X	
			Yes	NO
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
<u></u>			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
n	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see			
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

s regard. 3b Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016

instructions. All other Type III non-functionally integrated supporting organized	zations r	nust complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 			
	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 025	6		
6 Multiply line 5 by .035.7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount	0		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990 or 990-EZ) 2016

Page 7

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tions (continued)	Page I
	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex		Current rear	
2	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exer	od		
2	organizations, in excess of income from activity		eu	
3	Administrative expenses paid to accomplish exempt purpo	sees of supported organi	zatione	
4	Amounts paid to acquire exempt-use assets	ses of supported organi	24110115	
	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.			
	Distributions to attentive supported organizations to which	the organization is resp		
0	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
10			(::)	/:::)
:	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			
			Schedule	A (Form 990 or 990-EZ) 2010

Page 8

Schedule A (Form 990 or 990-EZ) 2016

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

SCHEDULE A, PART II -	OTHER INCOM	Е			ATTACHMENT	1
DESCRIPTION	2012	2013	2014	2015	2016	TOTAL
OTHER INCOME		11,801.	26,100.	25,943.		63,844.
TOTALS	=	11,801.	26,100.	25,943.		63,844.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990, Form 990	-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-P	F) and its instructions is at www.irs.gov/form990.

2016

Name of the	organization
-------------	--------------

PEW RESEARCH CENTER

20-0881724

Employer identification number

Organization type (check one):

Section:
X 501(c)(³) (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization
501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
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 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 33 1/3 % 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization PEW RESEARCH CENTER

(a)	(b)	(2)	(-1)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 39,000,000.	Person X Payroll Noncash
			(Complete Part II for noncash contributions.)
a) Io.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	noncash contributions.) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Io.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	Page
Name of organization PEW RESEARCH CENTER	Employer identification number
	20-0881724

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

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Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	Page 4
Name of organization PEW RESEARCH CENTER	Employer identification number
	20-0881724
Dest III - Forbreischen Beisen, aberiteble etc. einstellenting te enverliettene des eile d	1 = (1 =

Part III	Exclusively religious, charitable, etc.							
	(10) that total more than \$1,000 for							
	the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> 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 addit							
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held				
1 4111								
		(e) Transf	er of gift					
		(0) 112110						
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship 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, ar	nd ZIP + 4	Relatio	nship 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, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
Part I								
	(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
				Schedule B (Form 990, 990-EZ, or 990-PF) (2016)				

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

	tment of the Treasury al Revenue Service	► Attach to Form 990. le D (Form 990) and its instructions is at w	ww.irs.gov/form990. Inspection
	of the organization		Employer identification number
PEW	RESEARCH CENTER		20-0881724
_	t Organizations Maintaining Donor Adv	vised Funds or Other Similar Funds	
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dono	r advisors in writing that the assets h	eld in donor advised
•	funds are the organization's property, subject to th	-	
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		
Pa	t Conservation Easements.		
	Complete if the organization answered	I "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by th	e organization (check all that apply).	
	Preservation of land for public use (e.g., red	creation or education) 📃 Preservat	tion of a historically important land area
	Protection of natural habitat	Preservat	tion of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	S	_ 2b
С	Number of conservation easements on a certified	historic structure included in (a)	_ 2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on	a
	historic structure listed in the National Register		_ 2d
3	Number of conservation easements modified, tra	nsferred, released, extinguished, or te	rminated by the organization during the
	tax year 🕨		
4	Number of states where property subject to conse	ervation easement is located \blacktriangleright	
5	Does the organization have a written policy re		-
	violations, and enforcement of the conservation ea	asements it holds?	Yes 📖 No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcing	conservation easements during the year
	▶		
7	Amount of expenses incurred in monitoring, inspec	cting, handling of violations, and enforcing	ng conservation easements during the year
	▶\$		
8	Does each conservation easement reported on line		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports		•
	balance sheet, and include, if applicable, the text	•	iancial statements that describes the
Da	organization's accounting for conservation easement III Organizations Maintaining Collection		thar Similar Assats
Гa	Complete if the organization answered		
4.0			
1a	If the organization elected, as permitted under S works of art, historical treasures, or other similar	ar assets held for public exhibition,	education, or research in furtherance of
	public service, provide, in Part XIII, the text of the f	ootnote to its financial statements that	describes these items.
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other simil public service, provide the following amounts related		education, or research in furtherance of
	(i) Revenue included in Form 990, Part VIII, line 1	•	► ¢
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a	art historical tractures or other simi	lar assots for financial gain provide the
2	following amounts required to be reported under s		
а	Revenue included in Form 990, Part VIII, line 1	· · · -	
b	Assets included in Form 990, Part X		
	aperwork Reduction Act Notice, see the Instructions for		Schedule D (Form 990) 2016

JSA 6E1268 1.000 OMB No. 1545-0047 2016

Schee	dule D (Form 990) 2016											Р	age 2
Par	t III Organizations Maintainin	ng Colle	ctions of	f Art, Hist	torical T	reasur	es,	or Oth	ner Simila	ir Asse	ts (con	tinue	ed)
3	Using the organization's acquisition	on, acces	sion, and	other recor	rds, checl	k any c	of the	follow	ing that a	re a sigr	nificant u	se o	f its
	collection items (check all that app	ly):											
а	Public exhibition			d	Loan	or exch	ange	prograi	ms				
b	Scholarly research			e	Other								
с	Preservation for future gene	rations				-							
4	Provide a description of the organ		collection	s and expla	ain how t	thev fu	rther	the or	anization's	s exemp	t purpos	e in	Part
	XIII.					,			J				
5	During the year, did the organization	on solicit o	or receive	donations c	of art. hist	orical tr	easu	res. or	other simila	ar			
-	assets to be sold to raise funds rath									_	Yes		No
Par	t IV Escrow and Custodial Ar					<u> </u>							
	Complete if the organizat			s" on Forn	n 990. P	art IV.	line 9). or re	ported an	amoun	t on For	m	
	990, Part X, line 21.				,	,		,	F				
1a	Is the organization an agent, truste	e. custo	dian or oth	er intermed	liarv for c	ontribu	tions	or othe	r assets not	t			
	included on Form 990, Part X?				-					_	Yes		No
b	If "Yes," explain the arrangement i									••• -]
-									Ar	mount			
с	Beginning balance						1c		,	<u> </u>			
d	Additions during the year												
e	Distributions during the year												
f	Ending balance						1f						
	Did the organization include an am							etodial	account lial	hility2	Yes		No
	If "Yes," explain the arrangement i									-			
Par			I. OHECK I		Apianation		enpi	ovided		<u> </u>			
Fai	Complete if the organizat	ion ansv	ered "Ye	s" on Form	n 990 P	art IV/I	ine 1	0					
			rrent year	(b) Pric		(c) Tw			(d) Three ye	aars back	(e) Four	vears	hack
		(4) 04	inonit your	(6) 110	, your	(0) ! !!	io your	o buok	(u) 11100 ye		(0) 1 001	youro	buok
-	Beginning of year balance												
b	Contributions												
С	Net investment earnings, gains,												
	and losses												
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage	of the cu	rrent year	end balanc	e (line 1g,	columr	n (a))	held as	:				
а	Board designated or quasi-endown			_%									
b	Permanent endowment	%											
С	Temporarily restricted endowment	-	%										
	The percentages on lines 2a, 2b, a												
3a	Are there endowment funds not in	the poss	ession of t	he organiza	ation that	are hel	d and	d admir	nistered for	the	5	-	
	organization by:											/es	No
	(i) unrelated organizations						• • •				3a(i)		
	(ii) related organizations										3a(ii)		
b	If "Yes" on line 3a(ii), are the relate	-									3b		
4	Describe in Part XIII the intended u		e organiza	ation's endo	wment fui	nds.							
Par	t VI Land, Buildings, and Equ Complete if the organiza	ipment.	wered "Va	es" on For	m 990 F	Part IV	lina	11a S	ee Form (00 Par	t X line	10	
	Description of property			r other basis	(b) Cost of				cumulated		book val		
				stment)		other)			eciation		,	-	
	Land												
b	Buildings												
С	Leasehold improvements					514,94			87,773.		5,52		
d	Equipment)20,31			10,800.				74.
e	Other					311,60			85,506.				59.
Tota	I. Add lines 1a through 1e. (Column	i (d) musi	equal For	m 990, Part	X, colum	n (B), lir	ne 10	c.)	>		6,46	2,9	01.

Schedule D (Form 990) 2016

chedule D (Form 990) 2016			Pa
Part VII Investments - Other Securities. Complete if the organization answered	l "Vac" on Form 000	Part IV line 11b See Form 000	Part V line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year marke	
) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11c. See Form 990,	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year marke	et value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11d. See Form 990,	Part X, line 15.
(a) De	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B)	line 15.).		
Part X Other Liabilities.	/		
Complete if the organization answered line 25.	d "Yes" on Form 990	, Part IV, line 11e or 11f. See Forr	n 990, Part X,
(a) Description of liability	(b) Book valu	e	
(1) Federal income taxes			
(2) DEFERRED RENT	12,253,	778.	
(3)			
(4)			

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

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

12,253,778.

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

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Schedu	le D (Form 990) 2016		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	39,470,959.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	39,470,959.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
с	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	39,470,959.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	40,101,398.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	40,101,398.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	40,101,398.
Part	XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

 Schedule D (Form 990) 2016
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 Part XIII
 Supplemental Information (continued)

SCHEDULE F		Staten	nent of A	ctivities	Outside the Unit	ted St	ates 🔤	MB No. 1545-0047	
(For	rm 990)	► Complete	 Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. 						
	tment of the Treasury al Revenue Service	► Informatio	n about Schedu	form990.	Open to Public Inspection				
	of the organization						Employer identifica		
PEW	RESEARCH CEN	TER					20-088172	24	
Par		formation of art IV, line 14		Outside the U	nited States. Complete i	if the orga	anization answer	ed "Yes" on	
	assistance, the gra	ntees' eligibili	ty for the grant	s or assistance	substantiate the amount of e, and the selection criteri	a used to		Yes No	
2	For grantmakers. assistance outside			ganization's p	rocedures for monitoring	the use	of its grants a	and other	
3	Activities per Regio	on. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	ace is nee	eded.)		
	(a) Region	,	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If act a pro describ	ivity listed in (d) is ogram service, e specific type of e(s) in the region	(f) Total expenditures for and investments in the region	
(1)	EAST ASIA AND THE	PACIFIC			PROGRAM SERVICES	GLOBAL N	MIGRATION	2,363.	
(2)	EUROPE				PROGRAM SERVICES	RELIGION	N & PUBLIC LIFE	960,281.	
(3)	EUROPE				PROGRAM SERVICES	GLOBAL A	ATTITUDES PRJCT	1,577,836.	
(4)	MIDDLE EAST AND NO	ORTH AFRICA			PROGRAM SERVICES	RELIGIO	N & PUBLIC LIFE	750.	
(5)	RUSSIA/INDEPENDENT	STATES			PROGRAM SERVICES	RELIGION	N & PUBLIC LIFE	19,900.	
(6)	SOUTH AMERICA				PROGRAM SERVICES	GLOBAL A	ATTITUDES PRJCT	445,792.	
(7)	SUB-SAHARAN AFRICA	L			PROGRAM SERVICES	GLOBAL A	ATTITUDES PRJCT	2,548.	
(8)									
(9)									
<u>(10)</u>									
<u>(11)</u>									
<u>(12)</u>									
<u>(13)</u>									
<u>(14)</u>									
<u>(</u> 15)									
<u>(16)</u>									
(17)									
3a b	Sub-total Total from o sheets to Part I	continuation						3,009,470.	
с								3,009,470.	
	aperwork Reduction		e the Instruction	s for Form 990.			Schedule	e F (Form 990) 2016	

Part II

Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other	
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

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

2 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

3 Enter total number of other organizations or entities

Page 2

20-0881724

Page 3

Schedule F (Form 990) 2016

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							
17) 18)							

Schedule F (Form 990) 2016

JSA

Schedu	le F (Form 990) 2016		Page 4
Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No

5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

Page 5

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

FORM 990, SCHEDULE F, PART I, LINE 3, COLUMN F

EXPENDITURES ARE REPORTED BASED ON THE DOMICILE OF THE VENDOR TO WHICH

FUNDS ARE TRANSFERRED. PEW RESEARCH CENTER DOES NOT SEPARATELY TRACK

INDIRECT EXPENDITURES TO FOREIGN ACTIVITIES. AS SUCH, PER THE IRS 990

INSTRUCTIONS, THE AMOUNTS PRESENTED IN SCHEDULE F DO NOT INCLUDE AN

INDIRECT ALLOCATION OF EXPENDITURES. PROGRAM SERVICES ARE REPORTED ON

THE ACCRUAL BASIS, THE SAME METHOD USED FOR THE AUDITED FINANCIAL

STATEMENTS.

Schedule F (Form 990) 2016

SCHEDULE J (Form 990)		Compen For certain Officers, Dire	C	омв №. 1545-0047 200 16			
		Complete if the organization	mpensated Employees n answered "Yes" on Form 990, Part IV, line 23				alio
	nent of the Treasury Revenue Service	► A ► Information about Schedule J (Fo	Attach to Form 990. orm 990) and its instructions is at www.irs.gov/fo		Open to Inspo		
	of the organization			Employer identificatio			
PEW	RESEARCH (CENTER		20-0881724			
Part	Question	ns Regarding Compensation					
						Yes	No
1a			ovided any of the following to or for a perso				
			provide any relevant information regarding				
		ss or charter travel	Housing allowance or residence for				
		or companions	Payments for business use of person				
		emnification and gross-up payments	Health or social club dues or initiatio				
	Discretio	onary spending account	Personal services (such as, maid, cha	auffeur, chef)			
b	or reimburse	ement or provision of all of the ex	ne organization follow a written policy re openses described above? If "No," com	olete Part III to			
	explain				1b		
2	•		to reimbursing or allowing expenses	•			
			D/Executive Director, regarding the items	checked on line			
				• • • • • • • • •	2		
3			nization used to establish the compensatio				
			at apply. Do not check any boxes for method e CEO/Executive Director, but explain in Pa				
		•					
		nsation committee	Written employment contract X Compensation survey or study				
		dent compensation consultant		ion committee			
		90 of other organizations					
4			Part VII, Section A, line 1a, with respect to	the filing			
_	•	or a related organization:	euro ent?		4-		X
a h			ayment?		4a 4b		X
b	-				40 40		X
С	•		ased compensation arrangement? rovide the applicable amounts for each ite		40		
	ii res to an	ly of lines 4a-c, list the persons and pi	rovide the applicable amounts for each the				
	Only costion	E01(a)(2) $E01(a)(4)$ and $E01(a)(20)$ as	rganizations must complete lines 5-9.				
5	-		, line 1a, did the organization pay or accrue a				
J	•	n contingent on the revenues of:	, line ra, did the organization pay of accide a	arry			
а	-	-			5a		X
a b					5a 5b		X
~	-	e 5a or 5b, describe in Part III.			0.5		
6			, line 1a, did the organization pay or accrue a	anv			
-	•	n contingent on the net earnings of:		·····y			
а					6a		X
b					6b		X
	•	e 6a or 6b, describe in Part III.					
7			on A, line 1a, did the organization provi	de any nonfixed			
•			lescribe in Part III.		7		Х
8			paid or accrued pursuant to a contract tha				
			Regulations section 53.4958-4(a)(3)? If				
		-			8		X
9			low the rebuttable presumption procedu				
		5			9		
For Pa		ction Act Notice, see the Instructions for Fo			ule J (Fo	orm 990	0) 2016

Schedule J (Form 990) 2016

Page **2**

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
R. JAMES G. MCMILLAN	(i)	0.	0.	0.	0.	0.	0.	
1 ^{BOARD MEMBER & PCT SVP}	(ii)	344,920.	0.	24,987.	31,800.	9,937.	411,644.	
MICHAEL DIMOCK	(i)	359,089.	0.	18,810.	34,450.	25,441.	437,790.	
2 ^{PRESIDENT}	(ii)	0.	0.	0.	0.	0.	0.	
ELIZABETH MUELLER GROSS	(i)	269,329.	0.	21,530.	34,450.	32,717.	358,026.	
3VICE PRESIDENT (UNTIL 5/2017)	(ii)	0.	0.	0.	0.	0.	0.	
CLAUDIA DEANE	(i)	224,588.	0.	20,233.	32,417.	32,819.	310,057.	
4VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	
JAMES BELL	(i)	220,831.	0.	1,116.	29,508.	27,568.	279,023.	
5 ^{VICE PRESIDENT}	(ii)	0.	0.	0.	0.	0.	0.	
HARRISON LEE RAINIE	(i)	273,411.	0.	24,956.	34,450.	28,648.	361,465.	
6 ^{DIRECTOR, INTERNET, SCIENCE&TECH}	(ii)	0.	0.	0.	0.	0.	0.	
AMY MITCHELL	(i)	193,288.	0.	623.	24,066.	25,514.	243,491.	
7 DIRECTOR, JOURNALISM RESEARCH	(ii)	0.	0.	0.	0.	0.	0.	
CARROLL DOHERTY	(i)	214,576.	0.	3,092.	27,245.	20,109.	265,022.	
8 ^{DIRECTOR, POLITICAL RESEARCH}	(ii)	0.	0.	0.	0.	0.	0.	
JEFFREY PASSEL	(i)	202,081.	0.	3,369.	26,102.	15,129.	246,681.	
9 ^{SENIOR DEMOGRAPHER}	(ii)	0.	0.	0.	0.	0.	0.	
ALAN COOPERMAN	(i)	205,778.	0.	1,945.	24,651.	28,831.	261,205.	
10 ^{DIRECTOR, RELIGION RESEARCH}	(ii)	0.	0.	0.	0.	0.	0.	
NIKOLAS WISSMANN	(i)	163,975.	0.	310.	21,849.	15,055.	201,189.	
11 ^{DIR, FIN ADMN & CORP TREASURER}	(ii)	0.	0.	0.	0.	0.	0.	
ALYCIA KANTOR	(i)	0.	0.	0.	0.	0.	0.	
12 ^{DIR, LEGAL AFFAIRS & CORP SECR}	(ii)	158,200.	0.	12,941.	18,714.	10,847.	200,702.	
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2016

Page 3

Schedule J (Form 990) 2016

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

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.

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



Department of the Treasury Internal Revenue Service Name of the organization

20-0881724

FORM 990, PART III, LINE 4D PROGRAM SERVICE ACCOMPLISHMENTS

PEW RESEARCH CENTER'S SOCIAL & DEMOGRAPHIC TRENDS AND HISPANIC TRENDS RESEARCH: WE STUDY BEHAVIORS AND ATTITUDES OF AMERICANS IN KEY REALMS OF DAILY LIFE, COMBINING ORIGINAL PUBLIC OPINION RESEARCH WITH ECONOMIC AND DEMOGRAPHIC ANALYSIS. WE CHRONICLE THE DIVERSE AND CHANGING LIVES OF THE U.S. LATINO POPULATION AND ITS IMPACT ON THE NATION. (EXPENSES \$2,900,031)

PEW RESEARCH CENTER'S INTERNET, SCIENCE & TECHNOLOGY RESEARCH: WE ANALYZE THE SOCIAL IMPACT OF DIGITAL TECHNOLOGIES, AND WE STUDY ATTITUDES ABOUT SCIENTIFIC RESEARCH AND INNOVATION. OUR FOCUS IS ON HOW SCIENCE AND TECHNOLOGY CHANGES AFFECT FAMILIES, COMMUNITIES, EDUCATION, HEALTH CARE AND MEDICINE, CIVIC AND POLITICAL LIFE, AND WORKERS' ACTIVITIES. (EXPENSES \$2,928,024)

PEW RESEARCH CENTER'S JOURNALISM & MEDIA RESEARCH: WE ASSESS THE STATE OF NEWS AND INFORMATION IN A CHANGING SOCIETY, INCLUDING HOW NEWS IS CONSUMED, WHO IS REPORTING IT AND HOW TECHNOLOGY IS CHANGING THE INFORMATION LANDSCAPE. MAJOR REPORTS HAVE EXAMINED POLITICAL POLARIZATION AND MEDIA HABITS, NEWS USE ACROSS SOCIAL MEDIA PLATFORMS, AMERICA'S SHIFTING STATEHOUSE PRESS AND THE STATE OF THE NEWS MEDIA. (EXPENSES \$2,771,016)

Page 2

PEW RESEARCH CENTER'S U.S. POLITICS & POLICY RESEARCH: WE PROVIDE INDEPENDENT OPINION RESEARCH ABOUT AMERICAN ATTITUDES ON POLITICS AND MAJOR POLICY ISSUES AND STUDY THE CHANGING U.S. ELECTORATE BY MEASURING LONG-TERM TRENDS IN POLITICAL VALUES AND PUBLIC POLICY PRIORITIES, AS WELL AS CONDUCTING TIMELY AND TOPICAL POLLING ON THE ISSUES OF THE DAY. (EXPENSES \$3,664,775; REVENUE \$27,903)

PEW RESEARCH CENTER'S GLOBAL MIGRATION AND DEMOGRAPHY RESEARCH: WE STUDY INTERNATIONAL MIGRATION AND AN ARRAY OF SUBJECTS LINKED TO THE MOVEMENT OF PEOPLE GLOBALLY, RANGING FROM PUBLIC OPINION RESEARCH AND DEMOGRAPHIC PROFILES OF MIGRANTS TO ANALYSES OF THE SIZE AND SCOPE OF MIGRANT POPULATIONS AND MIGRATION PATTERNS. OUR RESEARCH FOCUSES ON SUBJECTS INCLUDING MIGRANT WORKERS, INTERNATIONAL STUDENTS, ASYLUM SEEKERS, REFUGEES AND ECONOMIC TOPICS LINKED TO MIGRATION AND THE FACTORS SHAPING THE IDENTITY OF NEW ARRIVALS AND SUBSEQUENT IMMIGRATION GENERATIONS. (EXPENSES \$2,502,010)

FORM 990, PART VI, LINES 6, 7A & 7B PEW RESEARCH CENTER'S SOLE MEMBER IS THE PEW CHARITABLE TRUSTS, AN INTERNAL REVENUE CODE SECTION 501(C)(3) PUBLIC CHARITY. THE PEW CHARITABLE TRUSTS ELECTS A MAJORITY OF PEW RESEARCH CENTER'S BOARD OF DIRECTORS. PEW RESEARCH CENTER'S BYLAWS PROVIDE THAT ANY AMENDMENT TO THE BYLAWS MUST BE APPROVED BY PEW RESEARCH CENTER'S SOLE MEMBER, THE PEW CHARITABLE TRUSTS.

JSA 6E1228 1.000

FORM 990, PART VI, LINE 11B

PEW RESEARCH CENTER'S FORM 990 IS THOROUGHLY PREPARED AND RIGOUROUSLY REVIEWED BEFORE IT IS FILED WITH THE IRS. THE RETURN IS REVIEWED BY THE ORGANIZATION'S DIRECTOR OF FINANCIAL ADMINISTRATION AND CORPORATE TREASURER, ITS PRESIDENT, AND ITS DIRECTOR OF LEGAL AFFAIRS AND CORPORATE SECRETARY AS WELL AS OUTSIDE INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS AND OUTSIDE LEGAL COUNSEL. FOLLOWING THE REVIEW, THE RETURN IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT BEFORE THE RETURN IS FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C

JSA 6E1228 1.000

PEW RESEARCH CENTER HAS ADOPTED CONFLICT OF INTEREST POLICIES THAT APPLY TO THE ORGANIZATION'S DIRECTORS, OFFICERS, AND EMPLOYEES. THIS POLICY REQUIRES EACH MEMBER OF THE BOARD OF DIRECTORS TO ANNUALLY COMPLETE A FORM TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST. THE FORMS ARE COLLECTED BY THE BOARD SECRETARY AND ARE SUBSEQUENTLY PROVIDED TO THE BOARD CHAIR FOR REVIEW AND APPROVAL. SIMILARLY, ALL EMPLOYEES OF PEW RESEARCH CENTER (INCLUDING OFFICERS) ARE REQUIRED, UPON HIRING AND ANNUALLY THEREAFTER, TO REPORT THEIR POTENTIAL CONFLICTS OF INTEREST. THE HUMAN RESOURCES DIRECTOR MEETS WITH PEW RESEARCH CENTER'S OFFICERS TO REVIEW ALL POTENTIAL CONFLICTS. THE PRESIDENT'S FORM IS APPROVED BY THE BOARD CHAIR, THE OFFICERS' FORMS ARE APPROVED BY THE PRESIDENT, AND ALL OTHER STAFF FORMS ARE APPROVED BY THE EMPLOYEE'S RESPECTIVE DEPARTMENT HEAD. THROUGHOUT THE YEAR, EACH INDIVIDUAL SUBJECT TO THE CONFLICT OF INTEREST POLICY IS REQUIRED TO UPDATE HIS/HER DISCLOSURE STATEMENT TO INCLUDE ANY INFORMATION REQUIRED TO BE DISCLOSED AND MUST SEEK PRIOR Page 2

APPROVAL FROM THE PRESIDENT FOR ANY ACTIVITY, AFFILIATION, MEMBERSHIP, OR TRANSACTION REQUIRED TO BE DISCLOSED UNDER THE POLICY. ONCE APPROVED OR DISAPPROVED, THE SIGNED DISCLOSURE STATEMENTS ARE RETURNED TO THE VICE PRESIDENT OR DIRECTOR OF HUMAN RESOURCES, WHO MAINTAINS A RECORD OF THE DISCLOSURES. ALL ACTUAL CONFLICTS ARE REPORTED TO THE BOARD OF DIRECTORS. IF A PERSON HAS AN ACTUAL CONFLICT, HE OR SHE IS PROHIBITED FROM PARTICIPATING IN THE DECISION-MAKING AND DELIBERATIONS RELATED TO THE TRANSACTION.

FORM 990, PART VI, LINE 15A & 15B

PEW RESEARCH CENTER ANNUALLY ENGAGES AN INDEPENDENT COMPENSATION CONSULTING FIRM TO CONDUCT A COMPENSATION STUDY TO EVALUATE THE REASONABLENESS OF THE TOTAL PROPOSED COMPENSATION FOR THE ORGANIZATION'S "DISQUALIFIED PERSONS" UNDER TREAS. REG. 53.4958-3 WITHOUT REGARD TO WHETHER THE PERSON HAS BEEN ELECTED AN OFFICER. THE INDEPENDENT COMPENSATION STUDY FOCUSES ON THE COMPENSATION PAID TO FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY-SITUATED ORGANIZATIONS AND ALSO CONSIDERS INDUSTRY COMPENSATION SURVEYS. THE COMPENSATION STUDY IS PROVIDED TO THE ORGANIZATION'S EXECUTIVE COMMITTEE, TOGETHER WITH A REASONED WRITTEN OPINION FROM THE COMPENSATION CONSULTANT THAT THE PROPOSED COMPENSATION ARRANGEMENTS FOR THE DISQUALIFIED PERSONS ARE "REASONABLE" WITHIN THE MEANING OF TREAS. REG. 53,4958-4(B)(1)(II)(A). THE EXECUTIVE COMMITTEE SETS COMPENSATION FOR EACH DISQUALIFIED PERSON, AND MAKES A RECOMMENDATION TO THE FULL BOARD WITH RESPECT TO COMPENSATION FOR THE PRESIDENT. THE FULL BOARD THEN REVIEWS THE COMPENSATION STUDY AND OPINION FOR THE PRESIDENT, TOGETHER WITH THE RECOMMENDATION OF THE

Schedule O (Form 990 or 990-EZ) 2016

Schedule O (Form 990 or 990-EZ) 2016					
Name of the organization	Employer identification number				
PEW RESEARCH CENTER	20-0881724				

EXECUTIVE COMMITTEE, AND MAKES A DECISION WITH RESPECT TO THE PRESIDENT'S COMPENSATION. THE EXECUTIVE COMMITTEE AND BOARD RELY ON THE COMPENSATION CONSULTANT'S OPINION AND COMPENSATION STUDY TO GUIDE THEIR REVIEW, DELIBERATION, AND APPROVAL OF THE PROPOSED COMPENSATION ARRANGEMENTS, AND THEIR DECISIONS REGARDING COMPENSATION (INCLUDING THE BASES FOR THESE DECISIONS) ARE DOCUMENTED IN THE MINUTES. THE EXECUTIVE COMMITTEE AND BOARD MEMBERS WHO VOTE ON COMPENSATION FOR DISQUALIFIED PERSONS AND PRESIDENT DO NOT HAVE A CONFLICT OF INTEREST WITH REGARD TO THESE COMPENSATION ARRANGEMENTS.

FORM 990, PART VI, LINE 19

IN ACCORDANCE WITH TREAS. REG. 301-6104(D)-1(A)(1) AND IRS NOTICE 2007-45, COPIES OF PEW RESEARCH CENTER'S THREE MOST RECENT FORMS 990 ARE MADE AVAILABLE FOR INSPECTION BY THE PUBLIC DURING REGULAR BUSINESS HOURS AT PEW RESEARCH CENTER'S OFFICE IN WASHINGTON, DC. PEW RESEARCH CENTER'S MOST RECENT FORM 990 IS ALSO MADE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE. THE ORGANIZATION DOES NOT NORMALLY MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC. IN ACCORDANCE WITH TREAS. REG. 301.6104(D)-2, PEW RESEARCH CENTER'S IRS FORM 1023 IS MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND STAFF CONFLICT OF INTEREST POLICY ARE ALSO MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII, LINE 1A

AS PER PEW RESEARCH CENTER'S BYLAWS, OFFICERS MAY INCLUDE ONE OR MORE VICE PRESIDENTS AND ARE DESIGNATED BY THE BOARD OF DIRECTORS. VICE PRESIDENTS NOT DESIGNATED BY THE BOARD AS OFFICERS ARE REPORTED AS KEY EMPLOYEES.

FORM 990, PART XII, LINE 2C

THE PEW RESEARCH CENTER IS AUDITED AS PART OF THE CONSOLIDATED FINANCIAL STATEMENTS OF ITS PARENT, THE PEW CHARITABLE TRUSTS. THE AUDIT COMMITTEE OF THE PEW CHARITABLE TRUSTS SELECTS THE INDEPENDENT ACCOUNTANT AND ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT. THE CONSOLIDATED FINANCIAL STATEMENTS RECEIVED AN UNQUALIFIED AUDIT OPINION FOR THIS FISCAL YEAR.

ATTACHMENT 1

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

PEW RESEARCH CENTER IS A NONPARTISAN "FACT TANK" THAT INFORMS THE PUBLIC ABOUT THE ISSUES, ATTITUDES AND TRENDS SHAPING AMERICA AND THE WORLD. THE PEW RESEARCH CENTER GENERATES A FOUNDATION OF FACTS THAT ENRICHES THE PUBLIC DIALOGUE AND SUPPORTS SOUND DECISION-MAKING. IT CONDUCTS PUBLIC OPINION POLLING, DEMOGRAPHIC RESEARCH, CONTENT ANALYSIS AND OTHER EMPIRICAL SOCIAL SCIENCE RESEARCH. PEW RESEARCH CENTER DOES NOT TAKE POLICY POSITIONS. IT IS A SUBSIDIARY OF THE PEW CHARITABLE TRUSTS.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

PEW RESEARCH CENTER'S RELIGION & PUBLIC LIFE RESEARCH: WE SEEK TO PROMOTE A DEEPER UNDERSTANDING OF ISSUES AT THE INTERSECTION OF

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Schedule O (Form 990 or 990-EZ) 2016		Page 2
Name of the organization	Employer identification number	
PEW RESEARCH CENTER	20-0881724	

ATTACHMENT 2 (CONT'D)

RELIGION AND PUBLIC AFFAIRS IN THE U.S. AND AROUND THE WORLD. THROUGH PUBLIC OPINION SURVEYS, DEMOGRAPHIC STUDIES AND OTHER SOCIAL SCIENCE RESEARCH, WE EXAMINE THE RELIGIOUS COMPOSITION OF COUNTRIES, THE INFLUENCE OF RELIGION ON POLITICS, THE EXTENT OF GOVERNMENT AND SOCIAL RESTRICTIONS ON RELIGION, AND VIEWS ON ABORTION, SAME-SEX MARRIAGE, STEM CELL RESEARCH AND MANY OTHER TOPICS. OUR U.S. RELIGIOUS LANDSCAPE SURVEY IS A BENCHMARK FOR UNDERSTANDING RELIGION IN THE UNITED STATES. OUR PEW-TEMPLETON GLOBAL RELIGIOUS FUTURES RESEARCH ANALYZES RELIGIOUS CHANGE AND ITS IMPACT ON SOCIETIES AROUND THE WORLD.

	ATTACHME	NT 3
990, PART VII- COMPENSATION OF THE FIVE HIGHES	T PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ABT SRBI, INC. 275 7TH AVENUE, SUITE 2700 NEW YORK, NY 10001	SURVEY	3,263,061.
PRINCETON SURVEY RESEARCH ASSOCIATES 600 ALEXANDER ROAD, SUITE 2-2 PRINCETON, NJ 08540	SURVEY	2,496,641.
TNS UK LTD THE HOUSE WESTGATE LONDON UNITED KINGDOM W5 1UA	SURVEY	1,297,113.
GFK CUSTOM RESEARCH, LLC 120 EAGLE ROCK AVENUE STE 200 EAST HANOVER, NJ 07936	SURVEY	342,210.
OPINION RESEARCH BUSINESS 310 E MAIN STREET SUITE 110 CHARLOTTESVILLE, VA 22902	SURVEY	304,773.

Schedule O (Form 990 or 990-EZ) 2016

JSA 6E1228 1.000

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Schedule O (Form 990 or 990-EZ) 2016				Page 2					
Name of the organization	Name of the organization								
PEW RESEARCH CENTER			20-0881	724					
		=	ATTACHMENT	4					
FORM 990, PART IX - OTHER FEES									
	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING					
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES					
POLLING FEES	11,311,737.	11,311,737.							
OTHER FEES	963,748.	940,544.	21,120.	2,084.					
TOTALS	12,275,485.	12,252,281.	21,120.	2,084.					

OMB No. 1545-0047

Open to Public

Inspection

6

2

Employer identification number

20-0881724

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R

(Form 990)

PEW RESEARCH CENTER

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section 5 contr enti	12(b)(13) olled
							Yes	No
(1) THE PEW CHARITABLE TRUSTS	56-2307147							
2005 MARKET STREET	PHILADELPHIA, PA 19103	CHARITABLE	PA	501(C)(3)	7	N/A		Х
(2)								
(3)								
(4)								
(5)								
(6)								
		1						
(7)								
		1						

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

Schedule R (Form 990) 2016

JSA

Schedule R (Form 990) 2016

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging tner?	(k) Percentage ownership
				,			Yes	No		Yes	No	
(1)	_											
(2)	_											
(3)	_											
(4)	_											
(5)	_											
(6)	_											
(7)	_											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sectio 512(b)(controll entity
(1)	_						Yes N
(2)	-						
(3)	_						
(4)	_						
(5)	_						
(6)	-						
(7)	_						

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Part V	Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Par	t IV, line 34, 35b, or 36.				
Note: C	omplete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 Du	ring the tax year, did the organization engage in any of the following transactions with one or more i	related organizations lis	ted in Parts II-IV?				
a Re	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			[1a		Х
b Gif	t, grant, or capital contribution to related organization(s)				1b		Х
c Gif	t, grant, or capital contribution from related organization(s)				1c	Х	
d Loa	ans or loan guarantees to or for related organization(s)				1d		Х
e Loa	ans or loan guarantees by related organization(s)				1e		Х
f Div	idends from related organization(s)				1f		Х
q Sa	le of assets to related organization(s)				1g		Х
	rchase of assets from related organization(s)				1h		X
i Exe	change of assets with related organization(s)			•••••	1i		X
i Lea	ase of facilities, equipment, or other assets to related organization(s)				1j		Х
, _0					,		
k Lea	ase of facilities, equipment, or other assets from related organization(s)				1k		х
I Pe	formance of services or membership or fundraising solicitations for related organization(s)			•••••	11		X
m Pe	formance of services or membership or fundraising solicitations by related organization(s)			•••••	1m	Х	
n Sh	aring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X	
	aring of paid employees with related organization(s)				10	X	
• •							
p Re	imbursement paid to related organization(s) for expenses.				1p	Х	_
-	imbulsement paid by related organization(s) for expenses				1q		x
9 100					- 9		
r Oth	ner transfer of cash or property to related organization(s)				1r		х
s Oth	her transfer of cash or property from related organization(s).			•••••	1s	Х	
2 If t	ne answer to any of the above is "Yes," see the instructions for information on who must complete t	this line, including cove	red relationships and transa	action thres	-		
	(a)	(b)	(c)		(d)		
	Name of related organization	Transaction	Amount involved	Method o			ıg
		type (a-s)		amour	nt invo	lvea	
(1)							
<u> </u>							
(2)							
<u> </u>							
(3)							
<u> </u>							
(4)							
.,							
(5)							
<u></u>							
(6)							
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Schedule R (Form 990) 2016

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

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

(a) Name, address, and EIN of entity	(a) (b) (c) , and EIN of entity Primary activity Legal domicile (state or foreign country)		(d) (e) (f) Predominant Are all partners Share of total income income (related, excluded from tax under 501(c)(3) total income		(f) Share of total income	(f) (g) hare of Share of l income end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			sections 512-514)	Yes	No			Yes	No		Yes	No	
1)													
2)													
3)													
4)													
5)													
6)													
7)													
8)													
9)													
0)													
1)													
2)													
3)													
4)													
5)													
6)													

JSA 6E1310 1.000

Schedule R (Form 990) 2016

Page 5

 Part VII
 Supplemental Information

 Provide additional information for responses to questions on Schedule R. See instructions.

Cumulative E-File History 2016									
Federal									
Locat	tor: 0022NL								
Taxpayer Nar	me: Pew Research Center								
Return Ty	pe: 990, 990								
Submitted Date	4/20/2018 3:09:45 PM]							
Acknowledgement Da	ite 4/20/2018 3:26:21 PM								
Status	Accepted								
Submission I D	23695320181105000003								
Print		Close							

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.
 Information about Form 8868 and its instructions is at www.irs.gov/form8868.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying n								
Type or	Name of exempt organization or other filer, see in	structions.		Employer identification num	ber (EIN) o	or		
print				20 0001724				
File by the	PEW RESEARCH CENTER Number, street, and room or suite no. If a P.O. bo	v. coo inctru	tions	20-0881724				
due date for	1615 L STREET, NW, STE 800		20015.	Social security number (SSN	1)			
filing your return. See		or post office, state, and ZIP code. For a foreign address, see instructions.						
instructions.	WASHINGTON, DC 20036	a foreigit au						
	,					01		
Enter the Re	eturn Code for the return that this application	is for (file	a separate application fo	or each return)				
Application			Application			Return		
Is For		Code	Is For			Code		
Form 990 o	r Form 990-EZ	01	Form 990-T (corporat	ion)		07		
Form 990-B	L	02	Form 1041-A			08		
Form 4720	(individual)	03	Form 4720 (other tha	n individual)		09		
Form 990-PI	=	04	Form 5227			10		
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T	(trust other than above)	06	Form 8870			12		
 If the orga If this is for the whole a list with the 1 I request for the organization x 2 If the tage 	e No. ► _ 202_419-4319 anization does not have an office or place of or a Group Return, enter the organization's for e group, check this box►	business ir ur digit Gro f it is for pa ion is for. ntil for the org	the United States, check oup Exemption Number (art of the group, check t <u>05/15</u> , 20 <u>1</u> anization's return for:	GEN) his box ▶ .8, to file the exempt o	If th] and att 	ach		
	change in accounting period							
	application is for Forms 990-BL, 990-PF, 9	90-1, 4720	o, or 6069, enter the		_	0.		
	undable credits. See instructions.	4700 0			a \$	0.		
	application is for Forms 990-PF, 990-T,		· · · ·			0.		
	ted tax payments made. Include any prior yea e due. Subtract line 3b from line 3a. Include				b \$	0.		
	onic Federal Tax Payment System). See instru					0.		
	u are going to make an electronic funds withdrawa		it) with this Form 9969					
-	a are going to make an electronic runds withdrawa		ii) with this form odbo, se		0079-EU I	n payment		
instructions.					0000	(D. 1.00)		

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)

OMB No. 1545-1709