GRANT THORNTON LLP 75 State Street, 13th floor Boston, MA 02109 617-723-7900

The American Ireland Fund (DBA The Ireland Funds America / The Ireland Funds) Instructions for Filing Form 8879-EO IRS e-file Signature Authorization for Form 990 For the year ended December 31, 2017

The original IRS E-file Signature Authorization form should be signed (use full name) and dated by an authorized officer of the organization.

Return your signed IRS e-file Signature Authorization Form 8879-E0 to:

GRANT THORNTON LLP 75 State Street Boston MA 02109

There is no tax due with the filing of this return.

Do NOT separately file Form 990 with the Internal Revenue Service. Doing so will delay the processing of your return. We must receive your signed form before we can electronically transmit your return, which is due on or before November 15, 2018. We would appreciate you returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of your return.

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| Form 8879-EO   | IRS <i>e-file</i> Signature Authorization for an Exempt Organization  |  | OMB No. 1545-1878  |
|--|---|--|--|
|  | For calendar year 2017, or fiscal year beginning, 2017, and ending  | 20   |  |
|  | Do not send to the IRS. Keep for your records.  | , 20   | 2017   |
| Department of the Treasury<br>Internal Revenue Service   | ► Go to www.irs.gov/Form8879EO for the latest information.  |  |  |
| Name of exempt organization  |   | Employer iden  | tification number  |
| THE AMERICAN   | IRELAND FUND (DBA THE IRELAND   | 25-130   | 6992   |
| Name and title of officer  |   |  |  |
| ANNE M. MOONE  |   |  |  |
|  | turn and Return Information (Whole Dollars Only)  |  |  |
| check the box on line 1<br>leave line 1b, 2b, 3b, 4  | eturn for which you are using this Form 8879-EO and enter the applicable amo<br>a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being fil-<br>b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -(<br>w. Do not complete more than one line in Part I.   | ed with this f   | orm was blank, then  |
| 1a Form 990 check h  | ere <b>b Total revenue,</b> if any (Form 990, Part VIII, column (A), line 12)   | 1b   | 32783549.  |
| 2a Form 990-EZ chec  |   |  |  |
| 3a Form 1120-POL ch  |   |  |  |
| 4a Form 990-PF chec  |   |  |  |
| 5a Form 8868 check   | nere 🕨 🔄 b Balance Due (Form 8868, line 3c)   | 5b _   |  |
|  |   |  |  |
| Part II Declaration  | on and Signature Authorization of Officer   |  |  |
| to send the organizatio<br>the transmission, (b) the<br>authorize the U.S. Trea<br>financial institution accor<br>return, and the financia<br>Agent at 1-888-353-45<br>involved in the process<br>resolve issues related | c return. I consent to allow my intermediate service provider, transmitter, or ele<br>n's return to the IRS and to receive from the IRS (a) an acknowledgement of rece<br>e reason for any delay in processing the return or refund, and (c) the date of any<br>sury and its designated Financial Agent to initiate an electronic funds withdrawa<br>ount indicated in the tax preparation software for payment of the organization's<br>I institution to debit the entry to this account. To revoke a payment, I must conta<br>7 no later than 2 business days prior to the payment (settlement) date. I also a<br>ng of the electronic payment of taxes to receive confidential information necess<br>o the payment. I have selected a personal identification number (PIN) as my sig<br>applicable, the organization's consent to electronic funds withdrawal. | eipt or reason<br>refund. If app<br>al (direct debit<br>federal taxes<br>act the U.S. Tr<br>authorize the<br>sary to answe | for rejection of<br>blicable, I<br>) entry to the<br>owed on this<br>reasury Financial<br>financial institutions<br>or inquiries and |
| Officer's PIN: check of  |   |  |  |
|  | -   | 1262   |  |
| X I authorize GF   | ERO firm name Enter   | five numbers, but t enter all zeros  | as my signature<br><sup>ut</sup>   |
| being filed with   | tion's tax year 2017 electronically filed return. If I have indicated within this retu<br>a state agency(ies) regulating charities as part of the IRS Fed/State program,<br>by PIN on the return's disclosure consent screen.   |  |  |
| If I have indicat  | the organization, I will enter my PIN as my signature on the organization's tax ed within this return that a copy of the return is being filed with a state agency(in ate program, I will enter my PIN on the return's disclosure consent screen.   |  |  |
| Officer's signature  | Date 🕨 1 1  | L/14/201   | 8  |
|  | on and Authentication   | -,, 201  | ~  |
| ERO's EFIN/PIN. Enter  | your six-digit electronic filing identification   | 5 8 6 6<br>Do not enter  | 3 6 6 0 5<br>all zeros   |
| indicated above. I conf  | numeric entry is my PIN, which is my signature on the 2017 electronically filed is<br>rm that I am submitting this return in accordance with the requirements of <b>Pub.</b><br>red IRS <i>e-file</i> Providers for Business Returns.   | eturn for the <b>4163,</b> Moder   | organization<br>nized e-File (MeF)   |
| ERO's signature  | ntr L young Date ► 11/  | /14/2018   |  |
|  |   |  |  |
|  | ERO Must Retain This Form - See Instructions  | •  |  |
|  | Do Not Submit This Form To the IRS Unless Requested To Do   |  | 0070 50  |
| I UI FAPEIWUIK KEUUC   | ion Act Notice, see back of form.   | ŀ  | Form 8879-EO (2017)  |

Form 990

# **Return of Organization Exempt From Income Tax**

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Open to Public

OMB No. 1545-0047

| Internal Revenue Service Go to www.irs.gov/Form990 for instr  |  |            |                                       | nstructions a   | and the la          | test infor  | mation.               |            |             | Inspec  | ction      |               |             |      |
|---|--|------------|---------------------------------------|-----------------|---------------------|-------------|-----------------------|------------|-------------|---|------------|---------------|-------------|------|
| Α   | For the 2017   | calend     | ar year, or tax ye                    | ar beginning    | j                   |             | , 2017                | ', and end | ling        |   |            | ,             | 20          |      |
| в   | Check if applicable:                                   |            | of organization TH<br>S AMERICA / THE |                 |                     | (DBA THI    | IRELAND               |            |             | D Employer in<br>25-13                            |            |               | mber        |      |
|   | Address<br>change                                      | Doing      | business as                           |                 |                     |             |                       |            |             |   |            |               |             |      |
|   | Name change  | Numb       | er and street (or P                   | .O. box if mail | is not delivered to | street add  | ress)                 | Room/su    | ite         | E Telephone                                       | number     |               |             |      |
|   | Initial return   | 10         | POST OFFIC                            | E SQUAR         | Ξ                   |             |                       | STE        | 1205        | (617) 5   | 74-0       | 720           |             |      |
|   | Final return/<br>terminated                            | City c     | r town, state or pro                  | ovince, country | , and ZIP or foreig | gn postal c | ode                   | •          |             |   |            |               |             |      |
|   | Amended  | BOS        | TON, MA 02                            | 109             |                     |             |                       |            |             | G Gross recei                                     | pts \$     | 4             | 2,381       | ,900 |
|   | Application<br>pending                                 |            | and address of pr                     | •               | -                   | -           | OTTRELL,<br>ON, MA 02 | -          | G           | H(a) Is this a g<br>subordina<br>H(b) Are all sub | tes?       |               | Yes<br>Yes  | X N  |
| I   | Tax-exempt st  | tatus:     | X 501(c)(3)                           | 501(c) (        | ) ┥ (ins            | ert no.)    | 4947(a)(1             | ) or       | 527         | lf "No,"  | attach a l | list. (see ii | nstructions | s)   |
| J   | Website: 🕨   | WWW.       | HEIRELAND                             | UNDS.OR         | G                   |             |                       |            |             | H(c) Group exe                                    | emption n  | umber         | ►           |      |
| κ   | Form of organ  | nization:  | X Corporation                         | Trust           | Association         | Other       | ►                     | LYe        | ear of form | ation: 1976 <b>N</b>                              | State      | of legal      | domicile:   | PA   |
| Ρ   |  | ummary     |                                       |                 | •                   |             |                       |            |             |   |            |               |             |      |
|   | 1 Briefly  | y descrit  | e the organization                    | on's mission    | or most signific    | cant activi | ties: SUPPC           | RT PEA     | ACE, C      | ULTURE, C   | HARI       | TY, I         | AND         |      |
| e   |  |            | N PRIMARIL                            |                 |                     |             |                       |            |             |   |            |               |             |      |
| Governance  |  |            |                                       |                 |                     |             |                       |            |             |   |            |               |             |      |
| ver   | 2 Chec   | k this bo  | K 🕨 🔄 if the                          | organization    | discontinued i      | ts operat   | ions or dispos        | ed of mor  | e than 25°  | % of its net ass                                  | ets.       |               |             |      |
|   |  | per of vo  | ing members of                        | the governin    | ig body (Part VI    | , line 1a)  |                       |            |             |   | 3          |               |             | 59.  |
| s<br>S  | 4 Numb   | per of ind | lependent voting                      | members of      | the governing       | ) body (Pa  | rt VI, line 1b)       |            |             |   | 4          |               |             | 58.  |
| 4       Number of independent voting members of the governing body (Part VI, line 1b)       4         5       Total number of individuals employed in calendar year 2017 (Part V, line 2a)       5         6       Total number of volunteers (estimate if necessary)       6 |  |            |                                       |                 |                     | 23.         |                       |            |             |   |            |               |             |      |
| çi  | 6 Total number of volunteers (estimate if necessary) 6 |            |                                       |                 |                     |             | 222.                  |            |             |   |            |               |             |      |
| 4   | I a Tolai  |            | d business reven                      |                 |                     |             |                       |            |             |   |            |               |             | 0.   |
|   | <b>b</b> Net u   | nrelated   | business taxable                      | e income from   | n Form 990-T, I     | line 34 🔒   |                       |            | <u></u>     |   | 7b         |               |             | 0.   |
|   | 1  |            |                                       |                 |                     |             |                       |            | 1           | Drier Veer  |            | <u> </u>      | urrant V    |      |

| Ă                    | 7a   | Total unrelated business revenue from Part VIII, column (C), line 12               |                        | 7a   | 0.           |
|----------------------|------|--|------------------------|------|--------------|
|                      | b    | Net unrelated business taxable income from Form 990-T, line 34                     |                        | 7b   | 0.           |
|                      |      |  | Prior Year             |      | Current Year |
| e                    | 8    | Contributions and grants (Part VIII, line 1h)                                      | 23,355,91              | 6.   | 34,979,673.  |
| evenue               | 9    | Program service revenue (Part VIII, line 2g)                                       |                        | 0.   | 0.           |
| Revi                 | 10   | Investment income (Part VIII, column (A), lines 3, 4, and 7d)                      | 426,08                 | 0.   | 403,335.     |
| œ                    | 11   | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)           | -2,129,66              | 7.   | -2,599,459.  |
|                      | 12   | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 21,652,32              | 9.   | 32,783,549.  |
|                      | 13   | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                   | 13,403,28              | 3.   | 27,232,325.  |
|                      | 14   | Benefits paid to or for members (Part IX, column (A), line 4)                      |                        | 0.   | 0.           |
| ş                    | 15   | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  | 2,997,72               | 5.   | 3,334,217.   |
| nse                  | 16 a | Professional fundraising fees (Part IX, column (A), line 11e)                      | 31,00                  | 0.   | 24,150.      |
| xpe                  |      | Total fundraising expenses (Part IX, column (D), line 25) ▶1,739,404.              |                        |      |              |
| ш                    | 17   | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                       | 2,827,82               | 4.   | 2,538,046.   |
|                      | 18   | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)          | 19,259,83              | 2.   | 33,128,738.  |
|                      | 19   | Revenue less expenses. Subtract line 18 from line 12                               | 2,392,49               | 7.   | -345,189.    |
| s or<br>ces          |      |  | Beginning of Current Y | 'ear | End of Year  |
| sets<br>alan         | 20   | Total assets (Part X, line 16)   | 21,352,28              | 4.   | 24,976,327.  |
| t Assets<br>d Balanc | 21   | Total liabilities (Part X, line 26)  | 7,240,55               | 7.   | 9,652,243.   |
| Punet                | 22   | Net assets or fund balances. Subtract line 21 from line 20                         | 14,111,72              | 7.   | 15,324,084.  |

Signature Block Part II

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| Ciana                | ►  |                                 |            | 11/14/                 | 2018       |  |  |
|----------------------|--|---------------------------------|------------|------------------------|------------|--|--|
| Sign                 | Signature of officer   |                                 |            | Date                   |            |  |  |
| Here                 | ANNE M. MOONEY   | CFO                             |            |                        |            |  |  |
|                      | Type or print name and title   |                                 |            |                        |            |  |  |
|                      | Print/Type preparer's name   | Preparer's signature            | Date       | Check if               | PTIN       |  |  |
|                      | CURTIS YOUNG   |                                 | 11/14/2018 | 8 self-employed        | P01533495  |  |  |
| Preparer<br>Use Only | Firm's name GRANT THORNTON LL  | P                               |            | Firm's EIN ► 36-       | -6055558   |  |  |
|                      | Firm's address ▶75 STATE STREET B  |                                 |            | Phone no. 617-723-7900 |            |  |  |
| May the              | IRS discuss this return with the preparer  | shown above? (see instructions) |            |                        | . X Yes No |  |  |
| For Paper            | For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2017) |                                 |            |                        |            |  |  |

erwork Reduction Act Notice, see the separate instructions

THE AMERICAN IRELAND FUND (DBA THE IRELAND

| Fo | rm 990 (2017) Page Z   |
|----|--|
| P  | Part III Statement of Program Service Accomplishments  |
|    | Check if Schedule O contains a response or note to any line in this Part III                                 |
| 1  | Briefly describe the organization's mission:   |
|    | DEDICATED TO SUPPORTING PROGRAMS OF PEACE AND RECONCILIATION, ARTS   |
|    | AND CULTURE, EDUCATION AND COMMUNITY DEVELOPMENT PRIMARILY IN THE  |
|    | ISLAND OF IRELAND.   |
|    |  |
| 2  | Did the organization undertake any significant program services during the year which were not listed on the |
|    | prior Form 990 or 990-EZ?  |
|    | If "Yes," describe these new services on Schedule O.   |
| 2  | Did the organization case conducting or make significant changes in how it conducts any program              |

| services?                                       | Yes | X No |
|---|-----|------|
| If "Yes," describe these changes on Schedule O. |     |      |

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

| 4a | (Code:        | ) (Expenses \$ | 27,232,325. includ | ing grants of \$ | 27,232,325. | ) (Revenue \$ | ) |
|----|---------------|----------------|--------------------|------------------|-------------|---------------|---|
|    | THE AMERICAN  | IRELAND FUND   | MAKES GRANTS       | WORLDWIDE,       | FROM PROGRA | MS IN         |   |
|    | IRISH COMMUNI | TIES TO CAUS   | ES AROUND THE      | WORLD THAT       | PROMOTE PEA | ACE           |   |
|    | AND RECONCIL  | LATION IN NOR  | THERN IRELAND      | ; SUPPORT EI     | DUCATIONAL  |               |   |
|    | OPPORTUNITIES | G; INCREASE T  | HE AWARENESS (     | OF IRISH CUI     | LTURE; AND  |               |   |
|    | STRENGTHEN AN | ND DEVELOP CO  | MMUNITIES, PAR     | RTICULARLY H     | FOR THE     |               |   |
|    | UNDERPRIVILEO | GED IN SOCIET  | Y. THERE WERE      | 798 GRANTS       | TO 352 GRAD | JT            |   |
|    | RECIPIENTS, 7 | FOTALING \$27, | 232,325 DURING     | G CALENDAR       | YEAR 2017.  |               |   |
|    |               |                |                    |                  |             |               |   |

4b (Code: ) (Expenses \$ 1,113,399. including grants of \$ 1,113,399. ) (Revenue \$ THE AMERICAN IRELAND FUND APPLIES RESOURCES TO ASSESS THE PERFORMANCE OF GRANTEES AND PROVIDES TECHNICAL AND DIRECT PROGRAMMATIC ASSISTANCE TO ITS GRANTEES TO ENSURE THAT ALL FUNDS ARE GENERATING A MAXIMUM RETURN TO ACCOMPLISH THEIR PLANNED CHARITABLE GOALS. IN ADDITION, THE FUND PROVIDES A SUITE OF SERVICES TO GRANTEES TO HELP THEM BETTER DEVELOP THEIR CAPACITY IN TERMS OF MAKING CASES, MANAGING THEIR AFFAIRS AND ACCESSING ADDITIONAL MONIES FROM OTHER FUNDERS. THE FUND ORGANIZES SEMINARS ON THESE ISSUES AS WELL AS MEETING GRANTEES AND APPLICANTS IN EACH OF ITS OFFICES. THEREFORE RATHER THAN JUST DISTRIBUTE GRANTS, THE FUND ACTS AS A RESOURCE TO THE SECTOR.

 4c (Code: \_\_\_\_\_) (Expenses \$\_\_\_\_\_\_686,201. including grants of \$\_\_\_\_\_\_686,201. ) (Revenue \$\_\_\_\_\_\_)

 ALL OFFICES IN THE US LIAISE WITH GRANTEES AND ORGANIZATIONS IN

 IRELAND. THE FUND HELPS THEM REFINE THEIR CASES AND HELPS THEM TO

 IDENTIFY POTENTIAL DONORS AND ADVISES THESE APPLICANTS ON HOW TO

 BEST ADVOCATE FOR THEIR CHARITABLE PURPOSE. THE FUND ALSO PROVIDES

 ADVICE ON MAINTAINING GOOD DONOR RELATIONS. THE FUND HAS CO-HOSTED

 AND ASSISTED WITH A NUMBER OF EVENTS AND DINNERS TO BENEFIT IRISH

 NOT FOR PROFITS. THE FUND EFFECTIVELY PROVIDES ADVICE, AND

 MARKETING SERVICES FOR IRISH ORGANIZATIONS IN ACCESSING SUPPORT IN

 AMERICA.

 4d Other program services (Describe in Schedule O.)
 ATTACHMENT 1

 (Expenses \$ 444,986. including grants of \$ 444,986. ) (Revenue \$

 4e Total program service expenses ▶ 29,476,911.

THE AMERICAN IRELAND FUND (DBA THE IRELAND 25-1306992

| Forms | 390 (2017)  |          | F   | Page 3 |
|-------|---|----------|-----|--------|
| Part  | IV Checklist of Required Schedules  |          |     |        |
|       |   |          | Yes | No     |
| 1     | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"           |          |     |        |
|       | complete Schedule A.  | 1        | X   |        |
| 2     | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?                       | 2        | X   |        |
| 3     | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to        |          |     |        |
|       | candidates for public office? If "Yes," complete Schedule C, Part I   | 3        |     | 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        | X   |        |
| 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? If "Yes," complete Schedule D, Part V.                           | 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.  |          |     |        |
| а     | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"                  |          |     |        |
|       | complete Schedule D, Part VI  | 11a      | Х   |        |
| b     | Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more            |          |     |        |
|       | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII                                | 11b      |     | Х      |
| с     | Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more             |          |     |        |
|       | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII                               | 11c      |     | Х      |
| d     | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets        |          |     |        |
|       | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX   | 11d      |     | Х      |
| е     | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X   | 11e      | X   |        |
|       | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses |          |     |        |
|       | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  | 11f      | X   |        |
| 12a   | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete     |          |     |        |
|       | Schedule D, Parts XI and XII  | 12a      | X   |        |
| b     | Was the organization included in consolidated, independent audited financial statements for the tax year? If            |          |     |        |
|       | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional      | 12b      |     | Х      |
| 13    | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.                      | 13       |     | Х      |
|       | Did the organization maintain an office, employees, or agents outside of the United States?                             | 14a      | X   |        |
|       | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,                        |          |     |        |
|       | fundraising, business, investment, and program service activities outside the United States, or aggregate               |          |     |        |
|       | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV                          | 14b      | 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             | <u> </u> |     |        |
|       | 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       | X   |        |

Page **4** 

| Part | V Checklist of Required Schedules (continued)  |     |     |    |
|------|--|-----|-----|----|
|      |  |     | Yes | No |
| 20a  | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.                     | 20a |     | Х  |
| b    | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?     | 20b |     |    |
| 21   | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or      |     |     |    |
|      | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II                | 21  | Х   |    |
| 22   | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on    |     |     |    |
|      | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.                                     | 22  |     | Х  |
| 23   | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the              |     |     |    |
|      | organization's current and former officers, directors, trustees, key employees, and highest compensated          |     |     |    |
|      | employees? If "Yes," complete Schedule J.  | 23  | Х   |    |
| 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 |     | Х  |
| b    | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                | 24b |     |    |
| с    | Did the organization maintain an escrow account other than a refunding escrow at any time during the year        |     |     |    |
|      | to defease any tax-exempt bonds?   | 24c |     |    |
| d    | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?          | 24d |     |    |
| 25a  | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit     |     |     |    |
|      | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                    | 25a |     | Х  |
| b    | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior |     |     |    |
|      | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?     |     |     |    |
|      | If "Yes," complete Schedule L, Part I  | 25b |     | Х  |
| 26   | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any       |     |     |    |
|      | current or former officers, directors, trustees, key employees, highest compensated employees, or                |     |     |    |
|      | disqualified persons? If "Yes," complete Schedule L, Part II   | 26  |     | Х  |
| 27   | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,         |     |     |    |
|      | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled          |     |     |    |
|      | entity or family member of any of these persons? If "Yes," complete Schedule L, Part III                         | 27  |     | X  |
| 28   | Was the organization a party to a business transaction with one of the following parties (see Schedule L,        |     |     |    |
|      | Part IV instructions for applicable filing thresholds, conditions, and exceptions):                              |     |     |    |
| а    | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV          | 28a |     | Х  |
| b    | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete           |     |     |    |
|      | Schedule L, Part IV  | 28b |     | Х  |
| С    | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)  |     |     |    |
|      | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV           | 28c |     | Х  |
| 29   | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M         | 29  | Х   |    |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified   |     |     |    |
|      | conservation contributions? If "Yes," complete Schedule M  | 30  | Х   |    |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,      |     |     |    |
|      | Part I   | 31  |     | 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   | 32  |     | 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 have a controlled entity within the meaning of section 512(b)(13)?                          | 35a |     | X  |
| b    | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a          |     |     |    |
|      | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2        | 35b |     |    |
| 36   | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable             |     |     | _  |
|      | related organization? If "Yes," complete Schedule R, Part V, line 2  | 36  |     | X  |
| 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  | 37  |     | X  |
| 38   | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and       |     |     |    |
|      | 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.  | 38  | Х   |    |

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| Par  |   |          |     | <b>•••</b> |
|------|---|----------|-----|------------|
|      | Check if Schedule O contains a response or note to any line in this Part V  |          |     |            |
|      | Enter the number reported in Pox 2 of Form 1006. Enter 0 if not applicable <b>1a</b>  |          | Yes | No         |
|      | Enter the number reported in Box's of Point 1090. Enter -0- in not applicable.  | 1        |     |            |
|      | Enter the number of Forms w-2G included in line 1a. Enter -0- if not applicable.  | 1        |     |            |
| С    | Did the organization comply with backup withholding rules for reportable payments to vendors and  | 1c       | х   |            |
| 20   | reportable gaming (gambling) winnings to prize winners?   |          |     |            |
| Za   | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax<br>Statements, filed for the calendar year ending with or within the year covered by this return. 2a 23 |          |     |            |
| h    | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | 2b       | Х   |            |
| D.   | <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)   |          |     |            |
| 3a   | Did the organization have unrelated business gross income of \$1,000 or more during the year?   | 3a       |     | Х          |
|      | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O   | 3b       |     |            |
|      | At any time during the calendar year, did the organization have an interest in, or a signature or other authority   |          |     |            |
|      | over, a financial account in a foreign country (such as a bank account, securities account, or other financial  |          |     |            |
|      | account)?   | 4a       | Х   |            |
| b    | If "Yes," enter the name of the foreign country:  ATTACHMENT 2  |          |     |            |
|      | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts   |          |     |            |
|      | (FBAR).   |          |     |            |
| 5a   | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   | 5a       |     | X          |
| b    | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | 5b       |     | X          |
| C    | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.  | 5c       |     |            |
| 6a   | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the  |          |     | 37         |
|      | organization solicit any contributions that were not tax deductible as charitable contributions?  | 6a       |     | X          |
| b    | If "Yes," did the organization include with every solicitation an express statement that such contributions or  |          |     |            |
| _    | gifts were not tax deductible?  | 6b       |     |            |
| 7    | Organizations that may receive deductible contributions under section 170(c).   |          |     |            |
| а    | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods   | 70       | Х   |            |
|      | and services provided to the payor?   | 7a<br>7b | X   |            |
|      | If "Yes," did the organization notify the donor of the value of the goods or services provided?   | 10       |     |            |
| C    | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  | 7c       |     | X          |
| Ь    | 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       |     | X          |
|      | Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  | 7f       |     | X          |
|      | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  | 7g       |     |            |
| -    | 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        |     | Х          |
| 9    | Sponsoring organizations maintaining donor advised funds.   |          |     |            |
| а    | Did the sponsoring organization make any taxable distributions under section 4966?  | 9a       |     | Х          |
| b    | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?   | 9b       |     | X          |
| 10   | Section 501(c)(7) organizations. Enter:   |          |     |            |
| а    | Initiation fees and capital contributions included on Part VIII, line 12  | 4        |     |            |
| b    | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   | -        |     |            |
| 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.)   | 4.0      |     |            |
|      | 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.  | 120      |     |            |
| а    | Is the organization licensed to issue qualified health plans in more than one state?  | 13a      |     |            |
| ь.   | <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.  |          |     |            |
| Ø    | 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                               |          |     |            |
| ~    |   | 1        |     |            |
|      | 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   | 14b      |     |            |
| 10.4 |   |          |     | ·          |

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| Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"                |
|---------|---|
|         | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. |
|         | Check if Schedule O contains a response or note to any line in this Part VI   |

| Sect  | ion A. Governing Body and Management  |          |          |         |
|-------|---|----------|----------|---------|
|       |   |          | Yes      | No      |
| 1a    | Enter the number of voting members of the governing body at the end of the tax year 1a 5  | 9        |          |         |
| ···   | If there are material differences in voting rights among members of the governing body, or  | 1        |          |         |
|       | if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.  |          |          |         |
| b     | Enter the number of voting members included in line 1a, above, who are independent <b>1b</b> 5  | 3        |          |         |
| 2     | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with  | ]        |          |         |
|       | any other officer, director, trustee, or key employee?  | 2        | Х        |         |
| 3     | Did the organization delegate control over management duties customarily performed by or under the direct   |          |          |         |
|       | supervision of officers, directors, or trustees, or key employees to a management company or other person?  | 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 have members or stockholders?  | 6        |          | Х       |
| 7a    | Did the organization have members, stockholders, or other persons who had the power to elect or appoint   |          |          |         |
|       | one or 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  |          |          | 37      |
| 0     | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O   | 9        |          | Х       |
| Sect  | on B. Policies (This Section B requests information about policies not required by the Internal Revenue   | Code     | )<br>Yes | No      |
|       |   | 100      | 103      | X       |
|       | Did the organization have local chapters, branches, or affiliates?  | 10a      |          | <u></u> |
| b     | If "Yes," did the organization have written policies and procedures governing the activities of such chapters,  | 10b      |          |         |
|       | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?   | 11a      | X        |         |
| -     | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?   | IIa      |          |         |
| b     | Describe in Schedule O the process, if any, used by the organization to review this Form 990.   | 12a      | х        |         |
| 12a   | Did the organization have a written conflict of interest policy? If "No," go to line 13   | 120      |          |         |
| b     |   | 12b      | х        |         |
| ~     | rise to conflicts?  |          |          |         |
| С     | describe in Schedule O how this was done  | 12c      |          | х       |
| 13    | Did the organization have a written whistleblower policy?   | 13       | Х        |         |
| 14    | Did the organization have a written document retention and destruction policy?  | 14       | Х        |         |
| 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?   |          |          |         |
| а     | The organization's CEO, Executive Director, or top management official  | 15a      | Х        |         |
| b     | Other officers or key employees of the organization   | 15b      |          | Х       |
|       | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).   |          |          |         |
| 16a   | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  |          |          |         |
|       | with a taxable entity during the year?  | 16a      |          | Х       |
| b     | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its  |          |          |         |
|       | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the   |          |          |         |
|       | organization's exempt status with respect to such arrangements?   | 16b      |          |         |
| Secti | ion C. Disclosure   |          |          |         |
| 17    | List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3   |          |          |         |
| 18    | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. | ۱ 501 (d | c)(3)s   | only)   |

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ► ANNE M. MOONEY, CFO 10 POST OFFICE SQUARE, SUITE 1205 BOSTON, MA 02109 617-574-0720

**<sup>19</sup>** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

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| Part VII   | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Independent Contractors | and |  |  |  |  |  |  |  |  |  |
|------------|--|-----|--|--|--|--|--|--|--|--|--|
|            | Check if Schedule O contains a response or note to any line in this Part VII   |     |  |  |  |  |  |  |  |  |  |
| Section A. | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees                                      |     |  |  |  |  |  |  |  |  |  |

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

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

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

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

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

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

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

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

| (A)                          | (B)  |  | <b>(C)</b><br>Position |         |              |                                 |        | (D)                                    | (E)                              | (F)  |
|------------------------------|--|--|------------------------|---------|--------------|---------------------------------|--------|--|----------------------------------|--|
| Name and Title               | Average  | (do not check more than one                                      |                        |         |              |                                 |        | Reportable                             | Reportable                       | Estimated  |
|                              | hours per<br>week (list any                                    | box, unless person is both an<br>officer and a director/trustee) |                        |         |              |                                 |        | compensation<br>from                   | compensation from<br>related     | amount of<br>other   |
|                              | hours for<br>related<br>organizations<br>below dotted<br>line) | Individua<br>or direct   | Institutional trustee  | Officer | Key employee | Highest compensated<br>employee | Former | the<br>organization<br>(W-2/1099-MISC) | organizations<br>(W-2/1099-MISC) | compensation<br>from the<br>organization<br>and related<br>organizations |
| (1)JOHN FITZPATRICK          | 5.00   |  |                        |         |              |                                 |        |  |                                  |  |
| CHAIRMAN                     | 0.   | X  |                        | Х       |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (2)SHEILA O'MALLEY FUCHS     | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| SECRETARY                    | 0.   | X  |                        | Х       |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (3)CHRISTOPHER M. CONDRON    | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| TREASURER                    | 0.   | X  |                        | Х       |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (4)PATRICK BROE              | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (5) JEREMIAH CALLAGHAN       | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (6)LIAM CASEY                | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (7)THOMAS CODD               | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (8)JOHN CONNORS              | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (9)THOMAS CORCORAN           | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (10)JOSEPH CORCORAN          | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (11) <sup>KEVIN</sup> CURLEY | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (12)SUSAN DAVIS              | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (13)LORE MORAN DODGE         | 1.00   |  |                        |         |              |                                 |        |  |                                  | _  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |
| (14)JOHN G. DUFFY            | 1.00   |  |                        |         |              |                                 |        |  |                                  |  |
| DIRECTOR                     | 0.   | Х  |                        |         |              |                                 |        | 0.                                     | 0.                               | 0.   |

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|      |     |        |  |

|     | (A)<br>Name and title   | (B)<br>Average<br>hours per<br>week (list any<br>hours for<br>related | box,<br>office                    | iot ch<br>unles<br>r and | s per<br>I a di | tion<br>nore<br>son<br>recte | e than or<br>is both a<br>or/truste | an<br>ee) | (D)<br>Reportable<br>compensation<br>from<br>the | (E)<br>Reportable<br>compensation fro<br>related<br>organizations | 0  | (F)<br>Estimate<br>amount<br>other<br>compensa<br>from the | of<br>tion |
|-----|---|---|-----------------------------------|--------------------------|-----------------|------------------------------|-------------------------------------|-----------|--|---|----|--|------------|
|     |   | organizations<br>below dotted<br>line)                                | Individual trustee<br>or director | Institutional trustee    | Officer         | Key employee                 | Highest compensated employee        | Former    | organization<br>(W-2/1099-MISC)                  | (W-2/1099-MISC  |    | organizati<br>and relate<br>organizatio                    | on<br>ed   |
| 15  | ) JOHN DUNFEY   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 16  | ) IRIAL FINAN   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| L7  | ) ANNE FINUCANE   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| . 8 | ) ELIZABETH FRAWLEY BAGLEY  | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| L 9 | ) MICHAEL GALLAGHER   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  | _          |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 20  | ) LORETTA BRENNAN GLUCKSMAN   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 21  | ) KENNETH GORMAN  | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  | -          |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 22  | ) LESLIE KING GRENIER   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  | -          |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 23  | ) HARRY HARTFORD  | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  | -          |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 24  | ) DENIS HEALY   | 1.00  |                                   |                          |                 |                              |                                     |           |  |   |    |  | _          |
|     | DIRECTOR  | 0.  | Х                                 |                          |                 |                              |                                     |           | 0.   | (   | ). |  |            |
| 25  | ) MICHAEL HIGGINS   | 1.00  |                                   |                          |                 | _                            |                                     |           |  |   |    |  | -          |
|     | DIRECTOR  | 0.  | х                                 |                          |                 |                              |                                     |           | 0.   | (   |    |  |            |
|     |   | 0.  | Λ                                 |                          |                 |                              |                                     |           | 0.   |   | ). |  | _          |
|     | o Sub-total   |   |                                   |                          | • •             | • •                          |                                     |           | 2,026,027.                                       |   | ). | 248,   | 5          |
|     | c Total from continuation sheets to Part VII, S   |   |                                   |                          |                 | •                            | • • •                               |           | 2,026,027.                                       | (   |    | 248,   |            |
| ~   | d Total (add lines 1b and 1c)   |   |                                   |                          |                 |                              | •••                                 |           |  |   |    | 240,   | <u> </u>   |
| 2   | Total number of individuals (including but not reportable compensation from the organization        |   | nose i<br>c                       | isteo                    | a ab            | ove                          | e) who                              | re        | ceived more than                                 | \$100,000 of  |    |  |            |
|     |   |   |                                   |                          |                 |                              |                                     |           |  |   |    | Yes  |            |
| 2   | Did the experimetion list only former offic   | or directo  |                                   | 4                        |                 |                              |                                     |           | lavaa ar hishaad                                 | acmachan  |    | 103  | t          |
| 3   | Did the organization list any <b>former</b> offic<br>employee on line 1a? If "Yes," complete Schedu | ule J for suc   | ch ind                            | ividu                    | ial .           | •                            |                                     | • •       |  |   |    | 3  | l          |
| 4   | For any individual listed on line 1a, is the sorganization and related organizations graindividual  | eater than  | \$15                              | 0,00                     | )0?             | lf                           | "Yes                                | ," (      | complete Schedu                                  |   |    | 4 X  |            |
| 5   | Did any person listed on line 1a receive or for services rendered to the organization? If "Ye       | accrue con  | mpen                              | satic                    | on fr           | rom                          | n any                               | unr       | elated organization                              |   |    | 5  |            |
| S   | ection B. Independent Contractors   |   |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
| 1   | Complete this table for your five highest com<br>compensation from the organization. Report c       |   |                                   |                          |                 |                              |                                     |           |  |   |    | ax   | -          |
|     |   |   |                                   |                          |                 |                              |                                     |           |  |   |    |  |            |
|     | year. (A)   |   |                                   |                          |                 |                              |                                     |           | (B)  | I   |    | (C)  |            |

|   | (A)<br>Name and business address   | (B)<br>Description of services | <b>(C)</b><br>Compensation |
|---|--|--------------------------------|----------------------------|
| A | TTACHMENT 4  |                                |                            |
|   |  |                                |                            |
|   |  |                                |                            |
|   |  |                                |                            |
|   |  |                                |                            |
| 2 | Total number of independent contractors (including but not limited to thos more than \$100.000 in compensation from the organization ► 2 |                                |                            |

| Form   | 000 | (2017) |  |
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|         | rt VII Section A. Officers, Directors, Tr   |   | <b>y</b> <u>–</u> | ipio            | ycc           | ,                     |  | ngi         | lest compensat  |  |                        | ueu)   |                       |
|---------|---|---|-------------------|-----------------|---------------|-----------------------|--|-------------|---|--|------------------------|--|-----------------------|
|         | (A)<br>Name and title   | (B)<br>Average<br>hours per<br>week (list any<br>hours for<br>related<br>organizations<br>below dotted<br>line) | box,              | not ch<br>unles | s pe<br>d a d | ition<br>more<br>rson | e than o<br>is both<br>or/truste<br>employee | an          | (D)<br>Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | (E)<br>Reportable<br>compensation frou<br>related<br>organizations<br>(W-2/1099-MISC | m co<br>co<br>) o<br>a | (F)<br>Estimated<br>amount of<br>other<br>mpensat<br>from the<br>rganizatio<br>and relate<br>ganizatio | of<br>ion<br>on<br>ed |
| 26      | JOSEPH HOOLEY   | 1.00  |                   |                 |               |                       | be   |             |   |  |                        |  |                       |
|         | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | c c  |                        |  |                       |
| 27      | MICHAEL JACKSON   | 1.00  |                   |                 |               |                       |  |             |   |  | -                      |  |                       |
|         | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | 0  |                        |  |                       |
| 8       | ADRIAN JONES  | 1.00  | _                 |                 |               |                       |  |             |   |  |                        |  |                       |
|         | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | l c  |                        |  |                       |
| 9       |   | 1.00  |                   |                 |               |                       |  |             |   |  | -                      |  |                       |
| _       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 0       | SHAUN KELLY   | 1.00  | ~~~               |                 |               |                       |  |             | 0.  |  | -                      |  |                       |
| _       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 1       | MICHELE KESSLER   | 1.00  |                   |                 |               |                       |  |             |   |  | ·                      |  |                       |
| -       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 2       | JOHN LYNCH  | 1.00  |                   |                 |               |                       |  |             |   |  | ·                      |  |                       |
| -       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 3       | JOHN MANNING  | 1.00  |                   |                 |               |                       |  |             |   |  | ·                      |  |                       |
| _       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 4       | TARA MCCABE   | 1.00  |                   |                 |               |                       |  |             |   | Ŭ  | •                      |  |                       |
| 1       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 5       | DOLORES MCCALL  | 1.00  |                   |                 |               |                       |  |             | 0.  |  | •                      |  |                       |
| _       | DIRECTOR  | 0.  | x                 |                 |               |                       |  |             | 0.  | C  |                        |  |                       |
| 6       | ROBERT J. MCCANN  | 1.00  |                   |                 |               |                       |  |             | 0.  | 0  | •                      |  |                       |
| -       |   | +   | 37                |                 |               |                       |  |             | 0   |  |                        |  |                       |
|         | DIRECTOR  | 0.  | X                 |                 |               |                       |  |             | 0.  | C  | •                      |  |                       |
| C       | Sub-total<br>Total from continuation sheets to Part VII, S<br>Total (add lines 1b and 1c)<br>Total number of individuals (including but not |   |                   |                 |               |                       | e) who                                       | ►<br>►<br>► | ceived more than  | \$100.000 of   |                        |  |                       |
|         | reportable compensation from the organizatio  |   | 9                 | )               |               |                       | ,  | 5           |   | ,  |                        |  |                       |
|         |   |   |                   |                 |               |                       |  |             |   |  |                        | Yes  |                       |
| 3       | Did the organization list any former offic  | er, directo   | r. or             | tru             | istee         | e. I                  | kev e  | mp          | lovee, or highes  | t compensated  |                        |  |                       |
|         | employee on line 1a? If "Yes," complete Sched   |   |                   |                 |               |                       |  |             |   |  | 3                      |  |                       |
| 4       | For any individual listed on line 1a, is the  | sum of rer  | ortah             | le c            | om            | pen                   | sation                                       | ) ar        | nd other compens  | sation from the  |                        |  |                       |
| ŕ       | organization and related organizations gr   | eater than  | \$15              | 0,0             | 00?           | lf                    | "Yes   | ," (        | complete Schedu   | le J for such  |                        | v  | ſ                     |
|         | individual  |   |                   |                 |               |                       |  |             |   |  | 4                      | X  | ╞                     |
| 5       | Did any person listed on line 1a receive or<br>for services rendered to the organization? If "Y   |   |                   |                 |               |                       |  |             |   |  | 5                      |  |                       |
| 50      | ction B. Independent Contractors  | es, comple  | 10 JUI            | ieuu            | Je J          | 107                   | SUCH   | Der S       | 3011  |  | 1 3                    |  | L                     |
| зе<br>1 | Complete this table for your five highest com<br>compensation from the organization. Report of  |   |                   |                 |               |                       |  |             |   |  |                        | x  |                       |
|         |   |   |                   |                 |               |                       |  |             |   |  |                        |  |                       |

|   | (A)<br>Name and business address  | (B)<br>Description of services | <b>(C)</b><br>Compensation |
|---|---|--------------------------------|----------------------------|
|   |   |                                |                            |
|   |   |                                |                            |
|   |   |                                |                            |
|   |   |                                |                            |
| 2 | Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► |                                |                            |

|        | 000 | (2047) |  |
|--------|-----|--------|--|
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|         | (A)<br>Name and title  |   | (B)<br>Average Pc<br>hours per (do not chec<br>week (list any<br>hours for officer and a |                       |         |              |                              | an<br>ee)    | <b>(D)</b><br>Reportable<br>compensation<br>from<br>the | (E)<br>Reportable<br>compensation from<br>related<br>organizations | (F)<br>Estimated<br>amount of<br>other<br>compensation   |
|---------|--|---|--|-----------------------|---------|--------------|------------------------------|--------------|---|--|--|
|         |  | related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former       | organization<br>(W-2/1099-MISC)                         | (W-2/1099-MISC)  | from the<br>organization<br>and related<br>organizations |
| 37      | ) WILLIAM S. MCKIERNAN   | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 8       | ) WILLIAM MCNALLY  | 16.00   |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 98,700.   | 0.   |  |
| 9       | ) EUGENE MCQUADE   | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 0       | ) THOMAS F. MEAGHER, JR.   | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 1       | ) ANGELA MOORE   | 1.00  |  |                       |         |              | T                            |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 2       | ) BARTHOLOMEW MURPHY   | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 3       | ) WILLIAM MURPHY   | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 4       |  | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 5       | ) DUNCAN NIEDERAUER  | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | Х  |                       |         |              |                              |              | 0.  | 0.   |  |
| 6       | ) MICHAEL O'HALLERAN   | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | X  |                       |         |              |                              |              | 0.  | 0.   |  |
| 7       | ) RONALD O'HANLEY  | 1.00  |  |                       |         |              |                              |              |   |  |  |
|         | DIRECTOR   | 0.  | X  |                       |         |              |                              |              | 0.  | 0.   |  |
|         | <b>Total from continuation sheets to Part VII, S</b><br><b>Total (add lines 1b and 1c)</b><br>Total number of individuals (including but not<br>reportable compensation from the organizatio | limited to t                                      |  |                       |         |              | e) who                       | ►<br>►<br>re | ceived more than  | \$100,000 of   | Yes  |
| 3       | Did the organization list any <b>former</b> offic<br>employee on line 1a? <i>If "Yes," complete Sched</i>  | ule J for suc                                     | ch ind   | lividi                | ual     |              |                              | • •          |   |  | 3  |
| 1       | For any individual listed on line 1a, is the organization and related organizations gr individual  | eater than  | \$15   | 50,0<br>•             | 00?     | lf           | "Yes                         | ," ·         | complete Schedu   | le J for such  | <b>4</b> X   |
|         | Did any person listed on line 1a receive or<br>for services rendered to the organization? If "Y  |   |  |                       |         |              |                              |              |   |  | 5  |
|         | ction B. Independent Contractors   |   | ndona  | ende                  |         |              |                              |              |   |  |  |
| 5<br>Se | Complete this table for your five highest com<br>compensation from the organization. Report of<br>year.  |   |  | the                   | e ca    | ienc         | ar yea                       |              |   |  |  |
| 6       | Complete this table for your five highest com<br>compensation from the organization. Report of   | compensation                                      |  | the                   | e ca    |              | ar yea                       |              | (B)<br>Description of se                                |  | <b>(C)</b><br>ompensation                                |
| Se      | Complete this table for your five highest com<br>compensation from the organization. Report of<br>year.<br>(A)   | compensation                                      |  | the                   | e ca    |              |                              |              | <b>(B)</b><br>Description of se                         |  | (C)  |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►

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|------|-----|--------|--|
| Form | 990 | (2017) |  |

|  | (A)<br>Name and title  | Name and title Average Position<br>hours per (do not check more th<br>box, unless person is to<br>officer and a director/to |                                   |                          |                         |                                 |               | (D)<br>Reportable<br>compensation<br>from<br>the | (E)<br>Reportable<br>compensation from<br>related<br>organizations | (F)<br>Estimated<br>amount of<br>other<br>compensation<br>from the |  |
|--|--|---|-----------------------------------|--------------------------|-------------------------|---------------------------------|---------------|--|--|--|--|
|  |  | organizations<br>below dotted<br>line)  | Individual trustee<br>or director | Institutional trustee    | Key employee<br>Officer | Highest compensated<br>employee | Former        | organization<br>(W-2/1099-MISC)                  | (W-2/1099-MISC)  | organization<br>and related<br>organizations                       |  |
| 8)   | THOMAS E. O'NEILL  | 1.00  |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | Х                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| 9)   | THOMAS P. O'NEILL  | 1.00  |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | Х                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| ))   | CHRYSS O'REILLY  | 1.00  |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | x                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| L)   | ANTHONY O'REILLY   | 1.00  |                                   | $\vdash$                 |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | x                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| <u>,                                    </u> |  | 1.00  |                                   | $\left  \right $         | _                       | -                               |               | 0.   | 0.   |  |  |
| <u> </u>                                     | THOMAS C. QUICK  | +   |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | X                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| )  | THOMAS QUINLAN   | 1.00  | -                                 |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | Х                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| )  | PAUL QUINN   | 1.00  |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | X                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| )  | ROBERT REYNOLDS  | 1.00  |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | + <u>0</u> .  | x                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| 5)   | JAMES ROONEY   | 1.00  |                                   |                          |                         |                                 |               |  |  |  |  |
|  | DIRECTOR   | 0.  | x                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| ')   | CRAIG SULLIVAN   | 1.00  |                                   | $\left  \right $         | _                       |                                 |               | 0.   |  |  |  |
|  | DIRECTOR   | 0.  | x                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
|  |  |   |                                   |                          |                         | -                               |               | 0.   | 0.   |  |  |
| )  | EJ TRACY   | 1.00  |                                   |                          |                         |                                 |               | _  |  |  |  |
|  | DIRECTOR   | 0.  | Х                                 |                          |                         |                                 |               | 0.   | 0.   |  |  |
| c<br>d                                       | Sub-total<br>Total from continuation sheets to Part VII, S<br>Total (add lines 1b and 1c)<br>Total number of individuals (including but not<br>reportable compensation from the organizatio                  | limited to t  |                                   |                          |                         | /e) who                         | ►<br>►<br>ore | eceived more than                                | \$100,000 of   |  |  |
|  | Did the organization list any <b>former</b> offic<br>employee on line 1a? <i>If "Yes," complete Scheo</i><br>For any individual listed on line 1a, is the  | <i>lule J for su</i><br>sum of rep  | ch ind<br>oortab                  | <i>lividua</i><br>ole co | al .<br>mpe             | nsatior                         | n ai          | nd other compens                                 | sation from the  | Yes<br>3   |  |
|  | organization and related organizations gr<br>individual  |   |                                   |                          |                         |                                 | • •           |  |  | <b>4</b> X   |  |
|  |  |   |                                   |                          |                         |                                 |               |  |  | 5  |  |
|  | Did any person listed on line 1a receive or<br>for services rendered to the organization? <i>If "Y</i><br>tion <b>B. Independent Contractors</b>   | es, comple  |                                   |                          |                         |                                 |               |  |  |  |  |
| ec   |  | pensated in   |                                   |                          |                         |                                 |               |  |  |  |  |
| ec   | for services rendered to the organization? <i>If "Y</i><br>tion B. Independent Contractors<br>Complete this table for your five highest con<br>compensation from the organization. Report of                 | pensated in<br>compensati   |                                   |                          |                         |                                 |               |  | nin the organizatio  |  |  |
| ec   | for services rendered to the organization? <i>If "Y</i><br>tion B. Independent Contractors<br>Complete this table for your five highest com<br>compensation from the organization. Report of<br>year.<br>(A) | pensated in<br>compensati   |                                   |                          |                         |                                 |               | ending with or with                              | nin the organizatio  | n's tax<br>(C)   |  |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization  $\blacktriangleright$ JSA 7E1055 1.000

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|      |     |        |  |

| Part VII Section A. Officers, Directors, Tru   |  | усп                               |                       |         |              |                     |                                 |  |   |
|--|--|-----------------------------------|-----------------------|---------|--------------|---------------------|---------------------------------|--|---|
| (A)<br>Name and title  | (B) (C)<br>Average Position<br>hours per<br>week (list any<br>hours for officer and a director/trust |                                   |                       |         |              | both ar             | from                            | (E)<br>Reportable<br>compensation from<br>related<br>organizations | <b>(F)</b><br>Estimated<br>amount of<br>other<br>compensation |
|  | related<br>organizations<br>below dotted<br>line)  | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated | (W-2/1099-MISC)                 | (W-2/1099-MISC)  | from the<br>organization<br>and related<br>organizations      |
| 9) MARK TUOHEY<br>DIRECTOR   | 1.00   | x                                 |                       |         |              |                     | 0.                              | 0.   |   |
| 0) JOHN SHARKEY<br>DIRECTOR (THRU 06/17)   | 1.00   | x                                 |                       |         |              |                     | 0.                              | 0.   |   |
| 1) PETER LYNCH<br>DIRECTOR (THRU 05/17)  | 1.00   | x                                 |                       |         |              |                     | 0.                              | 0.   |   |
| 2) DAN ROONEY<br>DIRECTOR (THRU 04/17)   | 1.00   | x                                 |                       |         |              |                     | 0.                              | 0.   |   |
| 3) MIKE CORBOY<br>DIRECTOR (THRU 01/17)  | 1.00   | x                                 |                       |         |              |                     | 0.                              | 0.   |   |
| 4) PAULINE RYAN (THRU 02/17)<br>DIRECTOR   | 1.00   | x                                 |                       |         |              |                     | 0.                              | 0.   |   |
| 5) KIERAN MCLOUGHLIN<br>PRESIDENT AND CEO WORLDWIDE  | 50.00  |                                   |                       | x       |              |                     | 649,964.                        | 0.   | 47,08   |
| 6) THOMAS O'LEARY<br>CHIEF OPERATING OFFICER   | 50.00<br>0.  |                                   |                       | x       |              |                     | 236,912.                        | 0.   | 43,73   |
| 7) ANNE MOONEY<br>CHIEF FINANCIAL OFFICER  | 50.00  |                                   |                       | x       |              |                     | 158,156.                        | 0.   | 22,31   |
| 8) STEVEN GREELEY<br>VICE PRESIDENT OF DEVELOPMENT   | 40.00  |                                   |                       |         |              | X                   | 260,771.                        | 0.   | 26,07   |
| 9) KYLE CLIFFORD<br>VICE PRESIDENT OF DEVELOPMENT  | 40.00  |                                   |                       |         |              | x                   | 200,000.                        | 0.   | 34,09   |
| <ul> <li>1b Sub-total</li> <li>c Total from continuation sheets to Part VII, S</li> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but not reportable compensation from the organization</li> </ul> | limited to t   |                                   | listed                |         |              | who                 | received more than              | \$100,000 of   | Yes   |
| B Did the organization list any former offic<br>employee on line 1a? If "Yes," complete Sched  |  |                                   |                       |         |              |                     |                                 |  | 3   |
| For any individual listed on line 1a, is the organization and related organizations granding individual.   | eater than   | \$15                              | 0,00                  | )0?     | lf           | "Yes,"              | complete Schedu                 | ile J for such   | <b>4</b> X  |
| 5 Did any person listed on line 1a receive or<br>for services rendered to the organization? If "Y  |  |                                   |                       |         |              |                     |                                 |  | 5   |
| <ul> <li>Section B. Independent Contractors</li> <li>Complete this table for your five highest com<br/>compensation from the organization. Report of<br/>year.</li> </ul>  |  |                                   |                       |         |              |                     |                                 |  |   |
| (A)<br>Name and business add   | dress  |                                   |                       |         |              |                     | <b>(B)</b><br>Description of se | ervices C  | <b>(C)</b><br>Compensation                                    |
|  |  |                                   |                       |         |              |                     |                                 |  |   |
|  |  |                                   |                       |         |              |                     |                                 |  |   |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization  $\blacktriangleright$ JSA 7E1055 1.000

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| Form | 000 | (2017) |  |
|------|-----|--------|--|
| FORM | 990 | (2017) |  |

| Part VII Section A. Officers, Directors, Tru  |  | <u> </u>                          |                       |         |                       |                                 |        |  | (E)   |      |   |               |
|---|--|-----------------------------------|-----------------------|---------|-----------------------|---------------------------------|--------|--|---|------|---|---------------|
| (A)<br>Name and title   | (B)<br>Average<br>hours per<br>week (list any<br>hours for | box,<br>office                    | unles<br>er and       | s pe    | ition<br>more<br>rson | e than c<br>is both<br>or/trust | an     | (D)<br>Reportable<br>compensation<br>from<br>the | Reportable<br>compensation from<br>related<br>organizations | from | <b>(F)</b><br>Estimate<br>amount<br>other<br>compensa | of            |
|   | related<br>organizations<br>below dotted<br>line)          | Individual trustee<br>or director | Institutional trustee | Officer | Key employee          | Highest compensated employee    | Former | organization<br>(W-2/1099-MISC)                  | (W-2/1099-MI  | SC)  | from the<br>organizati<br>and relate<br>organizatio   | e<br>on<br>ed |
| 0) MARJORIE MULDOWNEY   | 40.00  |                                   |                       |         |                       |                                 |        |  |   |      |   |               |
| VICE PRESIDENT OF DEVELOPMENT   | 0.   |                                   |                       |         |                       | X                               |        | 160,000.   |   | 0.   | 16,   | 00            |
| 1) JONATHAN LOUGHRAN<br>VICE PRESIDENT OF DEVELOPMENT   | 40.00  |                                   |                       |         |                       | х                               |        | 150,000.   |   | 0.   | 35,   | 08            |
| 2) RACHEL ALABISO   | 40.00  |                                   |                       |         |                       |                                 |        |  |   |      |   |               |
| CHIEF COMMUNICATIONS OFFICER  | 0.   |                                   |                       |         |                       | Х                               |        | 111,524.   |   | 0.   | 24,   | 15            |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  | -                                 |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  | _                                 |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  | -                                 |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  | _                                 |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  | _                                 |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   |               |
| 1b Sub-totalc Total from continuation sheets to Part VII, Sd Total (add lines 1b and 1c)2 Total number of individuals (including but not  | ection A   | · · ·                             | • •<br>• •            | • •     | <br>                  | · · ·                           |        | ceived more than                                 | \$100,000 of  |      |   |               |
| reportable compensation from the organization   | n 🕨  | 9                                 | )                     |         |                       |                                 |        |  |   |      | Yes   |               |
| 3 Did the organization list any former offic<br>employee on line 1a? If "Yes," complete Sched   |  |                                   |                       |         |                       |                                 |        |  |   |      | 3   |               |
| 4 For any individual listed on line 1a, is the organization and related organizations groups of the second seco | eater than   | \$15                              | 0,0                   | 00?     | If                    | "Yes                            | s,"    | complete Schedu                                  | le J for suc  | ch 📃 |   |               |
| <ul><li><i>individual</i></li><li>5 Did any person listed on line 1a receive or</li></ul>   | accrue co  | mpen                              | sati                  | on f    | ron                   | n any                           | un     | related organization                             | on or individu  | al   | 4 X   |               |
| for services rendered to the organization? If "Ye<br>Section B. Independent Contractors   | es," comple  | te Sch                            | nedu                  | ile J   | for                   | such                            | per    | son  |   | •    | 5   |               |
| <ol> <li>Complete this table for your five highest com<br/>compensation from the organization. Report of<br/>year.</li> </ol>   |  |                                   |                       |         |                       |                                 |        |  |   |      | ax  |               |
| (A)<br>Name and business add  | lress  |                                   |                       |         |                       |                                 |        | <b>(B)</b><br>Description of se                  | ervices   |      | (C)<br>Densation                                      |               |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   | _             |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   |               |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   | _             |
|   |  |                                   |                       |         |                       |                                 |        |  |   |      |   | _             |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►

| Par  | t VII                            |  |  | oco or poto to op                                  | viling in this Part \ | /111   |   |  |
|--|----------------------------------|--|--|--|-----------------------|--|---|--|
|  |                                  | Check if Schedule O cc   |  |  | (A)<br>Total revenue  | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1a<br>b<br>c<br>d<br>f<br>f      | Federated campaigns<br>Membership dues<br>Fundraising events<br>Related organizations<br>Government grants (contribut<br>All other contributions, gifts,<br>and similar amounts not included<br>Noncash contributions included | 1b       1c       1d       tions)       1e       grants,       d above       1f       in lines 1a-1f: \$ | 78,857.<br>9,743,298.<br>25,157,518.<br>1,092,911. |                       |  |   |  |
| Program Service Revenue                                | h<br>2a<br>b<br>c<br>d<br>e<br>f | Total. Add lines 1a-1f   |  | Business Code                                      | 34,979,673.           |  |   |  |
| Pro  | g                                | Total. Add lines 2a-2f   |  | · · · · · · •                                      | 0.                    |  |   |  |
|  | 3<br>4<br>5                      | Investment income (inc<br>and other similar amounts).<br>Income from investment of<br>Royalties  | tax-exempt bond  | ►<br>proceeds                                      | 264,541.<br>0.<br>0.  |  |   | 264,541.   |
|  | 6a<br>b<br>c<br>d<br>7a          | Gross rents<br>Less: rental expenses<br>Rental income or (loss) .<br>Net rental income or (loss) .<br>Gross amount from sales of   | (i) Real<br>(i) Securities   | (ii) Personal                                      | 0.                    |  |   |  |
|  | b<br>c<br>d                      | assets other than inventory<br>Less: cost or other basis<br>and sales expenses<br>Gain or (loss)<br>Net gain or (loss)   | 5,618,819.<br>5,478,354.<br>140,465.   | 1,671.<br>-1,671.                                  | 138,794.              |  |   | 138,794  |
| Other Revenue  |                                  | Gross income from fundra<br>events (not including \$9<br>of contributions reported on<br>See Part IV, line 18  | ,743,298.<br>line 1c).   | 1  |                       |  |   |  |
| õ  | b<br>c                           | Less: direct expenses<br>Net income or (loss) from fu  |  |  | -2,620,919.           |  |   | -2,620,919   |
|  | 9a                               | Gross income from gaming<br>See Part IV, line 19   | activities.  | 29,448.  |                       |  |   |  |
|  | b<br>c                           | Less: direct expenses<br>Net income or (loss) from g   |  |  | 21,460.               |  |   | 21,460   |
|  | 10a                              | Gross sales of inventor returns and allowances   | ory, less  |  |                       |  |   |  |
|  | b<br>c                           | Less: cost of goods sold<br>Net income or (loss) from sal  | les of inventory   | <u></u> ▶  | 0.                    |  |   |  |
|  |                                  | Miscellaneous Revenu   |  | Business Code                                      |                       |  |   |  |
|  | 11a                              |  |  |  |                       |  |   |  |
|  | b                                |  |  |  |                       |  |   | +  |
|  | C<br>L                           |  |  |  |                       |  |   |  |
|  | d                                | All other revenue Total. Add lines 11a-11d   |  |  | 0.                    |  |   |  |
|  | е<br>12                          | Total. Add lines 11a-11d   |  |  | 32,783,549.           |  |   | -2,196,124   |

Part IX Statement of Functional Expenses

#### Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service (C) Management and (D) Do not include amounts reported on lines 6b. 7b. Fundraising 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 3,364,762 3,364,762. and domestic governments. See Part IV, line 21 . . . 2 Grants and other assistance to domestic 0 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 23,867,563. 23,867,563. 0 4 Benefits paid to or for members 5 Compensation of current officers, directors, 1,453,049 385,366. 591,365 476,318. trustees, and key employees 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 1,404,471. 358,842. 440,421 605,208. 7 Other salaries and wages 8 Pension plan accruals and contributions (include 38,696 133,697. 35,121 59,880. section 401(k) and 403(b) employer contributions) 68,739 68,776. 189,400 51,885 56,200 153,600. 39,684. 57,716. Payroll taxes 10 11 Fees for services (non-employees): 0 a Management 109,125. 27,281 81,844 **b** Legal 91,957. 30,653. 30,652. 30,652. c Accounting 0 d Lobbying 24,150. 24,150. e Professional fundraising services. See Part IV, line 17. 123,303. 123,303 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column Ο (A) amount, list line 11g expenses on Schedule O.) 269,262. 57,699 57,700. 384,661. 12 Advertising and promotion 314,053. 104,684. 104,685 104,684. 13 Office expenses 83,990. 27,997. 27,996. 27,997. 14 Information technology 0 Royalties 15 293,484. 97,830. 97,824 97,830. Occupancy 16 196,222. 65,407. 65,408 65,407. 17 Travel Payments of travel or entertainment expenses 18 0 for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 0 Interest 20 0 Payments to affiliates 21 16,924. 5,641. 5,642 5,641. 22 Depreciation, depletion, and amortization 25,023. 8,341. 8,341. 8,341. Insurance 23 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.) aIRELAND FUNDS- OVERSEAS 509,486. 444,986. 64,500. **b**PROGRAM DIRECT COSTS 242,501. 242,501 131,081. 43,693. 43,696 43,692. **c**CONTRACT SERVICES dSTATE REGISTRATIONS 14,946 4,982. 4,982 4,982. 1,290. 430 430. 430. e All other expenses 33,128,738. 29,476,911. 1,912,423 1,739,404. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if

0

JSA 7E1052 1.000 Form 990 (2017)

following SOP 98-2 (ASC 958-720)

| -               | n 990 (  |   |                     |                                    |            | Page <b>11</b>            |
|-----------------|----------|---|---------------------|------------------------------------|------------|---------------------------|
| Pa              | rt X     | Balance Sheet   | n thia D            | lort V                             |            |                           |
|                 |          | Check if Schedule O contains a response or note to any line i   | n this P            |                                    | •••        |                           |
|                 |          |   |                     | (A)<br>Beginning of year           |            | <b>(B)</b><br>End of year |
|                 | 1        | Cash - non-interest-bearing   |                     | 4,664,186.                         | 1          | 4,976,311.                |
|                 | 2        | Savings and temporary cash investments  |                     | 4,153,887.                         | -          | 6,486,760.                |
|                 | 3        | Pledges and grants receivable, net  | • • • •             | 3,071,706.                         | 3          | 1,291,473.                |
|                 | 4        | Accounts receivable, net  | • • • •             | 0.                                 | 4          | 0                         |
|                 | 5        | Loans and other receivables from current and former officers, dire  | ectors              |                                    | -          |                           |
|                 |          | trustees, key employees, and highest compensated employees  |                     |                                    |            |                           |
|                 |          |   |                     | 0.                                 | 5          | 0                         |
|                 | 6        | Complete Part II of Schedule L<br>Loans and other receivables from other disqualified persons (as defined under s<br>4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing em<br>and sponsoring organizations of section 501(c)(9) voluntary employees' ben | ployers<br>eficiary | 0.                                 | 6          | 0                         |
| ts              | -        | organizations (see instructions). Complete Part II of Schedule L  |                     | 0.                                 | 6<br>7     | 0                         |
| Assets          | 7        | Notes and loans receivable, net   |                     | 0.                                 |            | 0                         |
| Ä               | 8        | Inventories for sale or use   |                     | 443,120.                           | 8<br>9     | 317,203                   |
|                 | 9        | Prepaid expenses and deferred charges   |                     | 115,120.                           | 9          | 517,205                   |
|                 | IVa      | Land, buildings, and equipment: cost or<br>other basis. Complete Part VI of Schedule D 10a 172  | ,903.               |                                    |            |                           |
|                 | h        |   | ,783.               | 79,562.                            | 100        | 72,120.                   |
|                 | 11       | Investments - publicly traded securities  |                     | 8,204,891.                         |            | 11,083,196.               |
|                 | 12       | Investments - other securities. See Part IV, line 11  |                     | 0.                                 | 12         | 0                         |
|                 | 13       | Investments - program-related. See Part IV, line 11   |                     | 0.                                 | 13         | 0                         |
|                 | 14       | Intangible assets   |                     | 0.                                 | 14         | 0                         |
|                 | 15       | Other assets. See Part IV, line 11  |                     | 734,932.                           |            | 749,264                   |
|                 | 16       | <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)  |                     | 21,352,284.                        | 16         | 24,976,327.               |
|                 | 17       | Accounts payable and accrued expenses   |                     | 534,529.                           |            | 315,561                   |
|                 | 18       | Grants payable  | 6,331,906.          | 18                                 | 9,017,256. |                           |
|                 | 19       | Deferred revenue  |                     | 189,370.                           | 19         | 101,910                   |
|                 | 20       | Tax-exempt bond liabilities   |                     | 0.                                 | 20         | 0                         |
|                 | 21       | Escrow or custodial account liability. Complete Part IV of Schedule D   |                     | 0.                                 | 21         | 0                         |
| es              | 22       | Loans and other payables to current and former officers, dire   | ectors,             |                                    |            |                           |
| Liabilities     |          | trustees, key employees, highest compensated employees,   |                     |                                    |            |                           |
| iabi            |          | disqualified persons. Complete Part II of Schedule L  |                     | 0.                                 | 22         | 0                         |
|                 | 23       | Secured mortgages and notes payable to unrelated third parties  |                     | 0.                                 | 23         | 0                         |
|                 | 24       | Unsecured notes and loans payable to unrelated third parties  |                     | 0.                                 | 24         | 0                         |
|                 | 25       | Other liabilities (including federal income tax, payables to related  |                     |                                    |            |                           |
|                 |          | parties, and other liabilities not included on lines 17-24). Complete   |                     |                                    |            |                           |
|                 |          | of Schedule D   |                     | 184,752.                           |            | 217,516.                  |
|                 | 26       | Total liabilities. Add lines 17 through 25  |                     | 7,240,557.                         | 26         | 9,652,243.                |
| ces             |          | complete lines 27 through 29, and lines 33 and 34.  | and                 | 5 054 000                          |            |                           |
| ılan            | 27       | Unrestricted net assets   |                     | 5,954,998.                         | 27         | 6,662,156.                |
| B               | 28       | Temporarily restricted net assets   |                     | 2,952,082.<br>5,204,647.           | 28         | 3,457,281.<br>5,204,647.  |
| r Fund Balances | 29       | Permanently restricted net assets<br>Organizations that do not follow SFAS 117 (ASC 958), check here<br>complete lines 30 through 34.   |                     | 5,204,647.                         | 29         | 5,204,647.                |
| s or            | 20       |   |                     |                                    |            |                           |
| set             | 30<br>21 | Capital stock or trust principal, or current funds  | • • • •             |                                    | 30         |                           |
| As              | 31<br>32 | Paid-in or capital surplus, or land, building, or equipment fund<br>Retained earnings, endowment, accumulated income, or other funds  | ••••                |                                    | 31         |                           |
| Net Assets      | 32<br>33 | Total net assets or fund balances   | • • • •             | 14,111,727.                        | 32<br>33   | 15,324,084.               |
| Z               | 33<br>34 | Total net assets or fund balances<br>Total liabilities and net assets/fund balances   |                     | 21,352,284.                        | 33<br>34   | 24,976,327.               |
|                 | 54       | יסומו וומטווונוכא מווע ווכי מאשבוא/זעווע שמומוועכא  |                     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <u>ა</u> 4 |                           |

THE AMERICAN IRELAND FUND (DBA THE IRELAND 25-1306992

| Form 99 | 90 (2017)   |            |             | Pa          | ge <b>12</b> |  |  |  |  |
|---------|---|------------|-------------|-------------|--------------|--|--|--|--|
| Part    | XI Reconciliation of Net Assets   |            |             |             |              |  |  |  |  |
|         | Check if Schedule O contains a response or note to any line in this Part XI                             |            |             |             | Х            |  |  |  |  |
| 1       | Total revenue (must equal Part VIII, column (A), line 12)   | 1          | 32,783,549. |             |              |  |  |  |  |
| 2       | Total expenses (must equal Part IX, column (A), line 25)  | 2          | 33,1        | 33,128,738. |              |  |  |  |  |
| 3       |   |            |             |             |              |  |  |  |  |
| 4       |   |            |             |             |              |  |  |  |  |
| 5       | Net unrealized gains (losses) on investments  | 5          | 1,2         | 29,6        | 69.          |  |  |  |  |
| 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          | 3           | 27,8        | 377.         |  |  |  |  |
| 10      | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line          |            |             |             |              |  |  |  |  |
|         | 33, column (B))   | 10         | 15,3        | 24,0        | 84.          |  |  |  |  |
| 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          |             | Х            |  |  |  |  |
|         | If "Yes," check a box below to indicate whether the financial statements for the year were cor          |            |             |             |              |  |  |  |  |
|         | reviewed on a separate basis, consolidated basis, or both:  | •          |             |             |              |  |  |  |  |
|         | Separate basis Consolidated basis Both consolidated and separate basis                                  |            |             |             |              |  |  |  |  |
| ь       | Were the organization's financial statements audited by an independent accountant?                      |            | 2b          | Х           |              |  |  |  |  |
| -       | If "Yes," check a box below to indicate whether the financial statements for the year were aud          |            |             |             |              |  |  |  |  |
|         | separate basis, consolidated basis, or both:  |            |             |             |              |  |  |  |  |
|         | X 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       | oversiaht  |             |             |              |  |  |  |  |
|         | of the audit, review, or compilation of its financial statements and selection of an independent action | -          | 2c          | Х           |              |  |  |  |  |
|         | If the organization changed either its oversight process or selection process during the tax year, e    |            |             |             |              |  |  |  |  |
|         | Schedule O.   |            |             |             |              |  |  |  |  |
| 3a      | As a result of a federal award, was the organization required to undergo an audit or audits as se       | t forth in |             |             |              |  |  |  |  |
|         | the Single Audit Act and OMB Circular A-133?  |            |             |             |              |  |  |  |  |
| b       | If "Yes," did the organization undergo the required audit or audits? If the organization did not und    | lerao the  |             |             |              |  |  |  |  |
| -       | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au     |            | 3b          |             |              |  |  |  |  |
|         |   |            | Form        | 990         | (2017)       |  |  |  |  |

| SCHEDULE A                 | Public Charity Status and Public Support   |
|----------------------------|--|
| (Form 990 or 990-EZ)       | Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. |
| Department of the Treesury | Attach to Form 990 or Form 990-EZ.   |



|     | artment of the Treasury   |                | ► Attach to Form 990 or Form 990-EZ. Open to<br>E Go to www.irs.gov/Form990 for instructions and the latest information. |                            |                      |              |                            |                                 |  |  |  |  |
|-----|---|----------------|--|----------------------------|----------------------|--------------|----------------------------|---------------------------------|--|--|--|--|
|     | nal Revenue Service   |                |  |                            |                      |              |                            | Inspection                      |  |  |  |  |
|     |   |                |  | FUND (DBA THE ]            | RELAN                | D            | Employer identifi          |                                 |  |  |  |  |
| -   | NDS AMERICA /   |                | AND FUNDS)   |                            | <u> </u>             |              | 25-13069                   |                                 |  |  |  |  |
| Ра  |   |                |  | •                          |                      |              | art.) See instructions     |                                 |  |  |  |  |
|     | <u> </u>  | •              |  | is: (For lines 1 through   |                      | •            | ,                          |                                 |  |  |  |  |
| 1   |   |                |  | tion of churches desc      |                      |              |                            |                                 |  |  |  |  |
| 2   | A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| 3   |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| 4   |   | •              |  | conjunction with a hos     | spital de            | scribed i    | n section 170(b)(1)(A)     | (iii). Enter the                |  |  |  |  |
|     | hospital's nam  |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| 5   |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                | Complete Part II.)   |                            |                      |              |                            |                                 |  |  |  |  |
| 6   |   | •              | •  | rnmental unit describe     |                      |              |                            |                                 |  |  |  |  |
| 7   |   |                | -  | -                          | pport fr             | om a go      | vernmental unit or fro     | om the general public           |  |  |  |  |
|     |   |                | )(1)(A)(vi). (Compl  |                            |                      |              |                            |                                 |  |  |  |  |
| 8   |   |                |  | b)(1)(A)(vi). (Complete    |                      |              |                            |                                 |  |  |  |  |
| 9   |   |                | -  |                            |                      | -            | in conjunction with a      |                                 |  |  |  |  |
|     | -   | or a non-land- | grant college of ag  | priculture (see instruct   | tions). E            | nter the     | name, city, and state of   | the college or                  |  |  |  |  |
|     | university:   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| 10  | An organization   | on that norma  | illy receives: (1) m<br>ited to its exempt f   | ore than 331/3 % of its    | support<br>certain e | trom co      | ntributions, membersh      | np fees, and gross              |  |  |  |  |
|     | receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                |  | 975. See section 509       |                      |              |                            |                                 |  |  |  |  |
| 11  | ~   | •              | •  | usively to test for publi  |                      |              |                            |                                 |  |  |  |  |
| 12  |   | •              |  | •                          |                      |              | e functions of, or to c    |                                 |  |  |  |  |
|     |   |                |  |                            |                      |              | section 509(a)(2). S       |                                 |  |  |  |  |
|     |   |                |  |                            | •••                  |              | zation and complete lir    |                                 |  |  |  |  |
| а   | ••  |                |  |                            | •                    |              | orted organization(s),     |                                 |  |  |  |  |
|     |   | -              |  |                            |                      | ajority of   | f the directors or truste  | es of the                       |  |  |  |  |
|     | ·· •  | •              | •  | e Part IV, Sections A      |                      |              |                            |                                 |  |  |  |  |
| b   | ••  |                |  |                            |                      |              | supported organization     |                                 |  |  |  |  |
|     |   | -              |  | -                          | the sam              | e persor     | ns that control or man     | age the supported               |  |  |  |  |
|     |   |                |  | , Sections A and C.        |                      |              |                            | La facta construction d'un d'un |  |  |  |  |
| С   |   | -              |  |                            |                      |              | n with, and functional     | ly integrated with,             |  |  |  |  |
|     |   | •              | . , .  | s). You must comple        |                      |              |                            |                                 |  |  |  |  |
| d   | ••  | -              |  |                            | •                    |              | ection with its support    | • • • • •                       |  |  |  |  |
|     |   | -              |  |                            | -                    |              | oution requirement and     | an attentiveness                |  |  |  |  |
| -   |   |                |  | omplete Part IV, Sect      |                      |              |                            |                                 |  |  |  |  |
| е   |   | •              |  |                            |                      |              | hat it is a Type I, Type I | і, туре ш                       |  |  |  |  |
| f   |   | •              |  | ionally integrated sup     | porting c            | nganiza      | lion.                      |                                 |  |  |  |  |
| g   |   |                | •  | orted organization(s).     |                      |              |                            | ••••                            |  |  |  |  |
| 9   | (i) Name of supported of  |                | (ii) EIN   | (iii) Type of organization | (iv) is the          | organization | (v) Amount of monetary     | (vi) Amount of                  |  |  |  |  |
|     | (i) Name of supported t   | sigunzation    | (, ב   | (described on lines 1-10   | listed in yo         | ur governing | support (see               | other support (see              |  |  |  |  |
|     |   |                |  | above (see instructions))  | docu<br>Yes          | ment?        | instructions)              | instructions)                   |  |  |  |  |
|     |   |                |  |                            | 162                  | No           |                            |                                 |  |  |  |  |
| (A) |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| (B) |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| (C) |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| (D) |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| (E) |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
|     |   |                |  |                            |                      |              |                            |                                 |  |  |  |  |
| Tot | al  |                |  |                            |                      |              |                            |                                 |  |  |  |  |

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Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

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   | endar year (or fiscal year beginning in) 🕨   | (a) 2013                                     | <b>(b)</b> 2014   | (c) 2015  | <b>(d)</b> 2016                                       | (e) 2017  | (f) Total                |
| 1      | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   | 24,562,409.                                  | 29,548,166.   | 29,853,185.   | 23,355,916.   | 34,979,673.   | 142,299,349.             |
| 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   | 24,562,409.                                  | 29,548,166.   | 29,853,185.   | 23,355,916.   | 34,979,673.   | 142,299,349.             |
| 5      | The portion of total contributions by<br>each person (other than a<br>governmental unit or publicly<br>supported organization) included on<br>line 1 that exceeds 2% of the amount |  |   |   |   |   |                          |
|        | shown on line 11, column (f)   |  |   |   |   |   | 23,273,372.              |
| 6      | Public support. Subtract line 5 from line 4  |  |   |   |   |   | 119,025,977.             |
|        | tion B. Total Support  | () 0040                                      | (1) 0044  | () 0045   | ( )) 0040   | () 0047   | (0 T / )                 |
|        | endar year (or fiscal year beginning in)   | (a) 2013                                     | (b) 2014  | (c) 2015  | (d) 2016  | (e) 2017  | (f) Total                |
| 7<br>8 | Amounts from line 4.<br>Gross income from interest, dividends,<br>payments received on securities loans,<br>rents, royalties, and income from<br>similar sources                   | 24,562,409.                                  | 29,548,166.<br>186,656.                                 | 29,853,185.<br>193,232.                               | 23,355,916.<br>202,728.                               | 34,979,673.<br>264,541.                                       | 142,299,349.<br>922,166. |
| 9      | Net income from unrelated business activities, whether or not the business is regularly carried on   | 16,012.                                      | 15,966.   | 26,485.   | 0.  | 0.  | 58,463.                  |
| 10     | Other income. Do not include gain or<br>loss from the sale of capital assets<br>(Explain in Part VI.) <u>ATCH 1</u>  | 1,687,660.                                   | 1,570,422.  | 1,660,070.  | 1,571,043.  | 1,518,867.  | 8,008,062.               |
| 11     | Total support. Add lines 7 through 10  |  |   |   |   |   | 151,288,040.             |
| 12     | Gross receipts from related activities, etc. (s  | see instructions) .                          |   |   |   | 12  |                          |
| 13     | First five years. If the Form 990 is for organization, check this box and stop here  | <u> </u>                                     | <u></u>   |   |   |   |                          |
| Sec    | tion C. Computation of Public Sup  | port Percenta                                | ge  |   |   | r - 1   |                          |
| 14     | Public support percentage for 2017 (li   |  |   |   |   | 14  | 78.68%                   |
| 15     | Public support percentage from 2016  |  |   |   |   |   | 79.72 <b>%</b>           |
|        | <b>33</b> 1/3% support test - 2017. If the orgonization q  | ualifies as a pub                            | licly supported   | organization.   |   |   | ► X                      |
|        | 331/3% support test - 2016. If the org<br>this box and stop here. The organization   | on qualifies as a                            | publicly suppor   | ted organizatio                                       | n   |   | ▶∟                       |
| 17a    | <b>10%-facts-and-circumstances test - 2</b><br>10% or more, and if the organization<br>Part VI how the organization meets to<br>organization                                       | n meets the "fac<br>the "facts-and-c         | cts-and-circumst<br>frcumstances" te                    | ances" test, ch<br>est. The organi                    | eck this box ar<br>zation qualifies                   | nd <b>stop here.</b> E<br>as a publicly s                     | xplain in upported       |
| b      | <b>10%-facts-and-circumstances test - 2</b><br>15 is 10% or more, and if the orga<br>Explain in Part VI how the organizati<br>supported organization                               | <b>2016.</b> If the organization meets the " | ganization did no<br>the "facts-and<br>facts-and-circum | ot check a box<br>I-circumstances'<br>nstances" test. | on line 13, 16<br>" test, check tl<br>The organizatic | a, 16b, or 17a,<br>his box and <b>st</b><br>on qualifies as a | and line<br>op here.     |
| 18     | Private foundation. If the organization instructions   | did not check a                              | a box on line 13,                                       | 16a, 16b, 17a   | , or 17b, check                                       | this box and see  | •                        |

Schedule A (Form 990 or 990-EZ) 2017

Page 3

| Schedule A | (Form | 990 or | 990-EZ | 201 |
|------------|-------|--------|--------|-----|
|            |       |        |        |     |

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

| Sec              | tion A. Public Support  |                 |                 | -              |          |                    |                  |
|------------------|---|-----------------|-----------------|----------------|----------|--------------------|------------------|
| Cale             | ndar year (or fiscal year beginning in) 🕨   | <b>(a)</b> 2013 | <b>(b)</b> 2014 | (c) 2015       | (d) 2016 | (e) 2017           | <b>(f)</b> Total |
| 1                | Gifts, grants, contributions, and membership fees                                 | ļ               |                 |                |          |                    |                  |
|                  | received. (Do not include any "unusual grants.")                                  |                 |                 |                |          |                    |                  |
| 2                | Gross receipts from admissions, merchandise                                       | ļ               |                 |                |          |                    |                  |
|                  | sold or services performed, or facilities   | ļ               |                 |                |          |                    |                  |
|                  | 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   | ļ               |                 |                |          |                    |                  |
|                  | or expended on its behalf   |                 |                 |                |          |                    |                  |
| 5                | The value of services or facilities   |                 |                 |                |          |                    |                  |
|                  | furnished by a governmental unit to the   | ļ               |                 |                |          |                    |                  |
|                  | organization without charge   |                 |                 |                |          |                    |                  |
| 6                | Total. Add lines 1 through 5  |                 |                 |                |          |                    |                  |
| 7a               | Amounts included on lines 1, 2, and 3   | ļ               |                 |                |          |                    |                  |
|                  | 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                                       |                 |                 |                |          |                    |                  |
| с                | Add lines 7a and 7b   |                 |                 |                |          |                    |                  |
| 8                | Public support. (Subtract line 7c from  |                 |                 |                |          |                    |                  |
|                  | line 6.)  |                 |                 |                |          |                    |                  |
|                  | tion B. Total Support   |                 |                 |                |          |                    |                  |
| Cale             | ndar year (or fiscal year beginning in) 🕨   | <b>(a)</b> 2013 | <b>(b)</b> 2014 | (c) 2015       | (d) 2016 | (e) 2017           | (f) Total        |
| 9                | Amounts from line 6   |                 |                 |                |          |                    |                  |
| 10 a             | Gross income from interest, dividends, payments received on securities loans,     | ļ               |                 |                |          |                    |                  |
|                  | rents, royalties, and income from similar   | ļ               |                 |                |          |                    |                  |
|                  | sources   |                 |                 |                |          |                    |                  |
| b                | Unrelated business taxable income (less   | ļ               |                 |                |          |                    |                  |
|                  | section 511 taxes) from businesses  | ļ               |                 |                |          |                    |                  |
|                  | acquired after June 30, 1975  |                 |                 |                |          |                    |                  |
| С                | Add lines 10a and 10b   |                 |                 |                |          |                    |                  |
| 11               | Net income from unrelated business  |                 |                 |                |          |                    |                  |
|                  | activities not included in line 10b,<br>whether or not the business is regularly  |                 |                 |                |          |                    |                  |
|                  | carried on  |                 |                 |                |          |                    |                  |
| 12               | Other income. Do not include gain or  |                 |                 |                |          |                    |                  |
|                  | loss from the sale of capital assets  |                 |                 |                |          |                    |                  |
|                  | (Explain in Part VI.)   |                 |                 |                |          |                    |                  |
| 13               | Total support. (Add lines 9, 10c, 11,   |                 |                 |                |          |                    |                  |
|                  | and 12.)  |                 |                 |                |          |                    |                  |
| 14               | First five years. If the Form 990 is f  | •               |                 |                |          |                    |                  |
| <u></u>          | organization, check this box and <b>stop here</b> .                               |                 |                 |                |          |                    | · · · · ►        |
| <u>5ec</u><br>15 | tion C. Computation of Public Supp<br>Public support percentage for 2017 (line 8, |                 | •               | mn (f))        |          | 45                 | 0/               |
| 16               | Public support percentage from 2016 Sche  |                 |                 |                |          | 15<br>16           | <u> </u>         |
|                  | tion D. Computation of Investmen  |                 |                 | <u></u>        |          | 10                 | 70               |
| 17               | Investment income percentage for 2017 (lin  |                 |                 | 13 column (f)) |          | 17                 | %                |
| 18               | Investment income percentage for 2011 (in   |                 | •               |                |          |                    | %                |
|                  | 331/3% support tests - 2017. If the org   |                 |                 |                |          |                    |                  |
|                  | 17 is not more than 331/3%, check th  | -               |                 |                |          |                    |                  |
| b                | 331/3% support tests - 2016. If the orga  | -               | -               | -              |          |                    |                  |
| -                | line 18 is not more than 331/3%, check  |                 |                 |                |          |                    |                  |
| 20               | <b>Private foundation.</b> If the organization                                    |                 |                 | -              |          |                    |                  |
| JSA              |   |                 |                 |                |          | Schedule A (Form 9 |                  |
| 1 = 122          | <sup>1 1.000</sup><br>48093E 649N 11/14/2018 1                                    | 2:02:35 PM      |                 |                |          |                    | PAGE 2           |

Yes No

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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) 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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** 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.)

10b Schedule A (Form 990 or 990-EZ) 2017

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| -     | le A (Form 990 or 990-EZ) 2017  |         | 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   |         |         |        |
|       |   |         | 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 <b>Part VI</b> 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   |         |         |        |
| 2     | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>  |         |         |        |
|       | 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 <b>Part VI</b> 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   |         |         |        |
| Jecu  |   |         | Yes     | No     |
| 1     | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the  |         | 163     | NU     |
|       | 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       |         |        |
| 2     | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported  |         |         |        |
|       | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> 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? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.  |         |         |        |
|       |   | 3       |         |        |
| Secti | on E. Type III Functionally Integrated Supporting Organizations   |         |         |        |
| 1     | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins  | structi | ons).   |        |
| а     | The organization satisfied the Activities Test. <i>Complete line 2 below.</i>   |         |         |        |
| b     | The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>  |         |         |        |
| С     | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see  | instru  | ctions) |        |
| 2     | Activities Test. Answer (a) and (b) below.  |         | Yes     | No     |
|       |   |         |         |        |
| а     | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>  |         |         |        |
|       | these 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? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these            |         |         |        |
|       | activities but for the organization's position that its supported organization(s) would have engaged in these   | 2b      |         |        |
| -     |   | 20      |         |        |
| 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 <b>Part VI</b> the role played by the organization in this regard.  | 3b      |         |        |

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Schedule A (Form 990 or 990-EZ) 2017 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 4 Add lines 1 through 3. 4 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). (B) Current Year

| Section B - Minimum Asset Amount   | (A) Prior Year | (optional) |              |
|--|----------------|------------|--------------|
| 1 Aggregate fair market value of all non-exempt-use assets (see<br>instructions for short tax year or assets held for part of year): |                |            |              |
| a Average monthly value of securities  | 1a             |            |              |
| <b>b</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<br>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              |            |              |
| <b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).                             | 4              |            |              |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5              |            |              |
| 6 Multiply line 5 by .035.   | 6              |            |              |
| 7 Recoveries of prior-year distributions   | 7              |            |              |
| 8 Minimum Asset Amount (add line 7 to line 6)  | 8              |            |              |
| Section C - Distributable Amount   |                |            | Current Year |
| 1 Adjusted net income for prior year (from Section A, line 8, Column A)  | 1              |            |              |
| 2 Enter 85% of line 1.   | 2              |            |              |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A)   | 3              |            |              |
| 4 Enter greater of line 2 or line 3.   | 4              |            |              |
| 5 Income tax imposed in prior year   | 5              |            |              |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to<br>emergency temporary reduction (see instructions).          | 6              |            |              |
|  | Ø              |            |              |

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

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|          | V Type III Non-Functionally Integrated 509(a)(3)                     | Supporting Organizat        | tions (continued)                      | -   |
|----------|--|-----------------------------|--|---|
|          | ion D - Distributions  |                             |  | Current Year                              |
| 1        | Amounts paid to supported organizations to accomplish ex             |                             |  |   |
| 2        | Amounts paid to perform activity that directly furthers exer         |                             |  |   |
|          | organizations, in excess of income from activity                     |                             |  |   |
| 3        | Administrative expenses paid to accomplish exempt purpo              | eses of supported organized | zations                                |   |
| 4        | Amounts paid to acquire exempt-use assets                            |                             |  |   |
| 5        | Qualified set-aside amounts (prior IRS approval required)            |                             |  |   |
| 6        | Other distributions (describe in <b>Part VI</b> ). See instructions. |                             |  |   |
| 7        | Total annual distributions. Add lines 1 through 6.                   |                             |  |   |
| 8        | Distributions to attentive supported organizations to which          | the organization is resp    | onsive                                 |   |
|          | (provide details in <b>Part VI</b> ). See instructions.              |                             |  |   |
| 9        | Distributable amount for 2017 from Section C, line 6                 |                             |  |   |
| 10       | Line 8 amount divided by Line 9 amount                               |                             |  |   |
|          | Section E - Distribution Allocations (see instructions)              | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2017 | (iii)<br>Distributable<br>Amount for 2017 |
| 1        | Distributable amount for 2017 from Section C, line 6                 |                             |  |   |
| 2        | Underdistributions, if any, for years prior to 2017                  |                             |  |   |
|          | (reasonable cause required-explain in Part VI). See                  |                             |  |   |
|          | instructions.  |                             |  |   |
| 3        | Excess distributions carryover, if any, to 2017                      |                             |  |   |
| а        |  |                             |  |   |
| b        | From 2013  |                             |  |   |
| С        | From 2014  |                             |  |   |
| d        | From 2015  |                             |  |   |
| е        | From 2016  |                             |  |   |
| f        | Total of lines 3a through e  |                             |  |   |
| g        | Applied to underdistributions of prior years                         |                             |  |   |
| h        | Applied to 2017 distributable amount                                 |                             |  |   |
| i        | Carryover from 2012 not applied (see instructions)                   |                             |  |   |
| j        | Remainder. Subtract lines 3g, 3h, and 3i from 3f.                    |                             |  |   |
| 4        | Distributions for 2017 from  |                             |  |   |
|          | Section D, line 7: \$  |                             |  |   |
| а        | Applied to underdistributions of prior years                         |                             |  |   |
| b        | Applied to 2017 distributable amount                                 |                             |  |   |
| С        | Remainder. Subtract lines 4a and 4b from 4.                          |                             |  |   |
| 5        | Remaining underdistributions for years prior to 2017, if             |                             |  |   |
|          | any. Subtract lines 3g and 4a from line 2. For result                |                             |  |   |
|          | greater than zero, explain in <b>Part VI</b> . See instructions.     |                             |  |   |
| 6        | Remaining underdistributions for 2017. Subtract lines 3h             |                             |  |   |
| -        | and 4b from line 1. For result greater than zero, explain in         |                             |  |   |
|          | Part VI. See instructions.   |                             |  |   |
| 7        | Excess distributions carryover to 2018. Add lines 3j                 |                             |  |   |
| •        | and 4c.  |                             |  |   |
| 8        | Breakdown of line 7:   |                             |  |   |
| a        | Excess from 2013   |                             |  |   |
| a<br>b   | Excess from 2014   |                             |  |   |
| <u>с</u> | Excess from 2015   |                             |  |   |
| d        | Excess from 2016   |                             |  |   |
| u        | Excess from 2017   |                             |  |   |

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

| SCHEDULE A, PART II -         |            |            |            |            |            |            |
|-------------------------------|------------|------------|------------|------------|------------|------------|
| DESCRIPTION                   | 2013       | 2014       | 2015       | 2016       | 2017       | TOTAL      |
| GROSS INCOME FROM FUNDRAISING | 1,687,660. | 1,513,621. | 1,603,853. | 1,549,940. | 1,489,419. | 7,844,493. |
| GROSS INCOME FROM GAMING      |            | 56,801.    | 56,217.    | 21,103.    | 29,448.    | 163,569.   |
| TOTALS                        | 1,687,660. | 1,570,422. | 1,660,070. | 1,571,043. | 1,518,867. | 8,008,062. |

| (Fo   | HEDULE D<br>rm 990)  | Complete if  | ental Financial Statemer<br>the organization answered "Yes" on Form<br>, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a<br>Attach to Form 990. | 990,                              | OMB No. 1545-0047<br>2017<br>Open to Public  |
|-------|--|--|---|-----------------------------------|--|
|       | nal Revenue Service  | ► Go to www.irs.gov  | /Form990 for instructions and the latest in   | formation                         |  |
| Name  | e of the organization  | THE AMERICAN IRELAND F   | UND (DBA THE IRELAND  | Em                                | ployer identification number   |
|       | NDS AMERICA /  | THE IRELAND FUNDS)   |   |                                   | 25-1306992   |
| Pa    |  |  | ised Funds or Other Similar Funds   | or Acco                           | ounts.   |
|       | Complete   | e if the organization answered   | "Yes" on Form 990, Part IV, line 6.   |                                   |  |
|       |  |  | (a) Donor advised funds   |                                   | (b) Funds and other accounts   |
| 1     | Total number at e  | nd of year   | 55.   |                                   |  |
| 2     | Aggregate value of   | of contributions to (during year)  | 161,427.  |                                   |  |
| 3     | Aggregate value of   | of grants from (during year)   | 269,423.  |                                   |  |
| 4     | Aggregate value a  | at end of year   | 1,944,034.  |                                   |  |
| 5     | -  |  | advisors in writing that the assets he  |                                   | nor advised  |
|       | -  |  | e organization's exclusive legal control?   |                                   |  |
| 6     | •  | <b>-</b>   | and donor advisors in writing that gran   |                                   |  |
|       | •  |  | fit of the donor or donor advisor, or fo  | •                                 |  |
|       |  |  | <u> </u>  |                                   | X Yes No   |
| Pa    |  | tion Easements.  | "Vee" on Form 000 Port IV/ line 7   |                                   |  |
| 1     |  |  | "Yes" on Form 990, Part IV, line 7.<br>organization (check all that apply).   |                                   |  |
| •     |  | in of land for public use (e.g., rec   |   | on of a h                         | istorically important land area  |
|       |  | of natural habitat   |   |                                   | ertified historic structure  |
|       |  | in of open space   |   |                                   |  |
| 2     |  |  | eld a qualified conservation contribution   | n in the f                        | orm of a conservation  |
| -     |  | last day of the tax year.  |   |                                   | Held at the End of the Tax Year  |
| а     |  |  |   | 2a                                |  |
| b     |  |  | · · · · · · · · · · · · · · · · · · ·   |                                   |  |
| c     |  |  | historic structure included in (a)  |                                   |  |
| d     |  |  | acquired after 7/25/06, and not on a  |                                   |  |
| -     |  |  |   |                                   |  |
| 3     |  | •  | nsferred, released, extinguished, or ter  |                                   | by the organization during the   |
|       | tax year 🕨   |  |   |                                   |  |
| 4     | Number of states   | where property subject to conse  | rvation easement is located ►   |                                   |  |
| 5     |  |  | arding the periodic monitoring, insp  | ection, h                         | nandling of  |
|       | violations, and enf  | forcement of the conservation ea   | sements it holds?   |                                   | Yes 🛄 No   |
| 6     |  |  | ting, handling of violations, and enforcing   |                                   |  |
|       | ▶  |  |   |                                   |  |
| 7     | Amount of expense  | ses incurred in monitoring, inspec   | ting, handling of violations, and enforcin  | g conser                          | vation easements during the year   |
|       | ▶\$  |  |   |                                   |  |
| 8     | Does each conser   | vation easement reported on line 2   | 2(d) above satisfy the requirements of se   | ection 17                         | 0(h)(4)(B)(i)  |
|       |  |  |   |                                   |  |
| 9     |  | 5  | conservation easements in its revenue   |                                   | •  |
|       |  | ••   | of the footnote to the organization's fina  | incial sta                        | tements that describes the   |
| De    |  | counting for conservation easeme   |   | har Cim                           | iler Acasta  |
| Pa    |  |  | of Art, Historical Treasures, or Ot<br>"Yes" on Form 990, Part IV, line 8.  | ner Sim                           | liar Assets.   |
|       | •  | •  | · · · ·   |                                   |  |
| 1a    | If the organization<br>works of art, hist<br>public service, pro | n elected, as permitted under Si<br>torical treasures, or other simila<br>wide, in Part XIII, the text of the fo | FAS 116 (ASC 958), not to report in it<br>ar assets held for public exhibition, e<br>potnote to its financial statements that of            | ts reven<br>ducatior<br>describes | ue statement and balance sheet<br>a, or research in furtherance of<br>these items. |
| b     | works of art, hist   | n elected, as permitted under s<br>torical treasures, or other simila<br>ovide the following amounts relati      | SFAS 116 (ASC 958), to report in it:<br>ar assets held for public exhibition, e<br>ng to these items:                                       | s revenu<br>ducatior              | e statement and balance sheet<br>n, or research in furtherance of                  |
|       |  |  |   |                                   | ▶\$16,800.   |
|       |  |  |   |                                   |  |
| 2     |  |  | rt, historical treasures, or other simil  |                                   |  |
|       |  |  | FAS 116 (ASC 958) relating to these it  |                                   | - · ·  |
| а     | Revenue included   | l on Form 990, Part VIII, line 1   |   |                                   |  |
| b     | Assets included in   | Form 990, Part X   | <u> </u>  |                                   | ▶\$  |
| For I | Paperwork Reduction  | n Act Notice, see the Instructions for   | <sup>.</sup> Form 990.  |                                   | Schedule D (Form 990) 2017   |

THE AMERICAN TRELAND FUND (DBA THE TRELAND

| Sahar | ule D (Form 990) 2017   | AMERIC           |              |            | UND      |          |               |        |          |             | 25-130               | 10992           | Б          | age <b>2</b> |
|-------|---|------------------|--------------|------------|----------|----------|---------------|--------|----------|-------------|----------------------|-----------------|------------|--------------|
| Par   |   | na Collec        | tions of     | Art H      | listori  | cal Ti   | roasur        | 00     | or Oth   | or Simi     | lar Asso             | ts (con         |            |              |
| 3     | Using the organization's acquisition  |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
| 5     | collection items (check all that app  |                  |              |            | 00103,   | CHECK    |               |        | 101101   | ing that    | are a sigi           |                 | 130 0      | 1 113        |
| а     | X Public exhibition   | · <b>y</b> /·    |              | d          | X        | oan o    | r exch        | ande   | prograi  | ms          |                      |                 |            |              |
| b     | X Scholarly research  |                  |              | e          |          | Other    |               | ange   | program  |             |                      |                 |            |              |
| c     | X Preservation for future gene  | rations          |              | •          |          |          |               |        |          |             |                      |                 |            |              |
| 4     | Provide a description of the organ  |                  | ollections   | s and ex   | xolain   | how t    | hev fur       | ther   | the or   | nanizatior  | 's exempt            | t purpos        | e in       | Part         |
| -     | XIII.   |                  |              |            | 1        |          |               |        |          | 5           |                      |                 |            |              |
| 5     |   | on solicit or    | receive of   | donation   | is of ai | t. histo | orical tr     | easu   | res. or  | other simi  | ilar                 |                 |            |              |
|       | During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
| Par   | Part IV Escrow and Custodial Arrangements.  |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
|       | Complete if the organizat   |                  |              | s" on Fo   | orm 9    | 90, Pa   | art IV, I     | line § | ), or re | ported a    | n amoun <sup>.</sup> | t on For        | m          |              |
|       | 990, Part X, line 21.   |                  |              |            |          |          |               |        |          | •           |                      |                 |            |              |
| 1a    | Is the organization an agent, truste  | e, custodia      | an or othe   | er intern  | nediar   | y for co | ontribut      | tions  | or othe  | r assets n  | ot                   |                 |            |              |
|       | included on Form 990, Part X?   |                  |              |            |          |          |               |        |          |             |                      | Yes             |            | No           |
| b     | If "Yes," explain the arrangement i   |                  |              |            |          |          |               |        |          |             |                      |                 |            | -            |
|       |   |                  |              |            |          | -        |               |        |          | A           | Amount               |                 |            |              |
| с     | Beginning balance   |                  |              |            |          |          |               | 1c     |          |             |                      |                 |            |              |
| d     | Additions during the year   |                  |              |            |          |          |               | 1d     |          |             |                      |                 |            |              |
| е     | Distributions during the year   |                  |              |            |          |          |               | 1e     |          |             |                      |                 |            |              |
| f     | Ending balance  |                  |              |            |          |          |               | 1f     |          |             |                      |                 |            |              |
| 2a    | Did the organization include an am  | ount on Fo       | orm 990,     | Part X,    | line 21  | , for e  | scrow         | or cu  | stodial  | account li  | ability?             | Yes             |            | No           |
| b     | If "Yes," explain the arrangement i   | n Part XIII.     | Check h      | ere if the | e expla  | nation   | has be        | en pr  | ovided   | on Part XI  | ""                   |                 |            | ]            |
| Par   |   |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
|       | Complete if the organizat   | ion answe        | ered "Yes    | s" on Fo   | orm 9    | 90, Pa   | art IV, I     | ine 1  | 0.       |             |                      |                 |            |              |
|       |   | <b>(a)</b> Curre | ent year     | (b)        | Prior ye | ar       | <b>(c)</b> Tw | o year | s back   | (d) Three   | years back           | <b>(e)</b> Four | years      | back         |
| 1a    | Beginning of year balance   | 7,61             | 3,989.       | б,         | 531,4    | 455.     | б,            | 479,   | ,178.    | 5,79        | 3,856.               | 4,0             | )49,       | 022.         |
|       | Contributions   | 1,30             | 5,000.       |            | 609,     | 039.     |               | 145    | ,000.    | 15          | 0,000.               |                 |            |              |
|       | Net investment earnings, gains,   |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
| -     | and losses  | 1,50             | 1,144.       |            | 555,     | 712.     |               | -17    | ,632.    | 60          | 4,170.               | 1,796,386.      |            |              |
| d     | Grants or scholarships  |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
|       | Other expenditures for facilities   |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
|       | and programs  |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
| f     | Administrative expenses   | 10               | 0,054.       |            |          | 217.     |               | 75     | ,091.    | 6           | 8,848.               |                 | 51,        | 552.         |
| g     | End of year balance   | 10,32            | 0,079.       | 7,         | 613,9    | 989.     | б,            | 531,   | ,455.    | 6,47        | 9,178.               | 5,5             | '93,       | 856.         |
| 2     | Provide the estimated percentage  | of the curr      | ent vear     | end bala   | ance (li | ne 1a.   | column        | n (a)) | held as  | :           |                      |                 |            |              |
| а     | Board designated or quasi-endown  | nent 🕨 💈         | 28.5800      | )_%        | ,        | 0.       |               | ( )/   |          |             |                      |                 |            |              |
| b     | Permanent endowment  44.6   | 5200 %           |              |            |          |          |               |        |          |             |                      |                 |            |              |
| С     | Temporarily restricted endowment  | ▶ 26.8           | 3000 %       |            |          |          |               |        |          |             |                      |                 |            |              |
|       | The percentages on lines 2a, 2b, a  |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |
| 3a    | Are there endowment funds not in  | the posses       | ssion of tl  | he orgar   | nizatio  | n that a | are hel       | d and  | d admir  | nistered fo | r the                | _               |            |              |
|       | organization by:  |                  |              |            |          |          |               |        |          |             |                      |                 | <b>Yes</b> | No           |
|       | (i) unrelated organizations   |                  |              |            |          |          |               |        |          |             |                      | 3a(i)           |            | X            |
|       | (ii) related organizations  |                  |              |            |          |          |               |        |          |             |                      | 3a(ii)          |            | X            |
| b     | If "Yes" on line 3a(ii), are the relate   | ed organiza      | ations liste | ed as req  | uired o  | on Sche  | edule R       | ?      |          |             |                      | 3b              |            |              |
| 4     | Describe in Part XIII the intended u  |                  | organiza     | tion's er  | ndowm    | ent fun  | nds.          |        |          |             |                      |                 |            |              |
| Par   | t VI Land, Buildings, and Equ<br>Complete if the organiza   | ipment.          | orod "Ve     | s" on F    | orm C    | ION P    | art IV        | lina   | 112 S    | ee Form     | 000 Par              | t X line        | 10         |              |
|       | Description of property   | 1011 2113        | (a) Cost or  |            |          |          | r other ba    |        |          | cumulated   | 1                    | I) Book val     |            |              |
|       |   |                  |              | tment)     |          |          | her)          |        | depr     | eciation    |                      | ,               |            |              |
|       | Land  | ••••             |              |            |          |          |               |        |          |             |                      |                 |            |              |
| b     | Buildings   | • • • • •  _     |              |            |          |          |               |        |          |             |                      |                 |            |              |
| c     | Leasehold improvements  |                  |              |            |          |          |               |        |          | <u> </u>    |                      |                 |            |              |
| d     | Equipment   |                  |              |            |          | 1        | 72,90         | ,3.    | 1        | 00,783      | •                    |                 | /2,1       | 20.          |
|       | Other   |                  | -            |            |          | -        |               |        |          |             |                      |                 | 10         | <u> </u>     |
| Tota  | I. Add lines 1a through 1e. (Column   | (d) must e       | equal Forr   | n 990, P   | art X,   | columr   | n (B), lir    | ne 10  | c.)      | <u></u>     |                      | ule D (Eor      |            | 20.          |
|       |   |                  |              |            |          |          |               |        |          |             |                      |                 |            |              |

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 Page 3 Part VII **Investments - Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ► Investments - Program Related. Part VIII Complete if the organization answered "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 market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) ACCRUED SALARIES 96,538. (3) DEFERRED RENT 50,982 (4) ACCRUED PAYROLL WITHHOLDING 42,253 (5) OTHER LIABILITIES 27,743 (6)(7)(8)(9)

217,516. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►

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 Schedule D (Form 990) 2017

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| Schedu | le D (Form 990) 2017   |          |                       |           | Page <b>4</b>      |
|--------|--|----------|-----------------------|-----------|--------------------|
| Part   | XI Reconciliation of Revenue per Audited Financial Statements W<br>Complete if the organization answered "Yes" on Form 990, Part IV          |          |                       | ٦.        |                    |
| 1      | Total revenue, gains, and other support per audited financial statements   |          |                       | 1         | 34,217,792.        |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |          |                       |           |                    |
| а      | Net unrealized gains (losses) on investments   | 2a       | 1,229,669.            |           |                    |
| b      | Donated services and use of facilities   | 2b       |                       |           |                    |
| c      | Recoveries of prior year grants.   | 2c       |                       |           |                    |
| d      | Other (Describe in Part XIII.)   | 2d       | 327,877.              |           |                    |
| e      | Add lines 2a through 2d  |          |                       | 2e        | 1,557,546.         |
| 3      | Subtract line 2e from line 1   |          |                       | 3         | 32,660,246.        |
| 4      | Amounts included on Form 990, Part VIII, line 12, but not on line 1:   | · · ·    |                       | -         |                    |
| -      | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a       | 123,303.              |           |                    |
| a<br>h | Other (Describe in Part XIII.)   | 4b       |                       |           |                    |
| b      |  |          |                       | 4c        | 123,303.           |
| с<br>5 | Add lines <b>4a</b> and <b>4b</b><br>Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> ) |          |                       | 5         | 32,783,549.        |
| Part   |  |          |                       | -         | - ,,               |
| i art  | Complete if the organization answered "Yes" on Form 990, Part IV   |          |                       | ••••      |                    |
| 1      | Total expenses and losses per audited financial statements   |          |                       | 1         | 33,005,435.        |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25:  |          |                       | -         |                    |
| _      |  | 2a       |                       |           |                    |
| a      | Donated services and use of facilities   | 2b       |                       |           |                    |
| b      | Prior year adjustments   | 20<br>20 |                       |           |                    |
| C      | Other losses.  | 20<br>2d |                       |           |                    |
| d      | Other (Describe in Part XIII.)   |          |                       | 0.        |                    |
| е      | Add lines 2a through 2d  |          |                       | 2e        | 33,005,435.        |
| 3      | Subtract line 2e from line 1   | • • • ,  |                       | 3         | 33,005,435.        |
| 4      | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |          | 102 202               |           |                    |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a       | 123,303.              |           |                    |
| b      | Other (Describe in Part XIII.)   | 4b       |                       |           |                    |
| с      | Add lines <b>4a</b> and <b>4b</b>  |          |                       | 4c        | 123,303.           |
| 5      | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)   |          |                       | 5         | 33,128,738.        |
|        | XIII Supplemental Information.   |          | / II / I /            |           |                    |
| Irovid |  | iort IV  | / upon the and the Do | vr+ \/ li | no // Llort V luno |

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.

SEE PAGE 5

Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

DESCRIPTION OF ORGANIZATION'S COLLECTIONS

SCHEDULE D, PART III, LINE 4

DURING 2017 THE FUND RECEIVED LITERARY PUBLICATIONS WITH AN APPRAISED VALUE OF \$16,800 ON THE DATE OF ACCEPTANCE OF THE GIFT. THE FUND SIGNED A LOAN AND DISPLAY AGREEMENT FOR 3 YEARS WITH UNIVERSITY COLLEGE DUBLIN FOR PURPOSES OF PUBLIC DISPLAY. DURING 2016 THE FUND RECEIVED LITERARY PUBLICATIONS WITH AN APPRAISED VALUE OF \$46,750 ON THE DATE OF ACCEPTANCE OF THE GIFT. THE FUND SIGNED A LOAN AND DISPLAY AGREEMENT FOR 3 YEARS WITH UNIVERSITY COLLEGE DUBLIN FOR PURPOSES OF PUBLIC DISPLAY. IN ADDITION, DURING 2016 THE FUND RECEIVED A GIFT WITH AN APPRAISED VALUE OF \$1,500 ON THE DATE OF ACCEPTANCE OF THE GIFT. THE FUND SIGNED A LOAN AND DISPLAY AGREEMENT FOR 3 YEARS WITH THE NATIONAL MARITIME MUSEUM OF IRELAND FOR PURPOSES OF PUBLIC DISPLAY.

#### ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

THE FUND'S ENDOWMENT CONSISTS OF FUNDS ESTABLISHED FOR THE PURPOSE OF CREATING UNENCUMBERED FUNDS THAT WILL PROVIDE ANNUAL MONIES TO SUPPORT THE ONGOING WORK OF THE AMERICAN IRELAND FUND IN IRELAND AND WORLDWIDE. THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS QUASI-ENDOWMENTS.

#### ASC 740

FORM 990 PART IX LINE 2

THE FUND IS A NOT-FOR-PROFIT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AS AMENDED (THE "CODE"), AND IS GENERALLY EXEMPT FROM INCOME TAXES PURSUANT TO SECTION 501(A) OF THE

JSA

| Schedule D (Form 990) 2017 | THE AMERICAN IRELA     | ND FUND (DBA THE IRELAND      | 25-1306992 |
|----------------------------|------------------------|-------------------------------|------------|
| Part XIII Supplemental In  | nformation (continued) |                               |            |
| CODE. THE FUND IS REQU     | JIRED TO ASSESS UNCER  | TAIN INCOME TAX POSITIONS AND |            |
| HAS DETERMINED THERE V     | NERE NO SUCH POSITION  | S THAT ARE MATERIAL TO THE    |            |
| FINANCIAL STATEMENTS.      |                        |                               |            |
|                            |                        |                               |            |
| OTHER AMOUNTS INCLUDE      | O ON AUDITED FINANCIA  | L STATEMENTS BUT NOT FORM 990 |            |
| SCHEDULE D, PART XI, 1     | LINE 2D                |                               |            |
| CHANGE IN LIFE INSURA      | NCE POLICY ASSETS      | \$(2,468)                     |            |
| FOREIGN EXCHANGE TRANS     | SLATION LOSS           | \$330,345                     |            |
|                            | -                      |                               |            |

TOTAL

JSA 7E1226 1.000 \$327,877

============

THE FOREIGN EXCHANGE LOSS RESULTED FROM A REDUCTION ON VALUE OF FOREIGN CURRENCY BALANCES THAT THE FUND HAD ON DEPOSIT DURING THE YEAR. Page 5

| SC⊦         | IEDULE F Stater  | nent of A                           | ctivities   | Outside the Unit   | ted States  | OMB No. 1545-0047                     |
|-------------|--|-------------------------------------|---|--|---|---------------------------------------|
| (For        | m 990) ► Complete  | line 14b, 15, or 16.                | 2017  |  |   |                                       |
| Depart      | ment of the Treasury   | Go to www.irs.go                    |   | to Form 990.<br>nstructions and the latest in  | formation.  | Open to Public                        |
|             | li Revenue Service   |                                     |   | THE IRELAND  |   | Inspection<br>entification number     |
| FUNI        | DS AMERICA / THE IRELA   |                                     | - (   |  | 25-13   | 306992                                |
| Part        | General Information of Form 990, Part IV, line 14              |                                     | Dutside the U   | nited States. Complete i   | if the organization a   | nswered "Yes" on                      |
|             | For grantmakers. Does the orga                                 |                                     |   |  |   |                                       |
|             | assistance, the grantees' eligibil                             |                                     |   |  |   |                                       |
|             | grants or assistance?  |                                     |   |  |   | X Yes No                              |
|             | For grantmakers. Describe in assistance outside the United St. |                                     | ganization's p  | rocedures for monitoring   | the use of its gra  | ants and other                        |
| 3           | Activities per Region. (The follow                             | -                                   |   |  |   |                                       |
|             | (a) Region   | (b) Number of offices in the region | (c) Number of<br>employees,<br>agents, and<br>independent<br>contractors<br>in the region | (d) Activities conducted in the<br>region (by type) (such as,<br>fundraising, program services,<br>investments, grants to recipients<br>located in the region) | (e) If activity listed in (<br>a program service<br>describe specific typ<br>service(s) in the regi | e of expenditures for and investments |
| (1)         | EUROPE   | 0.                                  | 0.  | PROGRAM SERVICES   | PHILANTHROPY  | 420,579.                              |
| (2)         | EUROPE   | 0.                                  | 0.  | GRANTMAKING  |   | 23,867,563.                           |
| (3)         | EAST ASIA AND THE PACIFIC                                      | 0.                                  | 0.  | PROGRAM SERVICES   | PHILANTHROPY  | 49,286.                               |
| (4)         |  |                                     |   |  |   |                                       |
| (5)         |  |                                     |   |  |   |                                       |
| (6)         |  |                                     |   |  |   |                                       |
| (7)         |  |                                     |   |  |   |                                       |
| (8)         |  |                                     |   |  |   |                                       |
| (9)         |  |                                     |   |  |   |                                       |
| (10)        |  |                                     |   |  |   |                                       |
| (11)        |  |                                     |   |  |   |                                       |
| (12)        |  |                                     |   |  |   |                                       |
| (13)        |  |                                     |   |  |   |                                       |
| (14)        |  |                                     |   |  |   |                                       |
|             |  |                                     |   |  |   |                                       |
| <u>(15)</u> |  |                                     |   |  |   |                                       |
| <u>(16)</u> |  |                                     |   |  |   |                                       |
| (17)        |  |                                     |   |  |   |                                       |
| 3a<br>b     | Sub-total<br>Total from continuation<br>sheets to Part I       |                                     |   |  |   | 24,337,428.                           |
| с           | Totals (add lines 3a and 3b)                                   |                                     |   |  |   | 24,337,428.                           |
|             | aperwork Reduction Act Notice, se                              | e the Instruction                   | s for Form 990.   |  | Sc  | hedule F (Form 990) 2017              |

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 7E1274 1.000 48093E 649N 11/14/2018 12:02:35 PM

| Part II | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. |  |                          |                         |                             |                                       |  |   |  |  |
|---------|---|--|--------------------------|-------------------------|-----------------------------|---------------------------------------|--|---|--|--|
| 1       | (a) Name of<br>organization   | (b) IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of<br>grant | (e) Amount of<br>cash grant | (f) Manner of<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |  |
| (1)     |   |  | EUROPE/ICELAND/GREENLAND | ARTS & CULTU            | 333,334.                    |                                       |  |   |  |  |
| (2)     |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 704,921.                    |                                       |  |   |  |  |
| (3)     |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 458,050.                    |                                       |  |   |  |  |
| (4)     |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 450,000.                    |                                       |  |   |  |  |
| (5)     |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 386,576.                    |                                       |  |   |  |  |
| (6)     |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 483,390.                    |                                       |  |   |  |  |
| (7)     |   |  | EUROPE/ICELAND/GREENLAND | PEACE AND RE            | 226,000.                    |                                       |  |   |  |  |
| (8)     |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 10,000.                     |                                       |  |   |  |  |
| (9)     |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 64,030.                     |                                       |  |   |  |  |
| (10)    |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 176,398.                    |                                       |  |   |  |  |
| (11)    |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 46,000.                     |                                       |  |   |  |  |
| (12)    |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 142,861.                    |                                       |  |   |  |  |
| (13)    |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 179,221.                    |                                       |  |   |  |  |
| (14)    |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 249,113.                    |                                       |  |   |  |  |
| (15)    |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 10,850,247.                 |                                       |  |   |  |  |
| (16)    |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 13,000.                     |                                       |  |   |  |  |

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

Schedule F (Form 990) 2017

Page 2

| Part II      | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. |  |                          |                      |                             |                                       |  |   |  |  |
|--------------|---|--|--------------------------|----------------------|-----------------------------|---------------------------------------|--|---|--|--|
| 1            | (a) Name of<br>organization   | (b) IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of grant | (e) Amount of<br>cash grant | (f) Manner of<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |  |
| (1)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 81,195.                     |                                       |  |   |  |  |
| (2)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 285,997.                    |                                       |  |   |  |  |
| (3)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 10,000.                     |                                       |  |   |  |  |
| (4)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 20,000.                     |                                       |  |   |  |  |
| (5)          |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 161,550.                    |                                       |  |   |  |  |
| (6)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 77,579.                     |                                       |  |   |  |  |
| (7)          |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 48,375.                     |                                       |  |   |  |  |
| (8)          |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 70,000.                     |                                       |  |   |  |  |
| (9)          |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 36,626.                     |                                       |  |   |  |  |
| (10)         |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 100,000.                    |                                       |  |   |  |  |
| (11)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 19,112.                     |                                       |  |   |  |  |
| (12)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 25,000.                     |                                       |  |   |  |  |
| (13)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 52,226.                     |                                       |  |   |  |  |
| (14)         |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 50,200.                     |                                       |  |   |  |  |
| <u>(</u> 15) |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 109,765.                    |                                       |  |   |  |  |
| (16)         |   |  | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 9,206.                      |                                       |  |   |  |  |

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

Schedule F (Form 990) 2017

►

Page 2

| Part II | Grants and Other Assist      | rants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, |                          |                         |                                 |                                       |   | orm 990,                                    |  |
|---------|------------------------------|---|--------------------------|-------------------------|---------------------------------|---------------------------------------|---|---|--|
|         | Part IV, line 15, for any re | cipient who recei   | ved more than \$5,000. F | Part II can be          | duplicated if addit             | ional space i                         | s needed.                                     |   |  |
| 1       | (a) Name of organization     | <b>(b)</b> IRS code<br>section and EIN<br>(if applicable)   | (c) Region               | (d) Purpose of<br>grant | <b>(e)</b> Amount of cash grant | (f) Manner of<br>cash<br>disbursement | <b>(g)</b> Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 75,184.                         |                                       |   |   |  |
| (2)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 50,000.                         |                                       |   |   |  |
| (3)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 5,025.                          |                                       |   |   |  |
| (4)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 50,000.                         |                                       |   |   |  |
| (5)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 26,462.                         |                                       |   |   |  |
| (6)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 47,156.                         |                                       |   |   |  |
| (7)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 43,530.                         |                                       |   |   |  |
| (8)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 5,135.                          |                                       |   |   |  |
| (9)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 5,170.                          |                                       |   |   |  |
| (10)    |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 48,500.                         |                                       |   |   |  |
| (11)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 38,005.                         |                                       |   |   |  |
| (12)    |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 65,000.                         |                                       |   |   |  |
| (13)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU            | 17,612.                         |                                       |   |   |  |
| (14)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 33,484.                         |                                       |   |   |  |
| (15)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 25,000.                         |                                       |   |   |  |
| (16)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 5,170.                          |                                       |   |   |  |

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

Schedule F (Form 990) 2017

►

| Part II | Grants and Other Assist      | ance to Organiza  | tions or Entities Outsid | e the United         | States. Complete                | e if the organ                        | nization answere                              | ed "Yes" on F                               | orm 990,   |
|---------|------------------------------|---|--------------------------|----------------------|---------------------------------|---------------------------------------|---|---|--|
|         | Part IV, line 15, for any re | cipient who receiv  | /ed more than \$5,000. F | Part II can be       | duplicated if addit             | ional space is                        | s needed.                                     |   |  |
| 1       | (a) Name of organization     | <b>(b)</b> IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of grant | <b>(e)</b> Amount of cash grant | (f) Manner of<br>cash<br>disbursement | <b>(g)</b> Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 15,706.                         |                                       |   |   |  |
| (2)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,170.                          |                                       |   |   |  |
| (3)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,170.                          |                                       |   |   |  |
| (4)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,500.                          |                                       |   |   |  |
| (5)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,706.                          |                                       |   |   |  |
| (6)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 5,706.                          |                                       |   |   |  |
| (7)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 25,241.                         |                                       |   |   |  |
| (8)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 5,706.                          |                                       |   |   |  |
| (9)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 70,000.                         |                                       |   |   |  |
| (10)    |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 26,500.                         |                                       |   |   |  |
| (11)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,706.                          |                                       |   |   |  |
| (12)    |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 5,706.                          |                                       |   |   |  |
| (13)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 27,500.                         |                                       |   |   |  |
| (14)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 5,706.                          |                                       |   |   |  |
| (15)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,706.                          |                                       |   |   |  |
| (16)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 260,000.                        |                                       |   |   |  |

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

Schedule F (Form 990) 2017

| Part II     | Grants and Other Assist<br>Part IV, line 15, for any re | ance to Organiza                                   | tions or Entities Outsid | e the United         | States. Complete            | e if the organ                        | ization answere                        | ed "Yes" on F                               | orm 990,   |
|-------------|---|--|--------------------------|----------------------|-----------------------------|---------------------------------------|--|---|--|
| 1           | (a) Name of<br>organization                             | (b) IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of grant | (e) Amount of<br>cash grant | (f) Manner of<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)         |   |  | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 5,706.                      |                                       |  |   |  |
| (2)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 26,524.                     |                                       |  |   |  |
| (3)         |   |  | EUROPE/ICELAND/GREENLAND | PEACE AND RE         | 13,500.                     |                                       |  |   |  |
| (4)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 52,000.                     |                                       |  |   |  |
| (5)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 9,047.                      |                                       |  |   |  |
| (6)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 30,000.                     |                                       |  |   |  |
| (7)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,706.                      |                                       |  |   |  |
| (8)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,706.                      |                                       |  |   |  |
| (9)         |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 5,706.                      |                                       |  |   |  |
| <u>(10)</u> |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 6,000.                      |                                       |  |   |  |
| (11)        |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,706.                      |                                       |  |   |  |
| (12)        |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 5,706.                      |                                       |  |   |  |
| (13)        |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 10,000.                     |                                       |  |   |  |
| (14)        |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 7,500.                      |                                       |  |   |  |
| (15)        |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 16,761.                     |                                       |  |   |  |
| (16)        |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,926.                      |                                       |  |   |  |

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

Schedule F (Form 990) 2017

►

| Part II | Grants and Other Assist      | ance to Organiza  | tions or Entities Outsid | e the United         | States. Complete                | e if the organ                        | ization answere                               | d "Yes" on F                                | orm 990,   |
|---------|------------------------------|---|--------------------------|----------------------|---------------------------------|---------------------------------------|---|---|--|
|         | Part IV, line 15, for any re | cipient who receiv  | /ed more than \$5,000. F | Part II can be       | duplicated if addit             | ional space is                        | s needed.                                     |   |  |
| 1       | (a) Name of organization     | <b>(b)</b> IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of grant | <b>(e)</b> Amount of cash grant | (f) Manner of<br>cash<br>disbursement | <b>(g)</b> Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 6,070.                          |                                       |   |   |  |
| (2)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 21,449.                         |                                       |   |   |  |
| (3)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 6,462.                          |                                       |   |   |  |
| (4)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 6,677.                          |                                       |   |   |  |
| (5)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 6,451.                          |                                       |   |   |  |
| (6)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 6,751.                          |                                       |   |   |  |
| (7)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 11,161.                         |                                       |   |   |  |
| (8)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS AND CUL         | 6,847.                          |                                       |   |   |  |
| (9)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 6,847.                          |                                       |   |   |  |
| (10)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 5,335.                          |                                       |   |   |  |
| (11)    |                              |   | EAST ASIA/PACIFIC        | COMMUNITY DE         | 7,400.                          |                                       |   |   |  |
| (12)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 6,847.                          |                                       |   |   |  |
| (13)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 6,976.                          |                                       |   |   |  |
| (14)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 7,000.                          |                                       |   |   |  |
| (15)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 26,594.                         |                                       |   |   |  |
| (16)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 7,000.                          |                                       |   |   |  |

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

| Part II | Grants and Other Assist      | ance to Organiza  | tions or Entities Outsid | e the United         | States. Complete         | if the organ                          | ization answere                               | d "Yes" on F                                | orm 990,   |
|---------|------------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------------|---|---|--|
|         | Part IV, line 15, for any re | cipient who receiv  | /ed more than \$5,000. F | Part II can be       | duplicated if addit      | ional space is                        | s needed.                                     |   |  |
| 1       | (a) Name of organization     | <b>(b)</b> IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of<br>cash<br>disbursement | <b>(g)</b> Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 7,418.                   |                                       |   |   |  |
| (2)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 7,830.                   |                                       |   |   |  |
| (3)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 7,895.                   |                                       |   |   |  |
| (4)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 7,897.                   |                                       |   |   |  |
| (5)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 60,369.                  |                                       |   |   |  |
| (6)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 7,988.                   |                                       |   |   |  |
| (7)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 7,988.                   |                                       |   |   |  |
| (8)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 8,498.                   |                                       |   |   |  |
| (9)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION            | 9,000.                   |                                       |   |   |  |
| (10)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 9,034.                   |                                       |   |   |  |
| (11)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 9,047.                   |                                       |   |   |  |
| (12)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 10,000.                  |                                       |   |   |  |
| (13)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS & CULTU         | 8,618.                   |                                       |   |   |  |
| (14)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 10,000.                  |                                       |   |   |  |
| (15)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 10,000.                  |                                       |   |   |  |
| (16)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 10,000.                  |                                       |   |   |  |

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

Schedule F (Form 990) 2017

| Part II | Grants and Other Assist      |   |                          |                         |                                 |                                       |   | d "Yes" on F                                | orm 990,   |
|---------|------------------------------|---|--------------------------|-------------------------|---------------------------------|---------------------------------------|---|---|--|
|         | Part IV, line 15, for any re | cipient who receiv  | /ed more than \$5,000. F | Part II can be          | duplicated if addit             | ional space is                        | s needed.                                     |   |  |
| 1       | (a) Name of organization     | <b>(b)</b> IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of<br>grant | <b>(e)</b> Amount of cash grant | (f) Manner of<br>cash<br>disbursement | <b>(g)</b> Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)     |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 10,000.                         |                                       |   |   |  |
| (2)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS AND CUL            | 5,706.                          |                                       |   |   |  |
| (3)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 10,500.                         |                                       |   |   |  |
| (4)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 58,699.                         |                                       |   |   |  |
| (5)     |                              |   | EUROPE/ICELAND/GREENLAND | ARTS AND CUL            | 11,500.                         |                                       |   |   |  |
| (6)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 5,706.                          |                                       |   |   |  |
| (7)     |                              |   | MIDDLE EAST/NORTH AFRICA | EDUCATION               | 11,946.                         |                                       |   |   |  |
| (8)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 12,000.                         |                                       |   |   |  |
| (9)     |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 15,000.                         |                                       |   |   |  |
| (10)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 61,929.                         |                                       |   |   |  |
| (11)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 20,000.                         |                                       |   |   |  |
| (12)    |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 5,793.                          |                                       |   |   |  |
| (13)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 20,000.                         |                                       |   |   |  |
| (14)    |                              |   | EUROPE/ICELAND/GREENLAND | EDUCATION               | 20,000.                         |                                       |   |   |  |
| (15)    |                              |   | EUROPE/ICELAND/GREENLAND | ARTS AND CUL            | 22,591.                         |                                       |   |   |  |
| (16)    |                              |   | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 23,670.                         |                                       |   |   |  |

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

Schedule F (Form 990) 2017

| Part II      | Grants and Other Assist<br>Part IV, line 15, for any re |  |                          |                         |                             |                                       |  | ed "Yes" on F                               | orm 990,   |
|--------------|---|--|--------------------------|-------------------------|-----------------------------|---------------------------------------|--|---|--|
| 1            | (a) Name of<br>organization                             | (b) IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of<br>grant | (e) Amount of<br>cash grant | (f) Manner of<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)          |   |  | EUROPE/ICELAND/GREENLAND | ARTS AND CUL            | 23,777.                     |                                       |  |   |  |
| (2)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 25,000.                     |                                       |  |   |  |
| (3)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 10,000.                     |                                       |  |   |  |
| (4)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 5,832.                      |                                       |  |   |  |
| (5)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 11,252.                     |                                       |  |   |  |
| (6)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 29,349.                     |                                       |  |   |  |
| (7)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 30,000.                     |                                       |  |   |  |
| (8)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 32,315.                     |                                       |  |   |  |
| (9)          |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 33,977.                     |                                       |  |   |  |
| (10)         |   |  | EUROPE/ICELAND/GREENLAND | ARTS AND CUL            | 58,699.                     |                                       |  |   |  |
| (11)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 100,000.                    |                                       |  |   |  |
| (12)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 143,112.                    |                                       |  |   |  |
| (13)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 156,000.                    |                                       |  |   |  |
| (14)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 50,000.                     |                                       |  |   |  |
| <u>(</u> 15) |   |  | EUROPE/ICELAND/GREENLAND | EDUCATION               | 214,976.                    |                                       |  |   |  |
| (16)         |   |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE            | 250,000.                    |                                       |  |   |  |

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

Schedule F (Form 990) 2017

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| Part II | Grants and Other Assista<br>Part IV, line 15, for any re |  |                          |                      |                             |                                       |  | d "Yes" on F                                | orm 990,   |
|---------|--|--|--------------------------|----------------------|-----------------------------|---------------------------------------|--|---|--|
| 1       | (a) Name of<br>organization                              | (b) IRS code<br>section and EIN<br>(if applicable) | (c) Region               | (d) Purpose of grant | (e) Amount of<br>cash grant | (f) Manner of<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | (h) Description<br>of noncash<br>assistance | (i) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
| (1)     |  |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 250,000.                    |                                       |  |   |  |
| (2)     |  |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 375,593.                    |                                       |  |   |  |
| (3)     |  |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 264,862.                    |                                       |  |   |  |
| (4)     |  |  | EUROPE/ICELAND/GREENLAND | EDUCATION            | 1,180,000.                  |                                       |  |   |  |
| (5)     |  |  | EUROPE/ICELAND/GREENLAND | ARTS AND CUL         | 2,367,400.                  |                                       |  |   |  |
| (6)     |  |  | EUROPE/ICELAND/GREENLAND | COMMUNITY DE         | 44,030.                     |                                       |  |   |  |
| (7)     |  |  |                          |                      |                             |                                       |  |   |  |
| (8)     |  |  |                          |                      |                             |                                       |  |   |  |
| (9)     |  |  |                          |                      |                             |                                       |  |   |  |
| (10)    |  |  |                          |                      |                             |                                       |  |   |  |
| (11)    |  |  |                          |                      |                             |                                       |  |   |  |
| (12)    |  |  |                          |                      |                             |                                       |  |   |  |
| (13)    |  |  |                          |                      |                             |                                       |  |   |  |
| (14)    |  |  |                          |                      |                             |                                       |  |   |  |
| (15)    |  |  |                          |                      |                             |                                       |  |   |  |
| (16)    |  |  |                          |                      |                             |                                       |  |   |  |

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

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THE AMERICAN IRELAND FUND (DBA THE IRELAND

| Sched | ule F (Form 990) 2017   |    |      | Page <b>4</b> |
|-------|---|----|------|---------------|
| Part  | IV Foreign Forms  |    |      |               |
| 1     | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)  | Ye | es X | No            |
| 2     | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | Ye | es 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)  | Ye | es 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>  | Ye | es 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)  | Ye | es X | No            |
| 6     | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)  | Ye | es X | No            |

Schedule F (Form 990) 2017

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Schedule F (Form 990) 2017

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

PROCEDURE FOR MONITORING USE OF GRANT FUNDS OUTSIDE U.S.

SCHEDULE F, PART I, LINE 2

WE MONITOR THE GRANT RECIPIENTS IN A NUMBER OF WAYS: VISITS TO THE

GRANTEES TO OBSERVE THE ORGANIZATIONS' PROGRAMS, INTERVIEWS WITH GRANTEES

FOR PUBLICATIONS, RECEIPT OF FINANCIAL STATEMENT REPORTING ON HOW THE

MONEY WAS SPENT AND GENERAL ONGOING COMMUNICATION WITH THE GRANTEES BY

EXECUTIVES AND OTHER EMPLOYEES.

| SCHEDULE G                        | Supplemen                                  | tal Information R                               | Regarding     | g Fundrai                                  | sing or Gaming                       | Activities  | OMB No. 1545-0047  |
|-----------------------------------|--|---|---------------|--|--------------------------------------|---|--|
| (Form 990 or 990-EZ)              |  | he organization answe<br>organization entered i |               |  |                                      | 9, or if the  | 2017   |
| Department of the Treasury        |  | -   | to Form 990   |  | -                                    |   | Open to Public   |
| Internal Revenue Service          |  | Go to www.irs.                                  |               |  |                                      |   | Inspection   |
| Name of the organization          | THE AMERICAN                               | -   | (DBA TI       | HE IREL                                    | AND                                  | Employer identification   | on number  |
| FUNDS AMERICA /                   | THE IRELAND F                              |   | ·             |  |                                      | 25-1306992  | 47   |
|                                   | ing Activities. Con<br>0-EZ filers are not |   |               |  | I "Yes" on Form S                    | 990, Part IV, line  | 17.  |
|                                   | the organization rais                      |   | •             |  | activities. Check a                  | all that apply.   |  |
| a 🛛 Mail solicita                 | tions                                      | е   | X Solid       | citation of                                | non-government g                     | rants   |  |
| <b>b</b> X Internet and           | email solicitations                        | f   | Solid         | citation of                                | government grants                    | 3   |  |
| c X Phone solic                   | itations                                   | g   | X Spe         | cial fundra                                | ising events                         |   |  |
| d X In-person so                  | olicitations                               |   |               |  |                                      |   |  |
| 2a Did the organiza               |  |   |               |  |                                      |   |  |
|                                   | es listed in Form 990                      | · · ·   |               | •  |                                      | •   | X Yes No   |
|                                   | 10 highest paid indi                       |   | (fundraise    | ers) pursua                                | ant to agreements                    | under which the   | fundraiser is to be  |
| compensated at                    | least \$5,000 by the                       | organization.                                   |               |  |                                      |   |  |
| (i) Name and add<br>or entity (fu |  | (ii) Activity                                   | custody o     | ndraiser have<br>or control of<br>outions? | (iv) Gross receipts<br>from activity | <b>(v)</b> Amount paid to<br>(or retained by)<br>fundraiser listed in | <b>(vi)</b> Amount paid to<br>(or retained by)<br>organization |
|                                   |  |   | Yes           | No   |                                      | col. (i)  |  |
| 1                                 |  |   |               |  |                                      |   |  |
| ATTACHMENT 1                      |  |   |               |  |                                      |   |  |
| 2                                 |  |   |               |  |                                      |   |  |
| 3                                 |  |   |               |  |                                      |   |  |
| 4                                 |  |   |               |  |                                      |   |  |
| 5                                 |  |   |               |  |                                      |   |  |
| 5                                 |  |   |               |  |                                      |   |  |
| 6                                 |  |   |               |  |                                      |   |  |
| 7                                 |  |   |               |  |                                      |   |  |
| 8                                 |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
| 9                                 |  |   |               |  |                                      |   |  |
| 10                                |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   | which the organiza                         |   |               |  | 2,914,720.                           |   |  |
| registration or lic               |  |   |               |  |                                      |   |  |
| AL, AK, AZ, AR, CA,               | CO,CT,DE,DC,FL                             | ,GA,IL,   |               |  |                                      |   |  |
| KS, KY, ME, MD, MA, I             | MI, MN, MS, MO, MT                         | , NH, NJ, NM, NY,                               | , NC , ND , ( | ΟH,  |                                      |   |  |
| OK, OR, PA, RI, SC,               | ΓΝ, ΤΧ, VA, WA, WV                         | ,WI,  |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |
|                                   |  |   |               |  |                                      |   |  |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. FOI Faperner: JSA 7E1281 1.000 48093E 649N 11/14/2018 12:02:35 PM

# 25-1306992

#### Schedule G (Form 990 or 990-EZ) 2017

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

|                 |          |  | (a) Event #1<br>NY GALA     | (b) Event #2<br>BOSTON GALA                             | (c) Other events | (d) Total events<br>(add col. (a) through           |
|-----------------|----------|--|-----------------------------|---|------------------|---|
|                 |          |  | (event type)                | (event type)  | (total number)   | col. <b>(c)</b> )                                   |
| Revenue         | 1        | Gross receipts   | 2,266,950.                  | 2,565,888.  | 6,399,879.       | 11,232,717.   |
| Å               |          | Less: Contributions  | 2,096,715.                  | 2,375,888.  | 5,270,695.       | 9,743,298.  |
|                 | 3        | Gross income (line 1 minus line 2)   | 170,235.                    | 190,000.  | 1,129,184.       | 1,489,419.  |
|                 | 4        | Cash prizes  |                             |   |                  |   |
|                 | 5        | Noncash prizes   |                             |   |                  |   |
| enses           | 6        | Rent/facility costs  |                             |   |                  |   |
| Direct Expenses | 7        | Food and beverages   |                             |   |                  |   |
| Dire            | 8        | Entertainment  |                             |   |                  |   |
|                 | 9        | Other direct expenses  | 473,184.                    | 391,676.  | 3,245,478.       | 4,110,338.  |
|                 | 10<br>11 | Direct expense summary. Add lines 4<br>Net income summary. Subtract line 1         | 4 through 9 in column (d)   | · · · · · · · · · · · · · · · · · · ·                   |                  | 4,110,338.  |
| Pa              |          |  |                             |   |                  |   |
|                 |          | than \$15,000 on Form 990-E  |                             |   |                  |   |
| Revenue         |          |  | (a) Bingo                   | <b>(b)</b> Pull tabs/instant<br>bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add<br>col. (a) through col. (c)) |
| Re              | 1        | Gross revenue  |                             |   | 29,448.          | 29,448.   |
| ses             | 2        | Cash prizes  |                             |   |                  |   |
| Direct Expenses | 3        | Noncash prizes   |                             |   |                  |   |
| Direct          | 4        | Rent/facility costs  |                             |   |                  |   |
|                 | 5        | Other direct expenses  |                             |   | 7,988.           | 7,988.  |
|                 | 6        | Volunteer labor  | Yes%                        | Yes%  | Yes%<br>No       |   |
|                 | 7        | Direct expense summary. Add lines 2  | 2 through 5 in column (d)   |   |                  | 7,988.  |
|                 | 8        | Net gaming income summary. Subtra  | act line 7 from line 1, col | umn (d)   | <b>. .</b> .     | 21,460.   |
| 9               |          | nter the state(s) in which the organization the organization licensed to conduct g |                             |   |                  |   |
| a               | 1        | the organization licensed to conduct i   | gaming activities in each   | of these states?  |                  | Yes X No  |
| ŀ               |          |  |                             |   |                  |   |
| k               | ) If     | "No," explain:<br>E SUPPLEMENTAL PAGE  |                             |   |                  |   |
|                 | If<br>SE | "No," explain:   |                             |   |                  | Yes X No  |

Schedule G (Form 990 or 990-EZ) 2017

|       | THE AMERICAN IRELAND FUND (DBA THE IRELAND   | 25-13069      | 92    |     |            |
|-------|--|---------------|-------|-----|------------|
| Sched | ule G (Form 990 or 990-EZ) 2017  |               |       | Pa  | age 3      |
| 11    | Does the organization conduct gaming activities with nonmembers?   | L             | Yes   | Х   | No         |
| 12    | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entit |               | _     |     |            |
|       | formed to administer charitable gaming?  | ,L            | Yes   | Х   | No         |
| 13    | Indicate the percentage of gaming activity conducted in:   |               |       |     |            |
| а     | The organization's facility  | 13a           |       |     | %          |
| b     | An outside facility  | 13b           | 100.0 | 000 | ) <u>%</u> |
| 14    | Enter the name and address of the person who prepares the organization's gaming/special events book records: | is and        |       |     |            |
|       |  |               |       |     |            |
|       | Name  ANNE MOONEY, CFO   |               |       |     |            |
|       | Address ▶ 10 POST OFFICE SQUARE, SUITE 1205 BOSTON, MA 02109   |               |       |     |            |
| 15 a  | Does the organization have a contract with a third party from whom the organization receives revenue?        |               | Vos   | x   | No         |
| h     | If "Yes," enter the amount of gaming revenue received by the organization  \$                                | and the       | _ 165 |     | NO         |
| D D   | amount of gaming revenue retained by the third party $\blacktriangleright$ \$                                |               |       |     |            |
| с     | If "Yes," enter name and address of the third party:   |               |       |     |            |
| •     |  |               |       |     |            |
|       | Name ►   |               |       |     |            |
|       | Address ►  |               |       |     |            |
| 16    | Gaming manager information:  |               |       |     |            |
|       | Name NO GAMING MANAGER   |               |       |     |            |
|       | Gaming manager compensation ► \$   |               |       |     |            |
|       | Description of services provided   |               |       |     |            |
|       | Director/officer Employee Independent contractor   |               |       |     |            |
| 17    | Mandatory distributions:   |               |       |     |            |
| а     | Is the organization required under state law to make charitable distributions from the gaming pro-           | oceeds to     |       |     |            |
|       | retain the state gaming license?   | [             | Yes   | Χ   | No         |
| b     | Enter the amount of distributions required under state law to be distributed to other exempt orga            | anizations    |       |     |            |
|       | or spent in the organization's own exempt activities during the tax year 🕨 \$                                |               |       |     |            |
| Part  | t IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns                  | (iii) and (v) | , and |     |            |
|       | Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additio                   | nal informa   | ation |     |            |
|       | (see instructions).  |               |       |     |            |
| SCH   | EDULE G, PART I - HIGHEST PAID FUNDRAISERS   |               |       |     |            |
| THE   | "AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER" IS THE ALLOCATION OF  |               |       |     |            |
| TIM   | E AND FEES RELATED TO DIRECT FUNDRAISING ACTIVITIES. THE TOTAL AMOUNT  |               |       |     |            |
| PAI   | D TO THESE EVENT PLANNERS FOR ALL SERVICES IS NOTED ON FORM 990, PART  |               |       |     |            |
| VII   | - FIVE HIGHEST COMPENSATED INDEPENDENT CONTRACTORS.  |               |       |     |            |

| THE AMERICAN IRELAND FUND (DBA THE IRI | E AME | HE A | MERICAN | IRELAND | FUND | DBA | THE | IRELAND |  |
|--|-------|------|---------|---------|------|-----|-----|---------|--|
|--|-------|------|---------|---------|------|-----|-----|---------|--|

|        | THE AMERICAN IRELAND FUND (DBA THE IRELAND   | 25-130699 | 2   |        |
|--------|--|-----------|-----|--------|
| Sched  | ule G (Form 990 or 990-EZ) 2017  |           |     | Page 3 |
| 11     | Does the organization conduct gaming activities with nonmembers?   |           | Yes | No     |
| 12     | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entit |           |     |        |
|        | formed to administer charitable gaming?  |           | Yes | No     |
| 13     | Indicate the percentage of gaming activity conducted in:   |           |     |        |
| а      | The organization's facility  | 13a       |     | %      |
| b      | An outside facility  |           |     | %      |
| 14     | Enter the name and address of the person who prepares the organization's gaming/special events book records: |           |     |        |
|        |  |           |     |        |
|        | Name ►   |           |     |        |
|        | Address ►  |           |     |        |
| 15 a   | Does the organization have a contract with a third party from whom the organization receives g               | gaming    | _   |        |
|        | revenue?   |           | Yes | No     |
| b      | If "Yes," enter the amount of gaming revenue received by the organization ► \$                               | and the   |     |        |
|        | amount of gaming revenue retained by the third party ► \$  |           |     |        |
| С      | If "Yes," enter name and address of the third party:   |           |     |        |
|        | Name ►   |           |     |        |
|        | Address ►  |           |     |        |
| 16     | Gaming manager information:  |           |     |        |
|        | Name ►   |           |     |        |
|        | Gaming manager compensation ► \$   |           |     |        |
|        | Description of services provided ►   |           |     |        |
|        | Director/officer Employee Independent contractor   |           |     |        |
| 17     | Mandatory distributions:   |           |     |        |
| а      | Is the organization required under state law to make charitable distributions from the gaming pro            | ceeds to  |     |        |
|        | retain the state gaming license?   |           | Yes | No     |
| b      | Enter the amount of distributions required under state law to be distributed to other exempt orga            |           | _   |        |
|        | or spent in the organization's own exempt activities during the tax year 🕨 \$                                |           |     |        |
| Part   | Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition                  |           |     |        |
| 0.0111 | (see instructions).  |           |     |        |
| SCH    | EDULE G, PART III, LINE 9B EXPLANATION   |           |     |        |
| AIF    | IS CURRENTLY LICENSED TO CONDUCT GAMING ACTIVITIES IN CALIFORNIA AND   |           |     |        |
| IS (   | CURRENTLY REVIEWING THE LICENSING OBLIGATIONS, IF ANY, FOR OTHER   |           |     |        |
| STA    | TES.   |           |     |        |

Schedule G (Form 990 or 990-EZ) 2017

25-1306992

ATTACHMENT 1

# 990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

| NAME AND ADDRESS OF<br>FUNDRAISER   | ACTIVITY                  | DID FUNDRAISER HAVE<br>CUSTODY OR CONTROL<br>OF CONTRIBUTIONS?<br>YES NO | GROSS RECEIPTS<br>FROM ACTIVITY | AMOUNT PAID TO<br>(OR RETAINED BY<br>FUNDRAISER | AMOUNT PAID TO<br>(OR RETAINED BY<br>ORGANIZATION |
|---|---------------------------|--|---------------------------------|---|---|
| CARLA CAPONE COMPANY LLC<br>1501 BROADWAY<br>SUITE 1808<br>NEW YORK<br>NY 10036 | EVENT PLNG<br>FUNDRAISING | X  | 2,266,950.                      | 9,750.  | 2,257,200.  |
| SUSAN O'NEILL & ASSOCIATE<br>5910 GLOSTER ROAD<br>BETHESDA<br>MD 20816          | EVENT PLNG<br>FUNDRAISING | Х  | 647,770.                        | 14,400.   | 633,370.  |

|  |                                 |                                    | Assistance t<br>Individuals in | •                                     | •   | F                                     | OMB No. 1545-0047                     |
|--|---------------------------------|------------------------------------|--------------------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|
| Com  | plete if the o                  | ganization ans                     | wered "Yes" on F               | orm 990, Part IV                      | , line 21 or 22.  |                                       |                                       |
| Department of the Treasury   |                                 |                                    | ach to Form 990.               |                                       |   |                                       | Open to Public                        |
| Internal Revenue Service   | ► Go                            | to www.irs.gov                     | /Form990 for the I             | atest information                     | ۱.  |                                       | Inspection                            |
| Name of the organization THE AMERICAN IREL   | AND FUND                        | (DBA THE I                         | RELAND                         |                                       |   | Employer identific                    |                                       |
| FUNDS AMERICA / THE IRELAND FUNDS)   |                                 |                                    |                                |                                       |   | 25-130699                             | 92                                    |
| Part I General Information on Grants and   | d Assistanc                     | e                                  |                                |                                       |   |                                       |                                       |
| <ol> <li>Does the organization maintain records to su<br/>the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> <li>Part II Grants and Other Assistance to D</li> </ol> | s or assistand<br>lures for mor | e?<br>hitoring the use             | of grant funds in the          | e United States.                      |   |                                       | X Yes No                              |
| Part II Grants and Other Assistance to D<br>990, Part IV, line 21, for any recipi  |                                 | -                                  |                                |                                       |   |                                       |                                       |
| 1 (a) Name and address of organization<br>or government  | (b) EIN                         | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant    | (e) Amount of non-<br>cash assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | (g) Description of noncash assistance | (h) Purpose of grant<br>or assistance |
| (1) IRISH ARTS CENTER  |                                 |                                    |                                |                                       |   |                                       |                                       |
| 553 WEST 51ST STREET NEW YORK, NY 10019  | 51-0244834                      | 501(C)(3)                          | 1,099,888.                     |                                       |   |                                       | ARTS & CULTURE                        |
| (2) BOSTON COLLEGE - CARROLL SCHOOL OF MANAGEME  |                                 |                                    |                                |                                       |   |                                       |                                       |
| CADIGAN ALUMNI CNTR CHESTNUT HILL, MA 02467  | 04-2103545                      | 501(C)(3)                          | 320,000.                       |                                       |   |                                       | EDUCATION                             |
| (3) BOSTON COLLEGE   |                                 |                                    |                                |                                       |   |                                       |                                       |
| 18 OLD COLONY ROAD CHESTNUT HILL, MA 02468   | 04-2103545                      | 501(C)(3)                          | 10,000.                        |                                       |   |                                       | EDUCATION                             |
| (4) NEW YORK IRISH CENTER  |                                 |                                    |                                |                                       |   |                                       |                                       |
| 10-40 JACKSN AVE LONG ISLAND CITY, NY 11101  | 55-0869151                      | 501(C)(3)                          | 857,000.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (5) NUI GALWAY - US  |                                 |                                    |                                |                                       |   |                                       |                                       |
| 243 FIFTH AVENUE, #111 NEW YORK, NY 10016  | 30-0099346                      | 501(C)(3)                          | 221,024.                       |                                       |   |                                       | EDUCATION                             |
| (6) ST. PATRICK'S CATHEDRAL LANDMARK FOUNDATION  |                                 |                                    |                                |                                       |   |                                       |                                       |
| PARISH HOUSE NEW YORK, NY 10022  | 45-2400914                      | 501(C)(3)                          | 33,333.                        |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (7) GROUND ZERO 360  |                                 |                                    |                                |                                       |   |                                       |                                       |
| 43 BRONX RIVER ROAD YONKERS, NY 10704  | 27-5165397                      | 501(C)(3)                          | 63,995.                        |                                       |   |                                       | ARTS & CULTURE                        |
| (8) CONCERN WORLDWIDE USA  | 1                               |                                    |                                |                                       |   |                                       |                                       |
| 355 LEXINGTON AVE. NEW YORK, NY 10017  | 13-3712030                      | 501(C)(3)                          | 71,500.                        |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (9) IRISH REPERTORY THEATRE  |                                 |                                    |                                |                                       |   |                                       |                                       |
| 132 WEST 22ND STREET NEW YORK, NY 10011  | 13-3531713                      | 501(C)(3)                          | 55,000.                        |                                       |   |                                       | ARTS & CULTURE                        |
| (10) IRELAND US COUNCIL FOUNDATION, INC.   |                                 |                                    |                                |                                       |   |                                       |                                       |
| C/O BUTTONWOOD PARTNERS NEW YORK, NY 10170   | 23-7003298                      | 501(C)(6)                          | 32,500.                        |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (11) NYU GLUCKSMAN IRELAND HOUSE   |                                 |                                    |                                |                                       |   |                                       |                                       |
| ONE WASHINGTON MEWS NEW YORK, NY 10003   | 13-5562308                      | 501(C)(3)                          | 151,242.                       |                                       |   |                                       | EDUCATION                             |
| (12) EITHNE AND PADDY FITZPATRICK MEMORIAL FUND  |                                 | E01(0)(0)                          |                                |                                       |   |                                       |                                       |
| 687 LEXINGTON AVENUE NEW YORK, NY 10022  | 13-3764252                      |                                    | 26,000.                        |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| <ul> <li>2 Enter total number of section 501(c)(3) and</li> <li>3 Enter total number of other organizations list</li> </ul>  | 0                               | 0                                  |                                |                                       |   |                                       |                                       |

Schedule I (Form 990) (2017)

| (Form 990) GC  | vernme                          | nts, and Ir                        | Assistance t<br>ndividuals in | n the Unite                           | d States  |                                       | омв no. 1545-0047<br>20 <b>17</b>     |
|--|---------------------------------|------------------------------------|-------------------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|
| Com  | plete if the o                  | -                                  | wered "Yes" on F              | orm 990, Part IV                      | , line 21 or 22.  |                                       |                                       |
| Department of the Treasury   |                                 |                                    | tach to Form 990.             |                                       |   |                                       | Open to Public                        |
| Internal Revenue Service   |                                 |                                    | /Form990 for the l            | atest information                     | າ.  |                                       | Inspection                            |
| Name of the organization THE AMERICAN IREL   |                                 | (DBA THE I                         | RELAND                        |                                       |   | Employer identific                    |                                       |
| FUNDS AMERICA / THE IRELAND FUNDS  |                                 |                                    |                               |                                       |   | 25-130699                             | 92                                    |
| Part I General Information on Grants and   |                                 |                                    |                               |                                       |   |                                       |                                       |
| <ol> <li>Does the organization maintain records to suthe selection criteria used to award the grant</li> <li>Describe in Part IV the organization's process</li> </ol> | s or assistand<br>dures for mor | ce?<br>nitoring the use            | of grant funds in the         | e United States.                      |   |                                       | X Yes No                              |
| Part II Grants and Other Assistance to D   |                                 | -                                  |                               |                                       |   |                                       | es on Form                            |
| 990, Part IV, line 21, for any recip   | ent that rec                    | eived more th                      | an \$5,000. Part II           | can be duplicat                       | •   | ce is needed.                         |                                       |
| <b>1 (a)</b> Name and address of organization<br>or government   | <b>(b)</b> EIN                  | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant   | (e) Amount of non-<br>cash assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | (g) Description of noncash assistance | (h) Purpose of grant<br>or assistance |
| (1) HAVEN COMMUNITY FOUNDATION - USA   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 633 3RD AVENUE, 17TH FL NEW YORK, NY 10017   | 30-0696665                      | 501(C)(3)                          | 13,500.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (2) IRISH INTERNATIONAL IMMIGRANT CENTER   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 100 FRANKLIN ST., LL-1 BOSTON, MA 02110  | 04-3063382                      | 501(C)(3)                          | 25,000.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (3) FIRST BOOK   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 1319 F STREET NW WASHINGTON, DC 20004  | 52-1779606                      | 501(C)(3)                          | 10,000.                       |                                       |   |                                       | EDUCATION                             |
| (4) OUR FRIENDS PLACE  |                                 |                                    |                               |                                       |   |                                       |                                       |
| 6500 GREENVILLE AVE DALLAS, TX 75206   | 75-2077719                      | 501(C)(3)                          | 10,000.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (5) TOMORROW'S HOPE FOUNDATION   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 50 CHARLES L. BLVD UNIONDALE, NY 11553   | 20-3514578                      | 501(C)(3)                          | 10,000.                       |                                       |   |                                       | EDUCATION                             |
| (6) INTREPID MUSEUM FOUNDATION, INC.   |                                 |                                    |                               |                                       |   |                                       |                                       |
| ONE INTREPID SQUARE NEW YORK, NY 10036   | 13-3062419                      | 501(C)(3)                          | 15,000.                       |                                       |   |                                       | ARTS & CULTURE                        |
| (7) WOMEN'S ALZHEIMER'S MOVEMENT   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 11440 SAN V. BLVD LOS ANGELES, CA 90049  | 45-1837864                      | 501(C)(3)                          | 20,000.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (8) SOLACE HOUSE, INC.   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 1040 JACKSON AVE LONG ISLAND CITY, NY 11101  | 47-2629761                      | 501(C)(3)                          | 29,030.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (9) ORIGIN THEATRE COMPANY   | _                               |                                    |                               |                                       |   |                                       |                                       |
| 520 8TH AVE, STE 329A NEW YORK, NY 10018   | 45-0562349                      | 501(C)(3)                          | 34,000.                       |                                       |   |                                       | ARTS & CULTURE                        |
| (10) AMERICAN IRISH HISTORICAL SOCIETY   |                                 |                                    |                               |                                       |   |                                       |                                       |
| 991 FIFTH AVENUE NEW YORK, NY 10028  | 41-7213121                      | 501(C)(3)                          | 10,000.                       |                                       |   |                                       | ARTS & CULTURE                        |
| (11) US-IRELAND ALLIANCE   | 4                               |                                    |                               |                                       |   |                                       |                                       |
| 2800 CLARENDON BLVD ARLINGTON, VA 22201  | 54-1803915                      | 501(C)(3)                          | 50,000.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (12) AMERICAN RED CROSS OF MASSACHUSETTS   | 4                               |                                    |                               |                                       |   |                                       |                                       |
| 139 MAIN STREET CAMBRIDGE, MA 02142  | 53-0196605                      | 501(C)(3)                          | 100,000.                      |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| 2 Enter total number of section 501(c)(3) and  |                                 |                                    |                               |                                       |   |                                       |                                       |
| 3 Enter total number of other organizations list   | ted in the line                 | 1 table                            |                               |                                       |   |                                       |                                       |

Schedule I (Form 990) (2017)

| SCHEDULE I<br>(Form 990) G  |                                    |                                    | Assistance t<br>ndividuals in |                                       |   | -                                     | OMB No. 1545-0047                     |
|---|------------------------------------|------------------------------------|-------------------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|
| Cor   | nplete if the o                    | rganization ans                    | wered "Yes" on F              | orm 990, Part IV                      | , line 21 or 22.  |                                       |                                       |
| Department of the Treasury  | •                                  | -                                  | tach to Form 990.             |                                       |   |                                       | Open to Public                        |
| Internal Revenue Service  | ► Go                               | to www.irs.gov                     | /Form990 for the              | atest information                     | า.  |                                       | Inspection                            |
| Name of the organization THE AMERICAN IRE   | LAND FUND                          | (DBA THE I                         | RELAND                        |                                       |   | Employer identific                    | ation number                          |
| FUNDS AMERICA / THE IRELAND FUNDS   | 5)                                 |                                    |                               |                                       |   | 25-130699                             | 92                                    |
| Part I General Information on Grants a  | nd Assistanc                       | е                                  |                               |                                       |   |                                       |                                       |
| <ol> <li>Does the organization maintain records to<br/>the selection criteria used to award the gra</li> <li>Describe in Part IV the organization's proc</li> </ol> | nts or assistand<br>edures for mor | ce?<br>nitoring the use            | of grant funds in th          | e United States.                      |   |                                       | X Yes No                              |
| Part II Grants and Other Assistance to<br>990, Part IV, line 21, for any reci   |                                    | -                                  |                               |                                       | • •   |                                       | es" on Form                           |
| 1 (a) Name and address of organization<br>or government   | (b) EIN                            | (c) IRC section<br>(if applicable) | (d) Amount of cash grant      | (e) Amount of non-<br>cash assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | (g) Description of noncash assistance | (h) Purpose of grant<br>or assistance |
| (1) COALITION OF IRISH IMMIGRATION CENTERS  |                                    |                                    |                               |                                       |   |                                       |                                       |
| P.O. BOX 210 BRONX, NY 10470  | 30-0214769                         | 501(C)(3)                          | 100,000.                      |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (2) JOHN F. KENNEDY LIBRARY FOUNDATION  |                                    |                                    |                               |                                       |   |                                       |                                       |
| 220 W. T MORRISSEY BLVD BOSTON, MA 02125  | 04-6113130                         | 501(C)(3)                          | 15,000.                       |                                       |   |                                       | EDUCATION                             |
| (3) FIRST PRESBYTERIAN CHURCH OF DALLAS   |                                    |                                    |                               |                                       |   |                                       |                                       |
| 1835 YOUNG STREET DALLAS, TX 75201  | 75-6052623                         | 501(C)(3)                          | 30,000.                       |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (4) IRISH IMMIGRATION PASTORAL CENTER   |                                    |                                    |                               |                                       |   |                                       |                                       |
| 5340 GEARY BLVD SAN FRANCISCO, CA 94121   | 94-3329015                         | 501(C)(3)                          | 110,000.                      |                                       |   |                                       | COMMUNITY DEVELOPMEN                  |
| (5) CATHOLIC SCHOOLS FOUNDATION   |                                    |                                    |                               |                                       |   |                                       |                                       |
| 67 BATTERYMARCH ST BOSTON, MA 02110   | 22-2485502                         | 501(C)(3)                          | 20,000.                       |                                       |   |                                       | EDUCATION                             |
| (6) ROYAL ACADEMY AMERICA   |                                    |                                    |                               |                                       |   |                                       |                                       |
| 767 THIRD AVENUE NEW YORK, NY 10017   | 25-2503232                         | 501(C)(3)                          | 9,000.                        |                                       |   |                                       | ARTS & CULTURE                        |
| (7) HARVARD BUSINESS SCHOOL   |                                    |                                    |                               |                                       |   |                                       |                                       |
| TATA HALL, SUITE 020 BOSTON, MA 02163   | 04-2103580                         | 501(C)(3)                          | 12,000.                       |                                       |   |                                       | EDUCATION                             |
| (8)   |                                    |                                    |                               |                                       |   |                                       |                                       |
| (9)   |                                    |                                    |                               |                                       |   |                                       |                                       |
| (10)  |                                    |                                    |                               |                                       |   |                                       |                                       |
| (11)  |                                    |                                    |                               |                                       |   |                                       |                                       |
| (12)  |                                    |                                    |                               |                                       |   |                                       |                                       |
| <ul> <li>2 Enter total number of section 501(c)(3) and</li> <li>3 Enter total number of other organizations I</li> </ul>  | •                                  | •                                  |                               |                                       |   |                                       | 30.                                   |

Schedule I (Form 990) (2017)

#### Schedule I (Form 990) (2017)

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

| (a) Type of grant or assistance          | <b>(b)</b> Number of recipients | <b>(c)</b> Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book,<br>FMV, appraisal, other) | (f) Description of non-cash assistance |
|--|---------------------------------|---------------------------------|-----------------------------------|--|--|
| 1  |                                 |                                 |                                   |  |  |
| 2  |                                 |                                 |                                   |  |  |
| 3  |                                 |                                 |                                   |  |  |
| 4  |                                 |                                 |                                   |  |  |
| 5  |                                 |                                 |                                   |  |  |
| 3  |                                 |                                 |                                   |  |  |
| 7  |                                 |                                 |                                   |  |  |
| art IV Supplemental Information. Provide | e the information re            | quired in Part I,               | line 2, Part III, o               | olumn (b); and any o                                     | ther additional                        |

information.

PROCEDURE FOR MONITORING USE OF GRANT FUNDS IN U.S.

SCHEDULE I, PART I, LINE 2

WE HAVE OFFICES IN 5 LOCATIONS WITH REGIONAL DIRECTORS THAT ARE IN

CONTACT WITH OUR U.S. GRANT RECIPIENTS ON A REGULAR BASIS. GRANTS WERE

MADE TO CHARITABLE ORGANIZATIONS AND A TAX-EXEMPT BUSINESS LEAGUE. THE

GRANT LETTER TO A 501(C)(6) ORGANIZATION SPECIFICALLY STATED THE GRANT

MUST BE USED FOR CHARITABLE PURPOSES AND NOT POLITICAL OR LOBBYING

SPENDING.

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| SCHEDULE J<br>(Form 990)       Compensation Information         For certain Officers, Directors, Trustees, Key Employees, and Highest<br>Compensated Employees |  |   | 0  | OMB No. 1545-0047                 |          |        |    |
|--|--|---|--|-----------------------------------|----------|--------|----|
|  |  |   | nsated Employees<br>nswered "Yes" on Form 990, Part IV, line 2 | 3.                                | ZU       |        |    |
|  | nent of the Treasury                                       | ► Atta  | ch to Form 990.  | 0                                 | pen to   |        |    |
|  | Revenue Service<br>of the organization                     | THE AMERICAN IRELAND FUND   | or instructions and the latest information.                    | Employer identification           |          | ectioi | n  |
|  | DS AMERICA   |   |  | 25-1306992                        |          |        |    |
| Part   | Question   | s Regarding Compensation  |  |                                   |          |        |    |
|  | -  |   |  |                                   |          | Yes    | No |
| 1a   | Check the ap   | propriate box(es) if the organization provide   | ed any of the following to or for a pers                       | on listed on Form                 |          |        |    |
|  | 990, Part VII,   | Section A, line 1a. Complete Part III to prov   | vide any relevant information regarding                        | these items.                      |          |        |    |
|  |  | ss or charter travel  | Housing allowance or residence for                             | personal use                      |          |        |    |
|  | X Travel for   | or companions   | Payments for business use of person                            |                                   |          |        |    |
|  | Tax indemnification and gross-up payments Health or social |   | Health or social club dues or initiation                       |                                   |          |        |    |
|  | Discretio  | onary spending account  | Personal services (such as, maid, ch                           | auffeur, chef)                    |          |        |    |
| b  | or reimburse   | boxes on line 1a are checked, did the or<br>ment or provision of all of the expense           | ses described above? If "No," com                              | garding payment plete Part III to |          | 37     |    |
|  |  |   |  | •••••••••                         | 1b       | X      |    |
| 2  |  | anization require substantiation prior to stees, and officers, including the CEO/Exe          |  |                                   |          |        |    |
|  |  | stees, and oncers, including the CEO/Ex   |  | checked on line                   | 2        | x      |    |
| •  |  |   |  |                                   | 2        |        |    |
| 3  |  | n, if any, of the following the filing organizat<br>cEO/Executive Director. Check all that ap |  |                                   |          |        |    |
|  |  | ization to establish compensation of the CE   |  |                                   |          |        |    |
|  |  | sation committee  | Written employment contract                                    |                                   |          |        |    |
|  | · ·  | dent compensation consultant X  | Compensation survey or study                                   |                                   |          |        |    |
|  |  | 00 of other organizations   | Approval by the board or compensa                              | tion committee                    |          |        |    |
| 4  |  | ar, did any person listed on Form 990, Par<br>or a related organization:                      | t VII, Section A, line 1a, with respect to                     | o the filing                      |          |        |    |
| а  |  | verance payment or change-of-control payme  | ent?   |                                   | 4a       |        | Х  |
| b  | Participate in   | or receive payment from, a supplemental   | nonqualified retirement plan?                                  |                                   | 4b       |        | Х  |
| С  | Participate in   | or receive payment from, an equity-based  | compensation arrangement?                                      |                                   | 4c       |        | Х  |
|  | If "Yes" to an   | y of lines 4a-c, list the persons and provid  | de the applicable amounts for each it                          | em in Part III.                   |          |        |    |
|  |  |   |  |                                   |          |        |    |
| _  | -  | 501(c)(3), 501(c)(4), and 501(c)(29) organ  | -  |                                   |          |        |    |
| 5  | •  | isted on Form 990, Part VII, Section A, line  | e 1a, aid the organization pay or accrue                       | any                               |          |        |    |
|  |  | n contingent on the revenues of:  |  |                                   | 50       |        | Х  |
| a<br>b   |  | ion?  |  |                                   | 5a<br>5b |        | X  |
| U  | -  | e 5a or 5b, describe in Part III.   |  |                                   | 50       |        |    |
| 6  |  | isted on Form 990, Part VII, Section A, line  | a 1a, did the organization pay or accrue                       | anv                               |          |        |    |
| -  |  | n contingent on the net earnings of:  |  | - ,                               |          |        |    |
| а  |  | ion?  |  |                                   | 6a       |        | Х  |
| b  | •  | rganization?  |  |                                   | 6b       |        | Х  |
|  | -  | e 6a or 6b, describe in Part III.   |  |                                   |          |        |    |
| 7  |  | listed on Form 990, Part VII, Section A described on lines 5 and 6? If "Yes," descri          |  |                                   | 7        | X      |    |
| 8  |  | ounts reported on Form 990, Part VII, paid  |  |                                   |          |        |    |
|  |  | contract exception described in Regi  |  |                                   |          |        |    |
|  |  |   |  |                                   | 8        |        | Х  |
| 9  |  | ine 8, did the organization also follow   |  |                                   |          |        |    |
|  | Regulations s  | ection 53.4958-6(c)?  | <u></u>  |                                   | 9        |        |    |

Schedule J (Form 990) 2017

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.

|  |      | (B) Breakdown of         | f W-2 and/or 1099-MIS                  | C compensation                                   | (C) Retirement and          | (D) Nontaxable | (E) Total of columns | (F) Compensation   |
|--|------|--------------------------|--|--|-----------------------------|----------------|----------------------|--|
| (A) Name and Title                         |      | (i) Base<br>compensation | (ii) Bonus & incentive<br>compensation | <b>(iii)</b> Other<br>reportable<br>compensation | other deferred compensation | benefits       | (B)(i)-(D)           | in column (B) reported<br>as deferred on prior<br>Form 990 |
| KIERAN MCLOUGHLIN                          | (i)  | 535,000.                 | 100,000.                               | 14,964.  | 27,000.                     | 22,036.        | 699,000.             | 0.   |
| 1 PRESIDENT AND CEO WORLDWIDE              | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
| THOMAS O'LEARY                             | (i)  | 236,912.                 | 0.                                     | 0.   | 23,612.                     | 22,071.        | 282,595.             | 0.   |
| CHIEF OPERATING OFFICER                    | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
| ANNE MOONEY                                | (i)  | 156,156.                 | 2,000.                                 | 0.   | 15,815.                     | 8,103.         | 182,074.             | 0.   |
| 3 CHIEF FINANCIAL OFFICER                  | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
| STEVEN GREELEY                             | (i)  | 241,020.                 | 0.                                     | 19,751.  | 26,077.                     | 1,952.         | 288,800.             | 0.   |
| VICE PRESIDENT OF DEVELOPMENT              | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
| KYLE CLIFFORD                              | (i)  | 200,000.                 | 0.                                     | 0.   | 20,000.                     | 16,046.        | 236,046.             | 0.   |
| VICE PRESIDENT OF DEVELOPMENT              | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
| MARJORIE MULDOWNEY                         | (i)  | 160,000.                 | 0.                                     | 0.   | 16,000.                     | 1,341.         | 177,341.             | 0.   |
| VICE PRESIDENT OF DEVELOPMENT              | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
| JONATHAN LOUGHRAN                          | (i)  | 150,000.                 | 0.                                     | 0.   | 15,000.                     | 21,714.        | 186,714.             | 0.   |
| 7 <sup>VICE PRESIDENT OF DEVELOPMENT</sup> | (ii) | 0.                       | 0.                                     | 0.   | 0.                          | 0.             | 0.                   | 0.   |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 8  | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 9  | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 10   | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 11   | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 12   | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 13   | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 14   | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 15   | (ii) |                          |  |  |                             |                |                      |  |
|  | (i)  |                          |  |  |                             |                |                      |  |
| 16   | (ii) |                          |  |  |                             |                |                      |  |

Schedule J (Form 990) 2017

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Schedule J (Form 990) 2017

#### 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.

TRAVEL FOR COMPANIONS

SCHEDULE J, PART I, LINE 1A

KIERAN MCLOUGHLIN HAS FAMILY TRAVEL AND A PARKING ALLOWANCE WHICH ARE

ADDED TO HIS TAXABLE COMPENSATION. STEVEN GREELEY HAS A MONTHLY CAR

ALLOWANCE WHICH IS ADDED TO HIS TAXABLE COMPENSATION.

PROCESS FOR DETERMINING COMPENSATION

SCHEDULE J, PART I, LINE 3

THE CEO'S COMPENSATION IS SUBJECT TO REVIEW AND APPROVAL BY THE

COMPENSATION COMMITTEE, COMPRISED OF 5 INDEPENDENT BOARD MEMBERS. PART OF

THE REVIEW OF THE COMPENSATION COMMITTEE INCLUDES AN ANALYSIS OF THE

CEO'S COMPENSATION BY AN OUTSIDE COMPENSATION CONSULTANT WHO RESEARCHES

AND COMPARES COMPENSATION DATA WITH LIKE POSITIONS IN SIMILAR

ORGANIZATIONS. A RECOMMENDATION IS MADE BY THE CONSULTANT AS TO WHETHER

THE PROPOSED COMPENSATION IS REASONABLE, TAKING INTO CONSIDERATION THE

RESEARCH CONDUCTED AS WELL AS COMPARISONS TO OTHER NONPROFIT

ORGANIZATIONS. THE ANALYSIS IS THEN SUBMITTED TO THE COMPLETE BOARD OF

DIRECTORS FOR REVIEW AND APPROVAL AND CONTEMPORANEOUSLY DOCUMENTATED IN

THE BOARD MINUTES. THE MOST RECENT CEO COMPENSATION REVIEW AND APPROVAL

Schedule J (Form 990) 2017

#### 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.

WAS CONDUCTED IN NOVEMBER 2017.

#### SEVERANCE AGREEMENTS

SCHEDULE J, PART I, LINE 4A

KIERAN MCLOUGHLIN HAS AN EMPLOYMENT AGREEMENT THAT PROVIDES SEVERANCE

BASED ON ANNUAL COMPENSATION, PAID ONLY IN THE EVENT OF INVOLUNTARY

TERMINATION. NO AMOUNTS WERE PAID UNDER THIS AGREEMENT IN CALENDAR YEAR

2017.

JSA 7E1505 1.000

NON-FIXED PAYMENTS

SCHEDULE J, PART I, LINE 7

IN 2017, KIERAN MCLOUGHLIN RECEIVED A PERFORMANCE RELATED BONUS OF

\$100,000 AND ANNE MOONEY \$2,000.

48093E 649N 11/14/2018 12:02:35 PM

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

2017

**Open to Public** 

Department of the Treasury Internal Revenue Service

Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.

Inspection Employer identification number Name of the organization THE AMERICAN IRELAND FUND (DBA THE IRELAND 25-1306992 FUNDS AMERICA / THE IRELAND FUNDS)

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

| Par | t Types of Property                    |                                      |   | · · · · · ·  |                           |     |     |    |
|-----|--|--------------------------------------|---|--|---------------------------|-----|-----|----|
|     |  | <b>(a)</b><br>Check if<br>applicable | <b>(b)</b><br>Number of contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line 1g | Method of<br>noncash cont |     |     |    |
| 1   | Art - Works of art                     | Х                                    | 1.  | 16,800.  | FMV                       |     |     |    |
| 2   | Art - Historical treasures             |                                      |   |  |                           |     |     |    |
| 3   | Art - Fractional interests             |                                      |   |  |                           |     |     |    |
| 4   | Books and publications                 |                                      |   |  |                           |     |     |    |
| 5   | Clothing and household                 |                                      |   |  |                           |     |     |    |
|     | goods.                                 |                                      |   |  |                           |     |     |    |
| 6   | Cars and other vehicles                |                                      |   |  |                           |     |     |    |
| 7   | Boats and planes                       |                                      |   |  |                           |     |     |    |
| 8   | Intellectual property                  |                                      |   |  |                           |     |     |    |
| 9   | Securities - Publicly traded           | Х                                    | 33.   | 1,076,111.   | FMV                       |     |     |    |
| 10  | Securities - Closely held stock        |                                      |   |  |                           |     |     |    |
| 11  | Securities - Partnership, LLC,         |                                      |   |  |                           |     |     |    |
|     | or trust interests                     |                                      |   |  |                           |     |     |    |
| 12  | Securities - Miscellaneous             |                                      |   |  |                           |     |     |    |
| 13  | Qualified conservation                 |                                      |   |  |                           |     |     |    |
|     | contribution - Historic                |                                      |   |  |                           |     |     |    |
|     | structures                             |                                      |   |  |                           |     |     |    |
| 14  | Qualified conservation                 |                                      |   |  |                           |     |     |    |
|     | contribution - Other                   |                                      |   |  |                           |     |     |    |
| 15  | Real estate - Residential              |                                      |   |  |                           |     |     |    |
| 16  | Real estate - Commercial               |                                      |   |  |                           |     |     |    |
| 17  | Real estate - Other                    |                                      |   |  |                           |     |     |    |
| 18  | Collectibles                           |                                      |   |  |                           |     |     |    |
| 19  | Food inventory                         |                                      |   |  |                           |     |     |    |
| 20  | Drugs and medical supplies             |                                      |   |  |                           |     |     |    |
| 21  | Taxidermy                              |                                      |   |  |                           |     |     |    |
| 22  | Historical artifacts                   |                                      |   |  |                           |     |     |    |
| 23  | Scientific specimens                   |                                      |   |  |                           |     |     |    |
| 24  | Archeological artifacts                |                                      |   |  |                           |     |     |    |
| 25  | Other ▶()                              |                                      |   |  |                           |     |     |    |
| 26  | Other ►()                              |                                      |   |  |                           |     |     |    |
| 27  | Other ▶()                              |                                      |   |  |                           |     |     |    |
| 28  | Other ►()                              |                                      |   |  |                           |     |     |    |
| 29  | Number of Forms 8283 received          | by the org                           | anization during the tax y                                    | ear for contributions for  |                           |     |     |    |
|     | which the organization completed I     |                                      |   |  | 29                        |     |     |    |
|     |  |                                      |   |  |                           |     | Yes | No |
| 30a | During the year, did the organizat     | ion receive                          | by contribution any prope                                     | rty reported in Part I, line   | s 1 through               |     |     |    |
|     | 28, that it must hold for at least the | hree years f                         | rom the date of the initial                                   | contribution, and which is   | sn't required             |     |     |    |
|     | to be used for exempt purposes for     | the entire h                         | olding period?  |  |                           | 30a |     | Х  |
| b   | If "Yes," describe the arrangement i   | n Part II.                           |   |  |                           |     |     |    |
| 31  | Does the organization have a           | gift accept                          | tance policy that require                                     | es the review of any   | nonstandard               |     |     |    |
|     | contributions?                         |                                      |   |  |                           | 31  | Х   |    |
| 32a | Does the organization hire or use      |                                      |   |  |                           |     |     |    |
|     | contributions?                         |                                      | -   |  |                           | 32a |     | Х  |
| b   | If "Yes," describe in Part II.         |                                      |   |  |                           |     |     |    |
| 33  | If the organization didn't report an   | amount in c                          | olumn (c) for a type of pro                                   | perty for which column (a)   | ) is checked,             |     |     |    |
|     | describe in Part II.                   |                                      |   |  |                           |     |     |    |

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

Schedule M (Form 990) (2017)

Page 2

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

NUMBER OF CONTRIBUTIONS OR ITEMS CONTRIBUTED

SCHEDULE M PART I COLUMN (B)

THE NUMBER REPORTED IN PART I COLUMN (B) REPRESENTS THE NUMBER OF

CONTRIBUTIONS MADE.

## SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

# 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.

about Schodulo O (Form 000 or 000 FZ) and its instructions is at www.irs.gov/form000



| Internal Revenue Service | inspection                                 |                                |
|--------------------------|--|--------------------------------|
| Name of the organization | THE AMERICAN IRELAND FUND (DBA THE IRELAND | Employer identification number |
| FUNDS AMERICA /          | THE IRELAND FUNDS)                         | 25-1306992                     |

FORM 990, PAGE 1, LINE F

KIERAN MCLOUGHLIN WAS THE PRINCIPAL OFFICER AS OF DECEMBER 31, 2017. CAITRIONA FOTTRELL WAS THE ACTING PRESIDENT AND PRICIPAL OFFICER WHEN THIS RETURN WAS FILED IN NOVEMBER 2018.

#### FORM 990, PART III, LINE 4D

OTHER INDEPENDENT IRELAND FUNDS ORGANIZATIONS CARRY OUT A NUMBER OF PROGRAMS, SUCH AS THE "NATIONAL BUSINESS PLAN COMPETITION" AND THE "NO MIND LEFT BEHIND PROGRAM". THESE PROGRAMS ALL SEEK TO DIRECTLY CARRY OUT THE MISSION OF THE AMERICAN IRELAND FUND. IN ADDITION, THE IRELAND FUNDS IN IRELAND PROVIDE SUPPORT AND EDUCATION SERVICES TO OVER 100 ORGANIZATIONS ANNUALLY IN THE AREA OF GRANT SEEKING, FUNDRAISING, AND BOARD DEVELOPMENT. THEY ALSO REGULARLY VISIT ORGANIZATIONS THAT HAVE RECEIVED FUNDING FROM THE AMERICAN IRELAND FUND TO EVALUATE THEIR PROGRESS. FINALLY, THEY WORK WITH A NUMBER OF UMBRELLA ORGANIZATIONS IN IRELAND TO DEVELOP THE PHILANTHROPIC INFRASTRUCTURE TO FURTHER SUPPORT THESE ORGANIZATIONS.

FAMILY AND BUSINESS RELATIONSHIPS FORM 990, PART VI, SECTION A, LINE 2 THERE IS A FAMILY RELATIONSHIP BETWEEN ANTHONY O'REILLY AND CHRYSS O'REILLY.

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     |         |  |                                |  |
|--------------------------------------|-----|-----------|---------|------|------|-----|---------|--|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |  |

FORM 990, PART VI, SECTION A, LINE 5

IN 2018, THE FUND DISCOVERED THAT A FORMER EMPLOYEE IN A REGIONAL OFFICE HAD MISAPPROPRIATED APPROXIMATELY \$249,000 IN 2017 AND \$330,000 IN 2016. THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS ENGAGED INDEPENDENT COUNSEL TO PERFORM A FORENSIC INVESTIGATION, WHICH HAS BEEN COMPLETED. IN ADDITION, THE FUND IS WORKING WITH LAW ENFORCEMENT AND COUNSEL TO RECOVER THE AMOUNTS MISAPPROPRIATED AND THE ASSOCIATED LEGAL COSTS. GIVEN THE NATURE OF THE EMBEZZLEMENT, THE AMOUNTS INVOLVED HAD BEEN REPORTED PRIMARILY AS EVENT EXPENSES IN THE STATEMENT OF ACTIVITIES FOR EACH YEAR. MANAGEMENT OF THE FUND HAS REVISED POLICIES AND PROCEDURES RELATED TO PROCUREMENT, HIRING PROCEDURES, AND OVERSIGHT OF FINANCIAL ACTIVITIES.

FORM 990 REVIEW PROCESS

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

THE FORM 990 IS COMPILED BY MANAGEMENT AND PREPARED AND SIGNED BY A PUBLIC ACCOUNTING FIRM. A DRAFT OF THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE BY MANAGEMENT AND THE PAID PREPARER PRIOR TO BEING SUBMITTED TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENTARY. A COPY OF THE FORM 990 AS IT IS ULTIMATELY FILED IS PROVIDED TO ALL MEMBERS OF THE BOARD PRIOR TO BEING ELECTRONICALLY FILED WITH THE IRS.

CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT FORM 990, PART VI, SECTION B, LINE 12C THE CONFLICT OF INTEREST POLICY REQUIRES THAT THE BOARD MEMBERS AND TOP MANAGEMENT COMMUNICATE TO THE ORGANIZATION IF ANY CONFLICT OF INTEREST ARISES BY COMPLETING A CONFLICT OF INTEREST QUESTIONAIRE EACH YEAR.

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     |         |  | Page <b>2</b>                  |  |
|--------------------------------------|-----|-----------|---------|------|------|-----|---------|--|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |  |

QUESTIONAIRES ARE SUBJECT TO REVIEW BY THE CFO AND COO, AS APPLICABLE, TO DETERMINE IF A CONFLICT EXISTS. IF A CONFLICT ARISES, IT IS BROUGHT TO THE ATTENTION OF THE EXECUTIVE COMMITTEE AND SUBSEQUENTLY TO THE ENTIRE BOARD. THE PERSON WITH THE CONFLICT DOES NOT PARTICIPATE IN THE BOARD DISCUSSION NOR FINAL DECISION REGARDING RESOLUSION OF THE CONFLICT. AS DISCUSSED ABOVE UNDER FORM 990, PART VI, SECTION A, LINE 5 IN 2018 THE FUND DISCOVERED A MISSAPROPRIATION OCCURRED. THE INDIVIDUAL RESPONSIBLE FOR THE MISSAPPROPRIATION HAD PREVIOUSLY REPORTED COMPLIANCE WITH OUR POLICIES, THEREFORE WE DETERMINED OUR MONITORING WAS NOT EFFECTIVE AND WE HAVE IMPLEMENTED ADDITIONAL CONTROLS.

# PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, SECTION B, LINE 15A THE CEO'S COMPENSATION IS SUBJECT TO REVIEW AND APPROVAL BY THE COMPENSATION COMMITTEE, COMPRISED OF 5 INDEPENDENT BOARD MEMBERS. PART OF THE REVIEW OF THE COMPENSATION COMMITTEE INCLUDES AN ANALYSIS OF THE CEO'S COMPENSATION BY AN OUTSIDE COMPENSATION CONSULTANT WHO RESEARCHES AND COMPARES COMPENSATION DATA WITH LIKE POSITIONS IN SIMILAR ORGANIZATIONS. A RECOMMENDATION IS MADE BY THE CONSULTANT AS TO WHETHER THE PROPOSED COMPENSATION IS REASONABLE, TAKING INTO CONSIDERATION THE RESEARCH CONDUCTED AS WELL AS COMPARISONS TO OTHER NONPROFIT ORGANIZATIONS. THE ANALYSIS IS THEN SUBMITTED TO THE COMPLETE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL AND CONTEMPORANEOUSLY DOCUMENTATED IN THE BOARD MINUTES. THE LAST COMPENSATION REVIEW WAS CONDUCTED IN NOVEMBER 2016.

| Schedule O (Form 990 or 990-EZ) 2017 |                 |         |      |      |     |         |  | Page <b>2</b>                  |  |
|--------------------------------------|-----------------|---------|------|------|-----|---------|--|--------------------------------|--|
| Name of the organization             | THE AMERICAN    | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |  |
| FUNDS AMERICA /                      | ' THE IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |  |

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC FORM 990, PART VI, SECTION C, LINE 19 THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE AVAILABLE ON OUR WEBSITE AND UPON REQUEST.

BOARD MEMBER COMPENSATION

FORM 990, PART VII, SECTION A

WILLIAM MCNALLY RECEIVED COMPENSATION FOR LEGAL SERVICES PROVIDED TO THE FUND. HE DID NOT RECEIVE ANY COMPENSATION FOR HIS SERVICES AS A BOARD MEMBER.

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

FORM 990, PART XI, LINE 9

| CHANGE IN LIFE  | INSURANCE POLICY ASSETS | \$ (2,468) |
|-----------------|-------------------------|------------|
| FOREIGN EXCHANC | E TRANSLATION LOSS      | \$330,345  |
|                 |                         |            |

TOTAL

\_\_\_\_\_

\$327,877

Employer identification number 25–1306992

EXPENDITURE RESPONSIBILITY STATEMENT FORM 990, SCHEDULE D, PART I, LINE 4

DIVERSIONS: ALL GRANTEES LISTED BELOW HAVE NOT DIVERTED ANY PORTION OF THE FUNDS TO THE BEST OF OUR KNOWLEDE.

VERIFICATION: THE AMERICAN IRELAND FUND HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE GRANTEES' FINANCIAL REPORTS. WE MONITOR THE GRANT RECIPIENTS IN A NUMBER OF WAYS: VISITS TO THE GRANTEES TO OBSERVE AND ORGANIZATIONS' PROGRAMS, INTERVIEWS WITH GRANTEES FOR PUBLICATIONS, RECEIPT OF FINANCIAL STATEMENT REPORTING ON HOW THE MONEY WAS SPENT AND GENERAL ONGOING COMMUNICATION WITH THE GRANTEE BY EXECUTIVES AND OTHER EMPLOYEES.

THE EXPENDITURE RESPONSIBILITY REPORTS DETAIL BOTH GRANTS THAT HAVE BEEN PAID IN 2017 AND GRANTS MADE IN PREVIOUS YEARS THAT REQUIRE ANNUAL REPORTING UNTIL ALL FUNDS HAVE BEEN UTILIZED.

PURSUANT TO IRS REGULATION § 53.4945-5 (D)(2), THE AMERICAN IRELAND FUND PROVIDES THE FOLLOWING INFORMATION:

(I) GRANTEE: 174 TRUST

DUNCAIRN COMPLEX, DUNCAIRN AVENUE BELFAST ANTRIM, BT14 6BP NORTHERN IRELAND (II) AMOUNT OF GRANTS: 2016 - \$10,000

(III) PURPOSE OF GRANTS: COVERED COSTS ASSOCIATED WITH ARTS OUTREACH

PROGRAMME IN NORTH BELFAST.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/22/2018

(I) GRANTEE: 174 TRUST

DUNCAIRN COMPLEX, DUNCAIRN AVENUE

BELFAST

ANTRIM, BT14 6BP

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$43,000

(III) PURPOSE OF GRANTS: USED TO EXTEND AND DEVELOP ARTS OUTREACH PROGRAMME AND ENABLED STAFF AND VOLUNTEERS AT THE DUNCAIRN ARTS CENTRE TO WORK WITH AND INCREASED NUMBER OF GROUPS AND INDIVIDUALS, AND REPAIR OF TRUST'S OFFICES.

(IV) & (VI) REPORTS: \$43,000 EXPENDED - 8/22/2018

(I) GRANTEE: ABBEY SCHOOL

JSA 7E1228 1.000 STATION ROAD

COUNTY TIPPERARY

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$58,450

(III) PURPOSE OF GRANTS: TO FUND SCHOLARSHIPS TO ENABLE DISADVANTAGED

STUDENTS TO ATTEND THIRD LEVEL INSTITUTIONS AND UNIVERSITIES.

(IV) & (VI) REPORTS: \$58,450 EXPENDED - 8/10/2018

(I) GRANTEE: ABBEY THEATRE

26/27 LOWER ABBEY STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$500

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT THE U.S. PREMIERE OF "QUIETLY" BY OWEN MCCAFFERTY AT THE IRISH REPERTORY IN NEW YORK JULY -SEPTEMBER 2016. THIS GRANT CONTRIBUTED TO THE ABBEY THEATRE'S ABILITY TO BRING WORK TO THE US AND TO PREMIERE A NEW PLAY TO AMERICAN AUDIENCES IN NEW YORK.

(IV) & (VI) REPORTS: \$500 EXPENDED - 8/14/2018

(I) GRANTEE: AISLING RETURN TO IRELAND PROJECT

93B AGAR GROVE LONDON, NW1 9UL

UK

(II) AMOUNT OF GRANTS: 2016 - \$2,000

(III) PURPOSE OF GRANTS: TO ASSIST LONG TERM IRISH MIGRANTS RETURN TO THEIR HOMELAND FOR THE PURPOSE OF REHABILITATION AND RECONNECTION WITH FAMILIES AND FRIENDS.

(IV) & (VI) REPORTS: \$2,000 EXPENDED - 10/8/2018

(I) GRANTEE: AN TAISCE - THE NATIONAL TRUST FOR IRELAND

TAILORS' HALL

JSA 7E1228 1.000 DUBLIN

FUNDS AMERICA / THE IRELAND FUNDS)

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$15,000

(III) PURPOSE OF GRANTS: TO PLANT FOUR TINY FORESTS IN SCHOOL GROUNDS AND CREATE AN ACCESSIBLE LIVING EDUCATIONAL RESOURCE FOR TEACHERS AND STUDENTS.THE PLANTING OF THESE FORESTS FACILITATES INTERACTION AND

LEARNING ABOUT NATIVE TREES AND ECOSYSTEMS.

(IV) & (VI) REPORTS: \$15,000 EXPENDED - 8/14/2018

(I) GRANTEE: ARCHBISHOP MARSH'S LIBRARY

ST. PATRICK'S CLOSE

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$3,513

(III) PURPOSE OF GRANTS: THE GRANT COVERED THE TRANSLATION/TRANSCRIPTION OF A FRENCH LANGUAGE DIARY WHICH IS AN IMPORTANT RESOURCE FOR IRISH, FRENCH AND EUROPEAN HISTORY OF THE LATE SEVENTEENTH AND EARLY EIGHTEENTH CENTURIES.

(IV) & (VI) REPORTS: \$3,513 EXPENDED - 8/2/2018

(I) GRANTEE: ASHOKA

TRIBAL.VC, 23 SOUTH WILLIAM STREET,

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$1,600

25-1306992

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     |         |  |                                | Page <b>2</b> |
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| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |               |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |               |

(III) PURPOSE OF GRANTS: TO SUPPORT ASHOKA IRELAND THROUGHOUT A NUMBER OF DIFFERENT PROGRAMMES, SUCH AS CHANGEMAKER SCHOOLS AND VENTURE (FELLOWSHIP AND ENGAGEMENT).

(IV) & (VI) REPORTS: \$1,600 EXPENDED - 10/12/2018

(I) GRANTEE: ASHOKA

TRIBAL.VC, 23 SOUTH WILLIAM STREET,

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$43,030

(III) PURPOSE OF GRANTS: THE PURPOSE OF THIS GRANT WAS TO SEARCH, SELECT AND SUPPORT ASHOKA FELLOWS -SYSTEM CHANGING SOCIAL ENTREPRENEURS WHO CREATE INNOVATIVE SOLUTIONS TO SOCIETAL PROBLEMS. THE GRANT ALLOWED US TO ELECT FELLOWS AND SUPPORT NEW AND EXISTING FELLOWS AT THE TIPPING POINT OF THEIR IDEA. THIS INCREASES THEIR IMPACT AND FOSTERS SOCIAL CHANGE THROUGHOUT IRELAND.

(IV) & (VI) REPORTS: \$43,030 EXPENDED - 10/12/2018

(I) GRANTEE: ASIAM.IE (AUTISM SPECTRUM INFORMATION, ADVICE AND MEETING POINT)

79 REDFORD PARK GREYSTONES WICKLOW IRELAND (II) AMOUNT OF GRANTS: 2017 - \$2,000

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     |         |  | Page <b>2</b>                  |  |
|--------------------------------------|-----|-----------|---------|------|------|-----|---------|--|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |  |

(III) PURPOSE OF GRANTS: USED FOR THE DEVELOPMENT OF LOCAL AMBASSADORS NETWORK TO INCREASE NATIONAL REACH AND DEEPEN IMPACT BY DEVELOPING THE SKILLS OF LOCAL VOLUNTEERS TO DELIVER OUR NATIONAL PROGRAMMES AT A LOCAL LEVEL.

(IV) & (VI) REPORTS: \$662 EXPENDED - 8/16/2018

(I) GRANTEE: ASIAM.IE (AUTISM SPECTRUM INFORMATION, ADVICE AND MEETING

POINT)

79 REDFORD PARK

GREYSTONES

WICKLOW

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: FUNDED AN INFORMATION OFFICER WHO HELPED FURTHER DEVELOP ASIAM.IE AS A CENTRAL HUB FOR THE AUTISM COMMUNITY IN IRELAND. (IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/16/2018

(I) GRANTEE: ATLANTIC CORRIDOR LTD T/A MIDLANDS SCIENCE

2ND FLOOR, BLOCK 6

TULLAMORE, OFFALY R35 Y6Y0

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: SCIENCE, TECHNOLOGY, ENGINEERING AND MATH

OUTREACH AND ENGAGEMENT IN THE IRISH MIDLANDS.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/2/2018

| Schedule O (Form 990 or 990-EZ) 2017 Page Page Page Page Page Page Page Page |  |                                |  |  |  |  |  |  |  |
|--|--|--------------------------------|--|--|--|--|--|--|--|
| Name of the organization   | THE AMERICAN IRELAND FUND (DBA THE IRELAND | Employer identification number |  |  |  |  |  |  |  |
| FUNDS AMERICA  | / THE IRELAND FUNDS)                       | 25-1306992                     |  |  |  |  |  |  |  |

(I) GRANTEE: BANTRY DEVELOPMENT AND TOURIST ASSOCIATION

TOURIST OFFICE, WOLFE TONE SQUARE

BANTRY, CO. CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,678

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT PROMOTING TOURISM

TO BANTRY AND WEST CORK.

(IV) & (VI) REPORTS: \$1,678 EXPENDED - 8/2/2018

(I) GRANTEE: BANTRY HOSPICE PROJECT

NEWTOWN

BANTRY, CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: SUPPORTS THE SERVICES OF THE PALLIATIVE CARE TEAM IN WEST CORK. THIS INCLUDES PROVIDING HOME CARE ASSISTANCE, EXTRA COSTS ASSOCIATED WITH NIGHT NURSE CARE.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/20/2018

(I) GRANTEE: BANTRY ROWING CLUB

GURTEEN ROE

BANTRY, CO. CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,678

| Schedule O (Form 990 or 990 | 0-EZ) 201 | 17        |         |      |      |     |         |                                | Page 2 |
|-----------------------------|-----------|-----------|---------|------|------|-----|---------|--------------------------------|--------|
| Name of the organization    | THE       | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND | Employer identification number |        |
| FUNDS AMERICA /             | THE       | IRELAND F | UNDS)   |      |      |     |         | 25-1306992                     |        |

(III) PURPOSE OF GRANTS: REPAIRED, RESTORED AND IMPROVED SAFETY OF BOATS FOR CREWS.

(IV) & (VI) REPORTS: \$1,678 EXPENDED - 8/13/2018

(IV) & (VI) REPORTS: \$1,678 EXPENDED - 8/13/2018

### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: BARNARDOS

CHRISTCHURCH SQUARE

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$79,525

(III) PURPOSE OF GRANTS: FUNDED FAMILY SUPPORT SERVICE TO WORK DIRECTLY WITH VULNERABLE FAMILIES ON CHILDREN EXPOSED TO TRAUMA, PARENTAL SEPARATION, DOMESTIC ABUSE, PARENTAL ADDICTION, HOMELESSNESS, LOSS AND NEGLECT. SUPPORTED INTENSIVE HOME-BASED PARENTING PROGRAMMES, THERAPEUTIC PARENT-CHILD WORK, PARENT-TODDLER GROUPS AND PRACTICAL FAMILY SUPPORT. EARLY INTERVENTION SERVICE IN DUBLIN PROVIDED IMPROVED COGNITIVE DEVELOPMENT, SPEECH AND LANGUAGE AND MOTOR SKILLS, AND REDUCED RISK OF SOCIAL AND EMOTIONAL DIFFICULTIES.

(IV) & (VI) REPORTS: \$79,525 EXPENDED - 8/14/2018

(I) GRANTEE: BARRETSTOWN

BARRETSTOWN CASTLE

BALLYMORE EUSTACE

KILDARE

IRELAND

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|----------------------------|--|--------------------------------|
| Name of the organization   | THE AMERICAN IRELAND FUND (DBA THE IRELAND | Employer identification number |
| FUNDS AMERICA /            | THE IRELAND FUNDS)                         | 25-1306992                     |

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: THIS GRANT IS TO FUND THE OUTDOOR DINING AND RECREATION ELEMENT OF BARRETSTOWN'S NEW DINING HALL. THE NEW DINING HALL HAS TRANSFORMED BARRETSTOWN'S ABILITY TO MAKE MEALTIMES AN INTEGRAL PART OF THE CAMP EXPERIENCE.

(IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/1/2018

(I) GRANTEE: BASISPOINT LIMITED

GEORGES COURT 54-62 TOWNSEND STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$5,520

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT IS TO HELP MAKE A SUSTAINABLE AND TANGIBLE DIFFERENCE, THROUGH EDUCATION, TO THOSE LIVING IN POVERTY IN IRELAND.

(IV) & (VI) REPORTS: \$5,520 EXPENDED - 8/13/2018

(I) GRANTEE: BASISPOINT LIMITED

GEORGES COURT 54-62 TOWNSEND STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$4,250

(III) PURPOSE OF GRANTS: THE PURPOSE OF THIS GRANT IS TO HELP MAKE A SUSTAINABLE AND TANGIBLE DIFFERENCE, THROUGH EDUCATION, TO THE LIVES OF THOSE LIVING IN POVERTY IN IRELAND. (IV) & (VI) REPORTS: \$4,250 EXPENDED - 8/13/2018

(I) GRANTEE: BELVEDERE COLLEGE S.J.

GREAT DENMARK STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$26,875

(III) PURPOSE OF GRANTS: THIS GRANT WILL GO TOWARD THE COST INVOLVED IN THE BURSARY PROGRAMME THAT ALLOWS BOYS WHO FOR SOCIAL, OR ECONOMIC BARRIERS WOULD NOT HAVE BEEN ABLE TO ATTEND BELVEDERE COLLEGE SJ. WITHOUT THE GENEROSITY OF DONORS TO OUR SOCIAL DIVERSITY PROGRAMME, THE COLLEGE WOULD BE UNABLE TO SUSTAIN THE CURRENT LEVELS OF BURSARY GRANTS TO DESERVING BOYS FROM SOCIALLY AND ECONOMICALLY DISADVANTAGED AREAS OF DUBLIN CITY.

(IV) & (VI) REPORTS: \$26,875 EXPENDED - 8/10/2018

(I) GRANTEE: BELVEDERE COLLEGE S.J.

GREAT DENMARK STREET

DUBLIN

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$21,450

(III) PURPOSE OF GRANTS: THIS GRANT WILL GO TOWARD THE COST INVOLVED IN THE BURSARY PROGRAMME THAT ALLOWS BOYS WHO FOR SOCIAL, OR ECONOMIC BARRIERS WOULD NOT HAVE BEEN ABLE TO ATTEND BELVEDERE COLLEGE SJ. WITHOUT THE GENEROSITY OF DONORS TO OUR SOCIAL DIVERSITY PROGRAMME, THE COLLEGE

| Schedule O (Form 990 or 99 | chedule O (Form 990 or 990-EZ) 2017<br>ame of the organization THE AMERICAN IRELAND FUND (DBA THE IRELAND |           |         |      |      |     |         |  |                                | Page <b>2</b> |
|----------------------------|---|-----------|---------|------|------|-----|---------|--|--------------------------------|---------------|
| Name of the organization   | THE   | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |               |
| FUNDS AMERICA /            | THE   | IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |               |

WOULD BE UNABLE TO SUSTAIN THE CURRENT LEVELS OF BURSARY GRANTS TO DESERVING BOYS FROM SOCIALLY AND ECONOMICALLY DISADVANTAGED AREAS OF DUBLIN CITY.

(IV) & (VI) REPORTS: \$21,450 EXPENDED - 8/10/2018

(I) GRANTEE: CARE AFTER PRISON

56 AUNGIER STREET

DUBLIN

#### IRELAND

## (II) AMOUNT OF GRANTS: 2016 - \$25,000

(III) PURPOSE OF GRANTS: THE GRANT PURPOSE WAS TO COVER OPERATIONAL

COSTS, EXPAND OUR RANGE OF SUPPORT SERVICES AND SUPPORT OUR STAFF,

VOLUNTEERS AND ORGANISATIONAL DEVELOPMENT.

(IV) & (VI) REPORTS: \$25,000 EXPENDED - 8/15/2018

(I) GRANTEE: CHANGEX

DOGPATCH LABS, CHQ BUILDING DOCKLANDS

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$26,000

(III) PURPOSE OF GRANTS: THIS GRANT SUPPORTED ONGOING OPERATIONS OF RUNNING THE ORGANIZATION - INCLUDING IDENTIFYING AND PACKAGING IDEAS, MARKETING IDEAS TO STARTERS AND PROVIDING SUPPORT AND TOOLS TO STARTERS(IV) & (VI) REPORTS: \$26,000 EXPENDED - 9/17/2018 Name of the organization

(I) GRANTEE: CHANGEX

DOGPATCH LABS, CHQ BUILDING DOCKLANDS

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$161,550

(III) PURPOSE OF GRANTS: THIS GRANT SUPPORTED ONGOING OPERATIONS OF

RUNNING THE ORGANISATIONS - INCLUDING IDENTIFYING AND PACKAGING IDEAS,

MARKETING IDEAS AND PROVIDING SUPPORT AND TOOLS TO STARTERS.

(IV) & (VI) REPORTS: \$161,550 EXPENDED - 9/17/2018

(I) GRANTEE: CHERNOBYL CHILDREN'S PROJECT

1A THE STABLES ALFRED STREET

CORK

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$12,500

(III) PURPOSE OF GRANTS: TO SUPPORT THE DEINSTITUTIONALISATION PROCESS OF CHILDREN AND YOUNG ADULTS IN INCARCERATION, THROUGH HANDS-ON EXPERIENCES AND OPPORTUNITIES IN IRELAND. IT ENABLED CCI TO PROVIDE HIGH QUALITY SUPPORT AND AIDES TO THOSE WHO WOULD NOT OTHERWISE HAVE THE OPPORTUNITY TO LIVE INDEPENDENTLY AND DEVELOP BASIC SKILLS.

(IV) & (VI) REPORTS: \$12,500 EXPENDED - 8/2/2018

(I) GRANTEE: CHIEF O'NEILL FESTIVAL

BANTRY DEVELOPMENT AND TOURISM ASSOCIATION GURTEENROE BANTRY

Employer identification number 25-1306992

CORK

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,118

(III) PURPOSE OF GRANTS: TO SUPPORT MUSICIANS FOR THE HERITAGE FESTIVAL.

(IV) & (VI) REPORTS: \$1,118 EXPENDED - 10/8/2018

(I) GRANTEE: CHILDREN'S MEDICAL RESEARCH FOUNDATION

14-18 DRIMNAGH ROAD, CRUMLIN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$7,645

(III) PURPOSE OF GRANTS: TO CONTINUE INVESTMENT IN PEDIATRIC RESEARCH, WHICH OFFERS CHILDREN AND THEIR FAMILIES HOPE FOR BETTER, MORE PERSONALIZED TREATMENTS, IMPROVED QUALITY OF LIFE, & EVEN CURES FOR RARE & COMPLEX DISEASES. THE GRANT ALLOWS CMRF TO PURSUE PEDIATRIC RESEARCH PROJECTS IN THE AREAS OF ONCOLOGY, CARDIOLOGY AND IMMUNOLOGY UNDER OUR 3 PILLARS: SAVING LIVES, PATIENT EXPERIENCE AND QUALITY OF LIFE. EACH GRANT FOCUSES ON AN INDIVIDUAL PROJECT IN THESE AREAS.

(IV) & (VI) REPORTS: \$7,645 EXPENDED - 8/17/2018

(I) GRANTEE: CHILDREN'S MEDICAL RESEARCH FOUNDATION

14-18 DRIMNAGH ROAD, CRUMLIN DUBLIN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$37,534

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| FUNDS AMERICA /            | THE        | IRELAND F | UNDS)   |      |      |     |         | 25-1306992                     |               |

(III) PURPOSE OF GRANTS: TO CONTINUE INVESTMENT IN PEDIATRIC RESEARCH, WHICH OFFERS CHILDREN AND THEIR FAMILIES HOPE FOR PERSONALIZED TREATMENTS, IMPROVED QUALITY OF LIFE, AND CURES FOR RARE OR COMPLEX DISEASES. THE GRANT ALLOWS CMRF TO PURSUE PEDIATRIC RESEARCH PROJECTS IN THE AREAS OF ONCOLOGY, CARDIOLOGY AND IMMUNOLOGY UNDER OUR 3 PILLARS: SAVING LIVES, PATIENT EXPERIENCE AND QUALITY OF LIFE. (IV) & (VI) REPORTS: \$37,534 EXPENDED - 8/17/2018

(I) GRANTEE: CHILDVISION, NATIONAL EDUCATION CENTRE FOR BLIND CHILDREN

GRACEPARK ROAD DRUMCONDRA

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - 2017 - \$3,316

(III) PURPOSE OF GRANTS: PURCHASE OF VISUAL AIDS AND APPLIANCE FOR CHILDREN. IT HAS AIDED IN THE DELIVERY OF SERVICES TO BLIND AND MULTIDISABLED CHILDREN.

(IV) & (VI) REPORTS: \$3,316 EXPENDED - 8/31/2018

(I) GRANTEE: CLONARD MONASTERY

1A CLONARD GARDENS

BELFAST, BT 13 2RL

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$50,000

(III) PURPOSE OF GRANTS: TO PROMOTE DIALOGUE BETWEEN COMMUNITIES SEPARATED BY THE PEACE WALL IN BELFAST. (IV) & (VI) REPORTS: \$0 EXPENDED - 8/2/2018

### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: CNOC NA GAOITHE-TULLA COMHALTAS CULTURAL CENTRE

CHAPEL ST. TULLA

CO.CLARE

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$31,500

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO PROVIDE ACCOMMODATION ON

THE FIRST FLOOR OF OUR CULTURAL CENTRE, CNOC NA GAOITHE.

(IV) & (VI) REPORTS: \$31,500 EXPENDED - 8/16/2018

(I) GRANTEE: COMMUNITY FOUNDATION FOR NORTHERN IRELAND, THE

COMMUNITY HOUSE CITYLINK BUSINESS PARK 6A ALBERT STREET

BELFAST, BT12 4HQ

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$7,500

(III) PURPOSE OF GRANTS: TOWARDS THE COSTS OF SUPPORTING HUMAN RIGHTS ORGANISATIONS IN NORTHERN IRELAND TO CONSOLIDATE AND DELIVER THE COMMITMENT ON HUMAN RIGHTS AND CIVIC PARTICIPATION MADE IN THE GOOD FRIDAY AGREEMENT.

(IV) & (VI) REPORTS: \$7,500 EXPENDED - 8/8/2018

(I) GRANTEE: COMMUNITY FOUNDATION FOR NORTHERN IRELAND, THE COMMUNITY HOUSE CITYLINK BUSINESS PARK 6A ALBERT STREET BELFAST, BT12 4HQ

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#### NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$500

FUNDS AMERICA / THE IRELAND FUNDS)

(III) PURPOSE OF GRANTS: SUPPORTED ORGANISATIONS IN NORTHERN IRELAND TO

CONSOLIDATE AND DELIVER THE COMMITMENT TO HUMAN RIGHTS AND CIVIC

PARTICIPATION MADE IN THE GOOD FRIDAY AGREEMENT.

(IV) & (VI) REPORTS: \$500 EXPENDED - 8/8/2018

(I) GRANTEE: CO-OPERATION IRELAND - BELFAST

UNIT 5, WEAVERS COURT LINFIELD INDUSTRIAL ESTATE

BELFAST, BT12 5GH

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$50,000

(III) PURPOSE OF GRANTS: TO PROVIDE CO-ORDINATION AND FACILITATION TO GROUPS OF YOUNG PEOPLE PREPARING THEM TO TAKE PART IN CROSS-BORDER LEADERSHIP PROGRAMMES. ALL WORK HAD A LARGE PEACE-BUILDING ELEMENT. (IV) & (VI) REPORTS: \$31,276 EXPENDED - 8/22/2018

(I) GRANTEE: CO-OPERATION IRELAND - BELFAST

UNIT 5, WEAVERS COURT LINFIELD INDUSTRIAL ESTATE BELFAST, BT12 5GH NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,000
 (III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT THE CORE WORK OF
 CO-OPERATION IRELAND, TO ENGAGE WITH MARGINALISED REPUBLICAN AND LOYALIST
 COMMUNITIES.

Employer identification number

25-1306992

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(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/3/2018

(I) GRANTEE: CORK ARC CANCER SUPPORT HOUSE

"CLIFFDALE"

CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: RECRUIT, TRAIN, & PROVIDE SUPERVISION & ON-GOING SUPPORT OF VOLUNTEERS ENABLING CORK ARC TO CONTINUE IT'S WORK AS A VOLUNTARY ORGANISATION & REGISTERED CHARITY PROVIDING ITS SERVICES FREE OF CHARGE.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/13/2018

(I) GRANTEE: CORRYMEELA COMMUNITY

83 UNIVERSITY STREET BELFAST, BT7 1HP NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$6,000

(III) PURPOSE OF GRANTS: THE GRANT WAS USED IN SUPPORT OF CORRYMEELA ONGOING WORK WITH MARGINALISED YOUNG PEOPLE WITH A PARTICULAR FOCUS ON YOUNG WOMEN AS FUTURE LEADERS.

(IV) & (VI) REPORTS: \$6,000 EXPENDED - 9/7/2018

(I) GRANTEE: CUAN MHUIRE NI LTD

200 DUBLIN ROAD, NEWRY

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DOWN BT 35 8 RL

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$5,000

(III) PURPOSE OF GRANTS: THIS GRANT WILL HELP CONSTRUCT A 40 BED WOMEN'S REHABILATION CENTRE. THIS GRANT WILL BUILD A 40 BED UNIT TO TREAT WOMEN SUFFERING FROM ADDICTION. THE BUILDING WILL HAVE A MOTHER AND BABIES UNIT.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/10/2018

(I) GRANTEE: CUAN MHUIRE NI LTD

200 DUBLIN ROAD, NEWRY DOWN BT 35 8 RL NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$100,000

(III) PURPOSE OF GRANTS: THIS GRANT WILL HELP CONSTRUCT A FORTY BED WOMEN'S REHABILITATION CENTRE AND HELP WOMEN SUFFERING FROM ADDICTION. THE BUILDING WILL HAVE A UNIT TO SPECIFICALLY CATER TO PREGNANT WOMEN. (IV) & (VI) REPORTS: \$0 EXPENDED - 8/10/2018

(I) GRANTEE: CYSTIC FIBROSIS IRELAND

24 LOWER RATHMINES

DUBLIN 6

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,950

(III) PURPOSE OF GRANTS: THE GRANT HELPED SUPPORT THE COST OF PROVIDING

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VITAL SUPPORT TO CF PATIENT BY WAY OF PROFESSIONAL ADVICE, SERVICES AND SUPPORT FOR PATIENTS.

(IV) & (VI) REPORTS: \$1,950 EXPENDED - 8/14/2018

(I) GRANTEE: DAISYHOUSE HOUSING ASSOCIATION

6 EMOR STREET

DUBLIN D08K3VF

#### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$374

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO PROVIDE THE WOMEN OF DAISYHOUSE HOUSING ASSOCIATION WITH ACCESS TO COUNSELLING,

THERAPY SESSIONS, PSYCHOLOGICAL SUPPORT SERVICES AND PSYCHOTHERAPY.

(IV) & (VI) REPORTS: \$374 EXPENDED - 8/31/2018

(I) GRANTEE: DAISYHOUSE HOUSING ASSOCIATION

6 EMOR STREET

DUBLIN D08K3VF

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,000

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO SUPPORT OUR

RESIDENTS WITH EDUCATION AND TRAINING PROGRAMMES.

(IV) & (VI) REPORTS: \$2,000 EXPENDED - 8/31/2018

(I) GRANTEE: DAISYHOUSE HOUSING ASSOCIATION

6 EMOR STREET

JSA 7E1228 1.000

#### DUBLIN D08K3VF

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$50,000

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT IS TO CARRY OUT THE

FIRE SAFETY UPGRADE IN 368 & 370 SOUTH CIRCULAR ROAD, DUBLIN 8. WE HAVE

CURRENTLY STARTED THE FIRE WORK IN THE PROPERTIES IN 2018.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/31/2018

(I) GRANTEE: DOMINICAN COLLEGE

204 GRIFFITH AVENUE

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2007 - \$7,758

(III) PURPOSE OF GRANTS: GRANT USED TO FUND A STUDENT EDUCATION BURSARY AWARD TO LEAVING CERTIFICATE STUDENTS, WHO HAVE THE HIGHEST ACADEMIC ACHIEVEMENT IN SCIENCE EXAMINATIONS, AND HELP THEM PURSUE CAREERS IN SCIENCE

(IV) & (VI) REPORTS: \$1,471 EXPENDED - 10/11/2018

(I) GRANTEE: DONEGAL CLINICAL ACADEMY TRUST

LETTERKENNY GENERAL HOSPITAL

DONEGAL

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: THIS GRANT FUNDS 'THE PROFESSOR WILLIAM CAMPBELL

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MEDICAL STUDENT RESEARCH SCHOLARSHIP' WHICH FOSTERS MEDICAL RESEARCH ON AN ANNUAL BASIS.

(IV) & (VI) REPORTS: \$4,978 EXPENDED - 8/9/2018

#### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: DONEGAL CLINICAL ACADEMY TRUST

LETTERKENNY GENERAL HOSPITAL

DONEGAL

## IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: FUNDS SCHOLARSHIP TO FOSTER MEDICAL RESEARCH ON AN ANNUAL BASIS. ENABLES DCRA TO SUPPORT SCHOLARSHIP RECIPIENTS TO CONDUCT META-ANALYSES ON TOPICS RELEVANT TO EMERGENCY ABDOMINAL SURGERY.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/9/2018

# (I) GRANTEE: DRUID THEATRE COMPANY

LOWSTRAND HOUSE FLOOD STREET

GALWAY

# IRELAND

(II) AMOUNT OF GRANTS: 2016 - 2017 - \$5,530

(III) PURPOSE OF GRANTS: PAID FOR GENERAL OVERHEAD ASSOCIATED WITH DRUID

OPERATIONS FROM ITS GALWAY OFFICE.

(IV) & (VI) REPORTS: \$5,530 EXPENDED - 8/8/2018

(I) GRANTEE: DUBLIN CITY UNIVERSITY

### ALBERT COLLEGE, GLASNEVIN

DUBLIN

FUNDS AMERICA / THE IRELAND FUNDS)

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$57,443

(III) PURPOSE OF GRANTS: THE DCU ACCESS PROGRAMME SUPPORTS SCHOOL LEAVERS

FROM SOCIO-ECONOMICALLY DISADVANTAGED BACKGROUNDS APPLYING TO DCU.

STUDENTS WHO GET A PLACE RECEIVE A RANGE OF SUPPORT INCLUDING A

SCHOLARSHIP.

(IV) & (VI) REPORTS: \$57,443 EXPENDED - 8/13/2018

(I) GRANTEE: DUBLIN INTERNATIONAL PIANO COMPETITION

# BRAY

WICKLOW, A98 DT89

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,000

(III) PURPOSE OF GRANTS: THE GRANT WAS AWARDED AS A CONTRIBUTION TO THE FUNDING OF THE DUBLIN INTERNATIONAL PIANO COMPETITION TO ENSURE ITS CONTINUANCE.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/22/2018

(I) GRANTEE: DUBLIN INTERNATIONAL PIANO COMPETITION

BRAY

WICKLOW A98 DT89

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$17,500

(III) PURPOSE OF GRANTS: CONTRIBUTION TO SUSTAIN THE DUBLIN INTERNATIONAL

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PIANO COMPETITION AND ENSURE ITS CONTINUANCE.

(IV) & (VI) REPORTS: \$17,500 EXPENDED - 8/22/2018

(I) GRANTEE: DUBLIN JEWISH BOARD OF GUARDIANS

LEOVILLE 32A RATHFARNHAM ROAD

TERENURE

DUBLIN, D6W VE89

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$536

(III) PURPOSE OF GRANTS: HELPED JEWISH COMMUNITY WITH RESOURCES, BOTH

FINANCIAL AND SERVICE-RELATED. PARTICULAR EMPHASIS ON MARGINALIZED

COMMUNITY MEMBERS.

(IV) & (VI) REPORTS: \$536 EXPENDED - 8/9/2018

(I) GRANTEE: DUBLIN TALMUD TORAH

1 ZION ROAD RATHGAR

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,742

(III) PURPOSE OF GRANTS: SOURCED HEBREW EDUCATIONAL MATERIALS AND

RESOURCES FROM OVERSEAS AND SHIPPED THEM TO IRELAND TO SUPPORT HEBREW

# CLASSROOMS.

(IV) & (VI) REPORTS: \$2,742 EXPENDED - 8/8/2018

(I) GRANTEE: ENABLE IRELAND

32F ROSEMOUNT PARK DRIVE ROSEMOUNT BUSINESS PARK

BALLYCOOLIN ROAD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016-2017 - \$6,751

(III) PURPOSE OF GRANTS: THIS GRANT WAS USED TOWARDS THE PURCHASE OF A LAPTOP FOR INDEPENDENT LIVING TRAINING CENTRE TO FACILITATE THE INDEPENDENCE OF THE SERVICE USERS THROUGH THE ADDITION OF ASSISTIVE TECHNOLOGY. BENEFITED ENABLE IRELAND'S ADULT INDEPENDENT LIVING CENTRE BENEFITED FROM THE GRANT THROUGH ALLOWING SERVICES USERS TO WORK ON INDIVIDUAL PROJECTS AND FACILITATING THEIR TRAINING THROUGH ASSISTIVE TECHNOLOGY HARDWARE AND SOFTWARD

(IV) & (VI) REPORTS: \$6,751 EXPENDED - 9/26/2018

(I) GRANTEE: ENACTUS IRELAND

35 EXCHEQUER STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT IS TO FACILITATE THE TRAINING OF THIRD LEVEL STUDENTS IN SOCIAL ENTREPRENEURSHIP DEVELOPMENT AND LEADERSHIP SKILLS.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/14/2018

(I) GRANTEE: ENNISCORTHY RUGBY CLUB

SLANEY PLACE, ENNISCORTHY

CO. WEXFORD

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,065

(III) PURPOSE OF GRANTS: PROMOTION OF RUGBY FOOTBALL IN THE LOCALITY.

ADDITIONAL FUNDS ALLOWED US TO PURCHASE EQUIPMENT

(IV) & (VI) REPORTS: \$1,065 EXPENDED - 9/20/2018

(I) GRANTEE: ENNISCORTHY RUGBY CLUB

SLANEY PLACE

ENNISCORTHY

CO. WEXFORD

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,177

(III) PURPOSE OF GRANTS: PROMOTION OF RUGBY FOOTBALL IN THE LOCALITY.

FUNDS ALLOWED US TO PURCHASE EQUIPMENT.

(IV) & (VI) REPORTS: \$1,177 EXPENDED - 9/20/2018

(I) GRANTEE: FIGHTING WORDS

BEHAN SQUARE

DUBLIN D01 WD53

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$25

(III) PURPOSE OF GRANTS: FIGHTING WORDS PROVIDES FREE TUTORING AND

MENTORING IN CREATIVE WRITING FOR CHILDREN AND YOUNG ADULTS.

(IV) & (VI) REPORTS: \$25 EXPENDED - 8/15/2018

(I) GRANTEE: FOCUS IRELAND

9 - 12 HIGH STREET CHRISTCHURCH

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$496

(III) PURPOSE OF GRANTS: THIS GRANT WAS USED TO SUPPORT THE TWO KEY PILLARS OF OUR STRATEGIC WORK, PREVENTION AND SUSTAINED EXITS. WE SUPPORTED PEOPLE WHO WERE EXPERIENCING OR AT RISK OF HOMELESSNESS. (IV) & (VI) REPORTS: \$496 EXPENDED - 8/8/2018

(I) GRANTEE: FONDATION DIGICEL HAITI

#151 ANGLE AVE JEAN PAUL II & IMPASSE DUVERGER P.O. BOX

#### 15516

PORT-AU-PRINCE

HAITI

(II) AMOUNT OF GRANTS: 2016 - \$75,000

(III) PURPOSE OF GRANTS: THE GRANT HELPED FINANCE FIELD-BASED SUPPORT FOR 200 HAITIAN SCHOOL PERSONNEL, AND MONITORING AND EVALUATION OF THE TEACHERS, DIRECTORS AND 20 SCHOOLS.

(IV) & (VI) REPORTS: \$75,000 EXPENDED - 8/17/2018

(I) GRANTEE: FOODCLOUD

UNIT 8 BROOMHILL BUSINESS PARK, BROOMHILL ROAD,

TALLAGHT

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$7,000

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT OUR ORGANISATION

IMPLEMENT AN INDUSTRY STANDARD HEALTH AND SAFETY MANAGEMENT SYSTEM.

ACTIVITIES INCLUDED PROVISION OF TRAINING, PPE GEAR AND SIGNAGE.

(IV) & (VI) REPORTS: \$7,000 EXPENDED - 10/11/2018

# (I) GRANTEE: FRIENDS OF LONDIANI

4 THE CRESCENT MILL ROAD, MIDLETON

CO. CORK

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$20,000

(III) PURPOSE OF GRANTS: THIS GRANT WAS USED TO SUPPORT THE G4G INITIATIVE WHICH EDUCATES YOUNG GIRLS AND THEIR COMMUNITY ABOUT THE CHANGE OF LIFE. IT PROVIDED RECOURCES AND FACILITIES TO ENABLE THE GIRLS TO STAY IN SCHOOL AFTER PUBERTY.

(IV) & (VI) REPORTS: \$7,866 EXPENDED - 8/13/2018

### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: FRIENDS OF THE CANCER CENTRE

N.I CANCER CENTRE BELFAST CITY HOSPITAL LISBURN ROAD

BELFAST, BT9 7AB

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

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(III) PURPOSE OF GRANTS: FRIENDS OF THE CANCER CENTRE CURRENTLY FUNDS TEN CLINICAL NURSE SPECIALISTS AND OUR NURSES WORK AT THE FRONT LINE OF CANCER CARE, SUPPORTING PATIENTS WITH SPECIFIC TYPES OF CANCER IN NORTHERN IRELAND.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 10/9/2018

(I) GRANTEE: FRONT LINE - THE INTERNATIONAL FOUNDATION FOR THE PROTECTION

OF HUMAN RIGHTS DEFENDERS

SECOND FLOOR GRATTAN HOUSE TEMPLE ROAD

BLACKROCK

COUNTY DUBLIN

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$200,000

(III) PURPOSE OF GRANTS: PROVIDED PROTECTION TO WOMEN HUMAN RIGHTS DEFENDERS THROUGH THE FOLLOWING MECHANISMS: URGENT APPEALS, EXPANDED NETWORK, SECURITY GRANTS, TRAINING, DUBLIN PLATFORM AND VISIBILITY. (IV) & (VI) REPORTS: \$200,000 EXPENDED - 8/8/2018

(I) GRANTEE: FRONT LINE - THE INTERNATIONAL FOUNDATION FOR THE PROTECTION

OF HUMAN RIGHTS DEFENDERS

SECOND FLOOR GRATTAN HOUSE TEMPLE ROAD BLACKROCK COUNTY DUBLIN IRELAND (II) AMOUNT OF GRANTS: 2016 - \$5,000

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(III) PURPOSE OF GRANTS: GENERAL SUPPORT OF FRONT LINE DEFENDERS WORK TO PROTECT HUMAN RIGHTS DEFENDERS AT RISK WORLDWIDE.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/9/2018

(I) GRANTEE: FRONT LINE - THE INTERNATIONAL FOUNDATION FOR THE PROTECTION

# OF HUMAN RIGHTS DEFENDERS

SECOND FLOOR GRATTAN HOUSE TEMPLE ROAD

BLACKROCK

COUNTY DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: GENERAL SUPPORT FOR FRONT LINE DEFENDERS WORK TO

PROTECT HUMAN RIGHTS DEFENDERS AT RISK WORLDWIDE.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/8/2018

### (I) GRANTEE: GAELIC PLAYERS ASSOCIATION

UNIT 27, NORTHWOOD HOUSE NORTHWOOD BUSINESS CAMPUS SANTRY

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$80,000

(III) PURPOSE OF GRANTS: THIS GRANT FUNDED THE LEADERSHIP PROGRAMME FOR

GAELIC GAMES PLAYERS. THE PROGRAMME HELPS WITH CAREER TRANSITION.

(IV) & (VI) REPORTS: \$80,000 EXPENDED - 8/3/2018

(I) GRANTEE: GENIO

JSA 7E1228 1.000 UNIT 19-21 BLOCK 5, WESTLAND SQUARE PEARSE STREET

DUBLIN 2D02 YH27

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: TO SUPPORT INITIATIVES LED BY SERVICE USERS,

FAMILIES AND CARERS TO ENSURE IMPROVEMENTS ARE MADE AVAILABLE TO THOSE WHO NEED OPPORTUNITIES TO LIVE AS VALUED MEMBERS OF THEIR COMMUNITIES.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/16/2018

(I) GRANTEE: GLENSTAL ABBEY

MURROE

CO. LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$9,601

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO PART FUND A NEW ENERGY CENTRE COMPRISING A HEAT PUMP AND COLLECTOR. THE GRANT WAS ALSO USED TOWARDS THE COST OF RENOVATING AND REFURBISHING THE CHURCH AT GLENSTAL ABBEY.

(IV) & (VI) REPORTS: \$9,601 EXPENDED - 8/8/2018

(I) GRANTEE: GLENSTAL ABBEY

MURROE

CO. LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$20,000

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|-----------------------------|--------------------------------------|-----------|---------|------|------|-----|---------|--|--------------------------------|---------------|
| Name of the organization    | THE                                  | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND |  | Employer identification number |               |
| FUNDS AMERICA /             | THE                                  | IRELAND F | UNDS)   |      |      |     |         |  | 25-1306992                     |               |

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO PROVIDE A SCHOLARSHIP FOR A STUDENT TO ATTEND GLENSTAL ABBEY SCHOOL.

(IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/8/2018

(I) GRANTEE: GLENSTAL ABBEY

MURROE

CO. LIMERICK

#### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$10,000

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO FUND THE EDUCATION AND RELATED COSTS OF A MONK.THE GRANT MADE A DIFFERENCE BY ENABLING THE MONK ATTEND THE UNIVERSITY OF LIMERICK AND TO LIVE AT GLENSTAL ABBEY FOR THE DURATION OF HIS STUDIES.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/8/2018

(I) GRANTEE: GLENSTAL ABBEY

MURROE

CO. LIMERICK

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: FUNDED THE EDUCATION AND RELATED COSTS FOR A MONK TO ATTEND THE UNIVERSITY OF LIMERICK AND TO LIVE AT GLENSTAL ABBEY FOR THE DURATION OF HIS STUDIES.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/8/2018

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(I) GRANTEE: GLENSTAL ABBEY

MURROE

FUNDS AMERICA / THE IRELAND FUNDS)

CO. LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$30,000

(III) PURPOSE OF GRANTS: SUPPORTED THE GLENSTAL ABBEY CHURCH RENOVATION

AND REFURBISHMENT PROJECT WHICH ENHANCED THE CHURCH FOR DAILY USE BY THE

MONASTIC COMMUNITY AND VISITORS.

(IV) & (VI) REPORTS: \$30,000 EXPENDED - 8/8/2018

(I) GRANTEE: GLENSTAL ABBEY

MURROE

CO. LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO PARTLY FUND THE COST OF BUILDING LATRINES. THE GLENSTAL ABBEY MONKS AND STUDENTS WERE UNDERTAKING A CHARITY PROJECT AT A SCHOOL IN KENYA.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/14/2018

(I) GRANTEE: GLENSTAL ABBEY

MURROE

CO. LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$110,000

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| FUNDS AMERICA / THE IRELAND FUNDS)   |     |          |         |      |      |     |         |  | 25-1306992                     |               |

(III) PURPOSE OF GRANTS: BUILT THE PURPOSE OF THE GRANT WAS TO ENABLE GLENSTAL ABBEY TO BUILD A PEDESTRIAN BRIDGE LINKING THE MONASTERY AND LIBRARY.THE GRANT MADE A DIFFERENCE BY FUNDING A WORTHWHILE PROJECT TO ENHANCE THE BUILDING INFRASTRUCTURE AT GLENSTAL ABBEY.

(IV) & (VI) REPORTS: \$110,000 EXPENDED - 8/14/2018

(I) GRANTEE: GONZAGA COLLEGE SJ

SANDFORD ROAD

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$250

(III) PURPOSE OF GRANTS: SUPPORT THE DEVELOPMENT OF EDUCATIONAL

FACILITIES AT GONZAGA COLLEGE AND FACILITATED THE IMPROVEMENT OF TEACHING

IN THE COLLEGE

JSA 7E1228 1.000

(IV) & (VI) REPORTS: \$250 EXPENDED - 8/21/2018

(I) GRANTEE: HELLO WORLD FOUNDATION T/A CODERDOJO FOUNDATION

DOGPATCH LABS, UNIT 1 THE CHQ BUILDING

CUSTOM HOUSE QUAY

DUBLIN

# IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$735

(III) PURPOSE OF GRANTS: THIS GRANT WENT TOWARDS OUR GLOBAL COMMUNITY SUPPORT ACTIVITIES. THESE INCLUDE PROVIDING OPEN CHANNELS FOR VOLUNTEERS ALL AROUND THE WORLD TO CREATE CLUBS IN THEIR COMMUNITIES. (IV) & (VI) REPORTS: \$735 EXPENDED - 8/3/2018

(I) GRANTEE: HOSPICE AFRICA IRELAND

C/O OUR LADY'S HOSPICE HAROLD'S CROSS DUBLIN 6W

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$3,500

(III) PURPOSE OF GRANTS: HAI IS A TOTALLY VOLUNTEER RUN CHARITY WHICH RAISES FUNDS FOR HOSPICE SERVICES IN UGANDA. THIS GRANT SUPPORTED HOSPICE AFRICA UGANDA FOR A HOSPICE HOSPITAL IN UGANDA.

(IV) & (VI) REPORTS: \$3,500 EXPENDED - 9/19/2018

### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: INTEGRATED EDUCATION FUND

FOREST VIEW, PURDY'S LANE

BELFAST

DOWN, BT8 7AR

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$250

(III) PURPOSE OF GRANTS: TO SUPPORT COSTS ATTACHED TO SENDING A GROUP OF STUDENTS FROM HAZELWOOD INTEGRATED COLLEGE TO COMPETE IN THE PRETIGIOUS BAR MOCK TRIALS COMPETITION IN LONDON FOLLOWING WINNING THE NI HEAT. (IV) & (VI) REPORTS: \$250 EXPENDED - 8/9/2018

(I) GRANTEE: INTEGRATED EDUCATION FUND

FOREST VIEW, PURDY'S LANE

BELFAST

DOWN, BT8 7AR

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,000

(III) PURPOSE OF GRANTS: PORTAFERRY INTEGRATED PRIMARY SCHOOL NEEDED TO

ESTABLISH A NEW INTEGRATED PLAYGROUP FACILITY BESIDE THE SCHOOL TO

ENCOURAGE AND SUPPORT FURTHER ENROLLMENT AT THE PRIMARY SCHOOL.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/9/2018

(I) GRANTEE: INTEGRATED EDUCATION FUND

FOREST VIEW, PURDY'S LANE

BELFAST

DOWN, BT8 7AR

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,000

(III) PURPOSE OF GRANTS: ROWANDALE URGENTLY NEEDED ADDITIONAL EDUCATIONAL

MATERIALS AND RESOURCES TO SUPPORT ITS SIGNIFICANT GROWTH IN PUPIL

ENROLLMENTS.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/9/2018

(I) GRANTEE: INTEGRATED EDUCATION FUND

FOREST VIEW, PURDY'S LANE BELFAST DOWN, BT8 7AR

#### NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: TO CONSTRUCT A NEW CHILDREN'S CENTRE AT OMAGH

IPS WHICH WILL HOUSE AN INTEGRATED PLAYGROUP, A BREAKFAST CLUB AND AFTER

SCHOOLS CLUB.

(IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/9/2018

(I) GRANTEE: INTEGRATED EDUCATION FUND

FOREST VIEW, PURDY'S LANE

BELFAST

DOWN, BT8 7AR

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,000

(III) PURPOSE OF GRANTS: TO SUPPORT THE GROWTH AND EXPANSION OF THIS POPULAR AND OVERSUBSCRIBED INTEGRATED PRIMARY SCHOOL BY HELPING TO PROVIDE MUCH NEEDED EQUIPMENT AND RESOURCES.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/9/2018

(I) GRANTEE: INTEGRATED EDUCATION FUND

FOREST VIEW, PURDY'S LANE BELFAST DOWN, BT8 7AR NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,304

JSA 7E1228 1.000

(III) PURPOSE OF GRANTS: TO PROVIDE ADDITIONAL PRE-SCHOOL NURSERY PLAY

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EQUIPMENT AND RESOURCES TO SUPPORT CHILDREN ATTENDING LOUGH VIEW INTEGRATED.

(IV) & (VI) REPORTS: \$1,304 EXPENDED - 8/9/2018

(I) GRANTEE: INTERNATIONAL SCHOOL OF DUBLIN

8 SYNGE STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$7,000

(III) PURPOSE OF GRANTS: THE PURPOSE OF THIS GRANT WAS TO IMPROVE THE TEACHING ENVIRONMENT AND LEARNING OUTCOMES BY INVESTING IN EDUCATIONAL

RESOURCES, LITERARY BOOKS AND IT EQUIPMENT IN THE SCHOOL.

(IV) & (VI) REPORTS: \$7,000 EXPENDED - 8/15/2018

(I) GRANTEE: INTERNATIONAL SCHOOL OF DUBLIN

8 SYNGE STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$10,000

(III) PURPOSE OF GRANTS: IMPROVED TEACHING ENVIRONMENT AND LEARNING OUTCOMES BY INVESTING IN EDUCATIONAL RESOURCES, LITERARY BOOKS AND IT EQUIPMENT IN THE SCHOOL.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/15/2018

(I) GRANTEE: IRELAND FUNDS - IRISH UNIVERSITY BUSINESS PLAN COMPETITION

2ND FLOOR, 25 ST STEPHEN'S GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$70,000

(III) PURPOSE OF GRANTS: SUPPORTED THE IRELAND FUNDS BUSINESS PLAN

COMPETITION IN IRELAND WHICH ALLOWED YOUNG ENTREPRENEURS WITH START-UP

TECH IDEAS TO WORK IN SOCIAL INNOVATION.

(IV) & (VI) REPORTS: \$70,000 EXPENDED - 9/4/2018

(I) GRANTEE: IRELAND FUNDS - NO MIND LEFT BEHIND

25 ST. STEPHEN'S GREEN, 2ND FLOOR

DUBLIN

## IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$65,000

(III) PURPOSE OF GRANTS: THIS GRANT WAS USED TOWARDS THE NO MIND LEFT BEHIND PROGRAMME WHICH AIMS TO GIVE PROMISING YOUNG PEOPLE FROM LOW-INCOME HOUSEHOLDS THE OPPORTUNITY TO COMPLETE A THIRD-LEVEL EDUCATION.

(IV) & (VI) REPORTS: \$65,000 EXPENDED - 9/4/2018

(I) GRANTEE: THE IRELAND FUNDS, THE

2ND FLOOR, 25 ST STEPHEN'S GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$140,000

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| FUNDS AMERICA / THE IRELAND FUNDS)   |     |          |         |      |      |     |         | 25-1306992 |                                |               |

(III) PURPOSE OF GRANTS: SUPPORTED THE CORE AIMS AND OBJECTIVES OF THE IRELAND FUNDS: TO FOSTER PEACE, RECONCILIATION, EDUCATION & CULTURE AND TO PROMOTE PHILANTHROPY IN THE ISLAND OF IRELAND.

(I) GRANTEE: THE IRELAND FUNDS, THE

(IV) & (VI) REPORTS: \$140,000 EXPENDED - 9/4/2018

2ND FLOOR, 25 ST STEPHEN'S GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$136,933

(III) PURPOSE OF GRANTS: SUPPORTED THE CORE AIMS AND OBJECTIVES OF THE IRELAND FUNDS: TO FOSTER PEACE, RECONCILIATION, EDUCATION & CULTURE AND COMMUNITY DEVELOPMENT AND TO PROMOTE PHILANTHROPY IN THE ISLAND OF IRELAND.

(IV) & (VI) REPORTS: \$136,933 EXPENDED - 9/4/2018

(I) GRANTEE: IRELAND PARK FOUNDATION

60 HARBOUR STREET, FOURTH FLOOR

TORONTO, ONTARIO M5J 1B7

CANADA

(II) AMOUNT OF GRANTS: 2017 - \$1,500

(III) PURPOSE OF GRANTS: THE PURPOSE OF THE GRANT WAS TO HELP WITH THE GENERAL OPERATIONS OF IRELAND PARK FOUNDATION.

(IV) & (VI) REPORTS: \$1,500 EXPENDED - 8/3/2018

(I) GRANTEE: IRISH ANCESTRY RESEARCH CENTRE - IARC

1 ANNAVILLE, WESTERN ROAD

CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,331

(III) PURPOSE OF GRANTS: SUPPORTED THE SMOOTH TRANSITION TO CURRENT

COMPANY FORMAT.

(IV) & (VI) REPORTS: \$2,331 EXPENDED - 10/2/2018

(I) GRANTEE: IRISH FILM INSTITUTE (IFI)

6 EUSTACE STREET TEMPLE BAR

DUBLIN 2, D02 PD85

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,074

(III) PURPOSE OF GRANTS: THE GRANT SUPPORTED THE IRISH FILM FESTA IN

ROME, WHICH SHOWCASES DIVERSE IRISH FILM.

(IV) & (VI) REPORTS: \$1,074 EXPENDED - 8/23/2018

(I) GRANTEE: IRISH GEORGIAN SOCIETY - DUBLIN

CITY ASSEMBLY HOUSE 58 SOUTH WILLIAM STREET

DUBLIN 2D02 X751

IRELAND

JSA 7E1228 1.000

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: THIS GRANT WAS USED TO SUPPORT A MAJOR

EXHIBITION OF 18TH CENTURY IRISH ART HELD BY THE IRISH GEORGIAN SOCIETY

IN THE CITY ASSEMBLY HOUSE, DUBLIN.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/2/2018

### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: IRISH GUIDE DOGS FOR THE BLIND

MODEL FARM ROAD

CORK T12 WT4A

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$417

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT OUR ASSISTANCE

DOGS PROGRAMME FOR FAMILIES WITH CHILDREN WITH AUTISM. THE FUNDS WERE

DIRECTED TO THE DOG'S TRAINING COSTS TO HELP WITH IMPROVING THEIR QUALITY

OF LIFE.

(IV) & (VI) REPORTS: \$417 EXPENDED - 8/23/2018

### (I) GRANTEE: IRISH HOSPICE FOUNDATION

MORRISON CHAMBERS 32 NASSAU STREET

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$17,000

(III) PURPOSE OF GRANTS: THIS GRANT WAS USED TO SUPPORT LOCAL HOSPICE

GROUPS THROUGHOUT IRELAND INCLUDING INCREASED CAPACATIY AND ADDING

NURSING CARE.

(IV) & (VI) REPORTS: \$17,000 EXPENDED - 8/2/2018

(I) GRANTEE: IRISH HOSPICE FOUNDATION

MORRISON CHAMBERS 32 NASSAU STREET

DUBLIN

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$250

(III) PURPOSE OF GRANTS: THE GRANT WAS MADE AS PART OF OUR UNRESTRICTED

FUNDS TO FURTHER THE OBJECTIVES OF THE FOUNDATION.

(IV) & (VI) REPORTS: \$250 EXPENDED - 8/2/2018

(I) GRANTEE: IRISH SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN -

### ISPCC

29 LOWER BAGGOT STREET

DUBLIN

IRELAND

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(II) AMOUNT OF GRANTS: 2016 - 2017 - $4,675
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(III) PURPOSE OF GRANTS: USED IN A ONE-ON-ONE THERAPEUTIC SERVICE FOR

CHILDREN, WHICH AIMS TO BUILD RESILIENCE.

(IV) & (VI) REPORTS: \$4,675 EXPENDED - 8/15/2018

(I) GRANTEE: IRISH WHEELCHAIR ASSOCIATION (IWA)

BLACKHEATH DRIVE

DUBLIN

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IRELAND
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(II) AMOUNT OF GRANTS: 2017 - \$2,000

(III) PURPOSE OF GRANTS: FUNDED A SPORTS DEVELOPMENT OFFICER TO MAINTAIN

AND GROW SPORTING OPPORTUNITIES FOR ADULTS AND CHILDREN WITH

DISABILITIES.

(IV) & (VI) REPORTS: \$2,000 EXPENDED - 8/9/2018

(I) GRANTEE: IVEAGH TRUST

BULL ALLEY STREET

DUBLIN, D08 R7DX

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$10,000

(III) PURPOSE OF GRANTS: FUNDED WINDOW RESTORATION AT IVEAGH TRUST'S

### HOMELESS SHELTER.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/16/2018

(I) GRANTEE: IVEAGH TRUST

BULL ALLEY STREET DUBLIN, D08 R7DX

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$7,500

(III) PURPOSE OF GRANTS: WILL BE USED TO ENHANCE A SMALL GARDEN FOR THE

RESIDENTS OF THE IVEAGH TRUST SHELTER.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/16/2018

# (I) GRANTEE: JEWISH HOME OF IRELAND

HERZOG HOUSE 1 ZION ROAD

RATHGAR, DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,742

(III) PURPOSE OF GRANTS: GRANT FUNDED COSTS ASSOCIATED WITH THE OPERATION

OF THE JEWISH HOME.

(IV) & (VI) REPORTS: \$2,742 EXPENDED - 8/13/2018

(I) GRANTEE: KENMARE CARNEGIE ARTS CENTRE LTD

SHELBOURNE STREET

KENMARE

CO KERRY

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$500

(III) PURPOSE OF GRANTS: THE GRANT WAS A DONATION TO SUPPORT OUR THEATRE

AND OUR EXISTING GROUP OF VOLUNTEERS, THE CARNEGIE PLAYERS.

(IV) & (VI) REPORTS: \$500 EXPENDED - 11/8/2018

(I) GRANTEE: KENMARE CHAMBER OF COMMERCE & TOURISM

KENMARE

KERRY

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$6,976

(III) PURPOSE OF GRANTS: SET UP A FARMERS MARKET AND INTRODUCED LOCALLY

PRODUCED PRODUCTS AND CRAFTS TO THE COMMUNITY.

(IV) & (VI) REPORTS: \$6,976 EXPENDED - 8/7/2018

(I) GRANTEE: KERRY HOSPICE FOUNDATION

TRALEE

CO. KERRY

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,000

(III) PURPOSE OF GRANTS: TO SUPPORT THE PALLIATIVE CARE SERVICES IN KERRY

AND IMPROVE THE QUALITY OF LIFE FOR ALL PATIENTS.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 10/19/2018

(I) GRANTEE: KERRY GAA CENTRE OF EXCELLENCE

THE PAVILION AUSTIN STACK PARK

TRALEE, CO. KERRY

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$15,700

(III) PURPOSE OF GRANTS: DEVELOPED CENTRE OF EXCELLENCE FACILITY

CONSISTING OF PLAYING PITCHES, CLUBHOUSE, AND OTHER FACILITIES. PROMOTED

AND ORGANISED GAELIC GAMES AND CULTURAL ACTIVITIES FOR ALL AGE GROUPS

WITHIN CO. KERRY.

(IV) & (VI) REPORTS: \$15,700 EXPENDED - 6/16/2017

(I) GRANTEE: LADY GREGORY AUTUMN GATHERING

KINGSTON ROAD KINGSTON

GALWAY

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,800

(III) PURPOSE OF GRANTS: HIGHLIGHTED THE CULTURAL HERITAGE OF SE GALWAY

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IN THOOR BALLYLEE AND COOLE PARK BY FUNDING A PLAY DURING THE LADY GREGORY-YEATS AUTUMN GATHERING 2017.

(IV) & (VI) REPORTS: \$2,800 EXPENDED - 9/20/2018

(I) GRANTEE: LIME TREE THEATRE

MARY IMMACULATE COLLEGE COURTBRACK AVENUE

LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$2,000

(III) PURPOSE OF GRANTS: THIS GRANT FUNDED THE BUALADH BOS CHILDREN'S

# FESTIVAL.

JSA 7E1228 1.000

(IV) & (VI) REPORTS: \$2,000 EXPENDED - 8/16/2018

(I) GRANTEE: LIMERICK INSTITUTE OF TECHNOLOGY

MOYLISH PARK

LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,000

(III) PURPOSE OF GRANTS: GRANT WAS USED TOWARD THE LIT STUDENT

SCHOLARSHIPS TO ENABLE A STUDENT TO COMPLETE THEIR COLLEGE PROGRAMME.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/24/2018

(I) GRANTEE: LITTLE MUSEUM OF DUBLIN

15 ST STEPHENS GREEN

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,500

(III) PURPOSE OF GRANTS: FUNDED MAINTENANCE, OPERATIONS AND EXHIBITION

COSTS.

(IV) & (VI) REPORTS: \$1,500 EXPENDED - 8/14/2018

#### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: LYRIC THEATRE

55 RIDGEWAY STREET

BELFAST, BT9 5FB

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,300

(III) PURPOSE OF GRANTS: SUPPORTED CREATIVE LEARNING AND OUTREACH

PROJECTS TO IMPROVE LIFE FOR COMMUNITIES IN NORTHERN IRELAND.

(IV) & (VI) REPORTS: \$1,300 EXPENDED - 9/20/2018

#### (I) GRANTEE: MAKE-A-WISH IRELAND

2 LEOPARDSTOWN BUSINESS CENTRE BALLYOGAN AVENUE

LEOPARDSTOWN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$30,000

(III) PURPOSE OF GRANTS: FUNDED COSTS OF WISH DAY 2017, THE NATIONAL

FUNDRAISING EVENT FOR MAKE-A-WISH IRELAND.

(IV) & (VI) REPORTS: \$29,795 EXPENDED - 8/9/2018

JSA 7E1228 1.000 (I) GRANTEE: MAKING CONNECTIONS

GLENARD, CLONSKEAGH

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$18,535

(III) PURPOSE OF GRANTS: ALLEVIATED LONELINESS AND ISOLATION AMONG

VULNERABLE OLDER ADULTS BY MATCHING THEM WITH VOLUNTEERS WHO HAVE SIMILAR

INTERESTS SO THAT BOTH BENEFIT FROM THE EXPERIENCE.

(IV) & (VI) REPORTS: \$18,535 EXPENDED - 8/3/2018

(I) GRANTEE: MARIE CURIE - BELFAST

1A KENSINGTON ROAD

BELFAST, ANTRIM BT5 6NF

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: USED TO SUPPORT OUR DEDICATED CARE AT THE MARIE

CURIE BELFAST HOSPICE FOR OVER 550 PATIENCE PER YEAR, INCLUDING THOSE

RECEIVING PALLIATIVE CARE.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/8/2018

(I) GRANTEE: MARK POLLOCK TRUST

GROUND FLOOR WILTON PLAZA WILTON PLACE DUBLIN IRELAND

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| FUNDS AMERICA /                        |  |                                |  |  |  |  |  |  |  |

(II) AMOUNT OF GRANTS: 2017 - \$25,000

(III) PURPOSE OF GRANTS: FUNDED A MULTI-PERSON STUDY OF PEOPLE WITH

PARALYSIS.

(IV) & (VI) REPORTS: \$25,000 EXPENDED - 8/2/2018

(I) GRANTEE: MARY IMMACULATE COLLEGE

SOUTH CIRCULAR ROAD

LIMERICK

#### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$500

(III) PURPOSE OF GRANTS: SUPPORTED THE PEADAR CREMIN FELLOWSHIP WHICH PROMOTES EXCELLENCE IN TEACHING, LEARNING AND RESEARCH, AND PROMOTES

EQUITY IN SOCIETY FOR PEOPLE WITH SPECIAL NEEDS.

(IV) & (VI) REPORTS: \$500 EXPENDED - 8/29/2018

(I) GRANTEE: MAYO ROSCOMMON HOSPICE FOUNDATION

MAIN STREET

KNOCK, CO. MAYO

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$25,000

(III) PURPOSE OF GRANTS: HELPED BUILD HOSPICES IN MAYO AND ROSCOMMON.

(IV) & (VI) REPORTS: \$25,000 EXPENDED - 8/30/2018

(I) GRANTEE: MEATH GAA

JSA 7E1228 1.000 DUNGANNY CENTRE OF EXCELLENCE DUNGANNY

Name of the organizationTHE AMERICAN IRELAND FUND (DBA THE IRELANDFUNDS AMERICA / THE IRELAND FUNDS)

Employer identification number 25-1306992

TRIM, CO. MEATH

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: IMPLEMENTATION OF PLAYER RETENTION STRATEGY,

WHEREBY FUNDS WILL BE USED TO EMPLOY FULL AND PART TIME PERSONNEL IN THE

CLUB AND SCHOOLS GAA COACHING.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/15/2018

(I) GRANTEE: MICHAEL MCCARTHAIGH'S JUVENILE GAA CLUB

CARIGEEN

DONERAILE

CO CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: PURPOSE OF GRANT WAS TO PROVIDE ESSENTIAL

EQUIPMENT FOR THE CLUB AND TO HELP WITH GENERAL DAY TO DAY RUNNING OF

CLUB.

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 11/1/2018

(I) GRANTEE: MILFORD CARE CENTRE

CASTLETROY

CO. LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,000

(III) PURPOSE OF GRANTS: APPLIED TOWARDS OPERATIONAL FUNDING DEFICIT FOR

| Schedule O (Form 990 or 990-EZ) 2017         Pa |     |          |         |      |      |     |            |  |                                | Page <b>2</b> |
|---|-----|----------|---------|------|------|-----|------------|--|--------------------------------|---------------|
| Name of the organization                        | THE | AMERICAN | IRELAND | FUND | (DBA | THE | IRELAND    |  | Employer identification number |               |
| FUNDS AMERICA / THE IRELAND FUNDS)              |     |          |         |      |      |     | 25-1306992 |  |                                |               |

HOSPICE CARE WHICH HELPED THE CENTRE TO DELIVER HIGH QUALITY

PATIENT-CENTRED CARE IN 2017.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/23/2018

(I) GRANTEE: MILITARY HERITAGE TRUST OF IRELAND LTD.

C/O THE RESISTRY

MCKEE BARRACKS

PARKGATE

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$196

(III) PURPOSE OF GRANTS: FUNDS WERE USED TO ADVANCE UNDERSTANDING WITHIN

THE ISLAND OF IRELAND REGARDING IRELAND'S UNIQUE MILITARY HERITAGE AND

THE STORY OF THE IRISH SOLDIER.

(IV) & (VI) REPORTS: \$196 EXPENDED -10/31/2018

(I) GRANTEE: MILTOWN MALBAY DEVELOPMENT COMPANY

CLONBONY, MILTOWN MALBAY

CLARE

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$250,000

(III) PURPOSE OF GRANTS: REDEVELOPMENT OF THE COMMUNITY CENTRE IN MILTOWN

MALBAY CO.CLARE. COMPLETED THE DESIGN PHASE.

(IV) & (VI) REPORTS: \$40,159 EXPENDED - 8/10/2018

(I) GRANTEE: MOY HILL COMMUNITY FARM

LACKAMORE MOY, LAHINCH

CLARE

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: ALLOWED FOR PURCHASE OF ADDITION FARMLAND TO

PRESERVE THE ENVIRONMENT, FEED THE COMMUNITY, PLANT TREES, AND SUPPORT

ENGAGEMENT WITH NATURE.

(IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/6/2018

(I) GRANTEE: MS IRELAND

80 NORTHUMBERLAND ROAD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2013 - \$25,710

(III) PURPOSE OF GRANTS: DEVELOPED A WEB AND PAPER BASED EXERCISE

RESOURCE FOR PEOPLE WITH MULTIPLE SCLEROSIS.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/16/2018

(I) GRANTEE: MS IRELAND

JSA 7E1228 1.000 80 NORTHUMBERLAND ROAD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2014 - \$29,356

(III) PURPOSE OF GRANTS: FUNDED FALLS PREDICTION RESEARCH THAT EVALUATES

| Schedule O (Form 990 or 990-EZ) 2017 P |     |          |         |      |      |     |            |  |                                |  |
|--|-----|----------|---------|------|------|-----|------------|--|--------------------------------|--|
| Name of the organization               | THE | AMERICAN | IRELAND | FUND | (DBA | THE | IRELAND    |  | Employer identification number |  |
| FUNDS AMERICA / THE IRELAND FUNDS)     |     |          |         |      |      |     | 25-1306992 |  |                                |  |

THE LIKELIHOOD OF FALLING FOR PEOPLE WITH MS.

(IV) & (VI) REPORTS: \$21,545 EXPENDED - 8/16/2018

(I) GRANTEE: MS IRELAND

80 NORTHUMBERLAND ROAD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$43,917

(III) PURPOSE OF GRANTS: DEVELOPED A WEB AND PAPER BASED EXERCISE

RESOURCE FOR PEOPLE WITH MULTIPLE SCLEROSIS.

(IV) & (VI) REPORTS: \$36,861 EXPENDED - 8/16/2018

(I) GRANTEE: MS IRELAND

80 NORTHUMBERLAND ROAD

DUBLIN

# IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$51,928

(III) PURPOSE OF GRANTS: DEVELOPMENT OF EVIDENCE-BASED, USER-INFORMED

MULTICOMPONENT FALLS PREVENTION PROGRAMME AND AN EVIDENCE-BASED RESOURCE

TO PROMOTE PHYSICAL ACTIVITY.

(IV) & (VI) REPORTS: \$39,322 EXPENDED - 8/16/2018

(I) GRANTEE: MYMIND CENTRE FOR MENTAL WELLBEING

1 CHELMSFORD ROAD, RANELAGH

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,256

(III) PURPOSE OF GRANTS: COVERED THE COSTS OF DEVELOPING A NEW SYSTEM TO

DELIVER SERVICES, MAKING IT EASIER FOR CLIENTS TO ACCESS SUPPORT.

(IV) & (VI) REPORTS: \$1,256 EXPENDED - 8/1/2018

(I) GRANTEE: NA PIOBAIRI UILLEANN

### 15 HENRIETTA STREET

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: FUNDED AN UILLEANN PIPEMAKING PROGRAMME AT OUR DEDICATED PIPEMAKING TRAINING CENTRE AND SUPPORTS TUITION ASSISTANCE

# PROGRAMME.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/23/2018

#### EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: NATIONAL COLLEGE OF IRELAND, EARLY LEARNING INITIATIVE

MAYOR STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$189,812

(III) PURPOSE OF GRANTS: PCHP ENGAGES PARENTS IN THEIR CHILDREN'S EARLY LEARNING (18 MONTHS - 3 YEARS) AND SUPPORTS THEM IN PREPARING THEIR CHILDREN FOR SCHOOL. THIS GRANT ALLOWED THE PROGRAM TO EXPAND IN DUBLIN AND GALWAY (IV) & (VI) REPORTS: \$139,812 EXPENDED - 8/15/2018

(I) GRANTEE: NATIONAL COLLEGE OF IRELAND, EARLY LEARNING INITIATIVE

MAYOR STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$25,000

(III) PURPOSE OF GRANTS: THE PARENT CHILD HOME PROGRAMME (PCHP) ENGAGES

PARENTS IN PREPARING CHILDREN FOR SCHOOL. SUPPORTED THE ASSESSMENT,

EVALUATION AND RESEARCH ACTIVITIES OF THE PCHP.

(IV) & (VI) REPORTS: \$25,000 EXPENDED - 8/15/2018

(I) GRANTEE: NATIONAL GALLERY OF IRELAND

MERRION SQUARE WEST/CLARE ST

DUBLIN

# IRELAND

(II) AMOUNT OF GRANTS: 2011 - \$31,435

(III) PURPOSE OF GRANTS: FUNDS USED FOR THE CREATION OF THE CATALOGUE IRISH PAINTINGS IN THE NATIONAL GALLERY OF IRELAND VOLUME 2, TO BE WRITTEN BY IRISH CURATOR OF PAINTINGS AND THE DISSEMINATION, COMMUNICATION OF THE RESEARCH AND CONSERVATION PROJECT ON THE MARRIAGE OF AOIFE AND STRONGBOW BY DANIEL MACLISE AT THE NATIONAL GALLERY OF IRELAND.

(IV) & (VI) REPORTS: \$31,435 EXPENDED - 8/30/2018

(I) GRANTEE: NATIONAL GALLERY OF IRELAND

MERRION SQUARE WEST/CLARE ST

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2014 - \$3,413

(III) PURPOSE OF GRANTS: USED BY THE HW WILSON LIBRARY AND ARCHIVAL

PROGRAMME AT THE NATIONAL GALLERY OF IRELAND.

(IV) & (VI) REPORTS: \$3,413 EXPENDED - 9/17/2018

(I) GRANTEE: NATIONAL GALLERY OF IRELAND

MERRION SQUARE WEST/CLARE ST

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$115,484

(III) PURPOSE OF GRANTS: GRANT USED TO ASSIST PROJECTS IN THE AREAS OF EDUCATION, LIBRARY AND ARCHIVES AND DEVELOPMENT. THE FUNDS HELPED IN THE MISSION TO REACH OUT TO THE PUBLIC AND BUILD SOUND STRUCTURES.

(IV) & (VI) REPORTS: \$115,484 EXPENDED - 8/30/2018

(I) GRANTEE: NATIONAL GALLERY OF IRELAND

MERRION SQUARE WEST/CLARE ST DUBLIN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$25,000

(III) PURPOSE OF GRANTS: USED BY THE HW WILSON LIBRARY AND ARCHIVE

| Schedule O (Form 990 or 990-EZ) 2017 Pr |     |          |         |      |      |            |         |  |                                |  |
|---|-----|----------|---------|------|------|------------|---------|--|--------------------------------|--|
| Name of the organization                | THE | AMERICAN | IRELAND | FUND | (DBA | THE        | IRELAND |  | Employer identification number |  |
| FUNDS AMERICA / THE IRELAND FUNDS)      |     |          |         |      |      | 25-1306992 |         |  |                                |  |

PROGRAMME FOR ARCHIVING AND CATALOGUING ELEMENTS OF THE COLLECTION OF THE NATIONAL GALLERY OF IRELAND.

(IV) & (VI) REPORTS: \$0 EXPENDED - 9/17/2018

(I) GRANTEE: NATIONAL GALLERY OF IRELAND

MERRION SQUARE WEST/CLARE ST

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$3,000

(III) PURPOSE OF GRANTS: ENABLED ENHANCED EXHIBITION PROGRAMMING FOR THE

RODERIC O'CONOR EXHIBITION.

(IV) & (VI) REPORTS: \$3,000 EXPENDED - 8/30/2018

(I) GRANTEE: NATIONAL LIBRARY OF IRELAND

4 KILDARE STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$310

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO PAY THE SPEAKER OF THE

ANNUAL JOSEPH HASSETT YEATS LECTURE ON 13 JUNE 2016.

(IV) & (VI) REPORTS: \$310 EXPENDED - 9/19/2018

(I) GRANTEE: NATIONAL LIBRARY OF IRELAND

4 KILDARE STREET

DUBLIN

JSA 7E1228 1.000

## IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$6,500

(III) PURPOSE OF GRANTS: SUPPORTED AN ANNUAL LECTURE AND PROMOTED THE

LITERARY WORKS OF YEATS.

(IV) & (VI) REPORTS: \$4,151 EXPENDED - 8/15/2018

(I) GRANTEE: NATIVE WOODLAND TRUST

### UNIT 11A MULCAHY KEANE INDUSTRIAL ESTATE

### WAKLINSTOWN

# DUBLIN

# IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$100,000

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO PURCHASE AN ANCIENT

WOODLAND IN CO. OFFALY, WITH THE REMAINDER FOR CORE EXPENSES.

(IV) & (VI) REPORTS: \$16,409 EXPENDED - 10/19/2018

(I) GRANTEE: NORTHERN IRELAND HOSPICE

18 O'NEILL ROAD

#### NEWTOWNABBEY

ANTRIM, BT36 6WB

### NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,950

(III) PURPOSE OF GRANTS: SUPPORTED THERAPEUTIC ARTS ACTIVITIES FOR

PATIENTS IN HOSPICE IN NORTH BELFAST.

(IV) & (VI) REPORTS: \$1,950 EXPENDED - 8/7/2018

(I) GRANTEE: O'HANLON PARK BOXING CLUB

1 ST. BRIGIDS TERRACE, DUNDALK

CO. LOUTH

IRELAND

(II) AMOUNT OF GRANTS: 2012 - \$57,942

(III) PURPOSE OF GRANTS: HELPED PURCHASE AND RENOVATE A NEW BUILDING DUE

TO SAFETY CONCERNS IN OLD PROPERTY.

(IV) & (VI) REPORTS: \$57,667 EXPENDED - 8/27/2018

(I) GRANTEE: O'HANLON PARK BOXING CLUB

1 ST. BRIGIDS TERRACE, DUNDALK

- CO. LOUTH
- IRELAND

(II) AMOUNT OF GRANTS: 2013 - \$90,229

(III) PURPOSE OF GRANTS: HELPED PURCHASE AND RENOVATE A NEW BUILDING DUE

TO SAFETY CONCERNS IN OLD PROPERTY.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/27/2018

(I) GRANTEE: O'HANLON PARK BOXING CLUB

1 ST. BRIGIDS TERRACE, DUNDALK

CO. LOUTH

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$2,500

(III) PURPOSE OF GRANTS: HELPED PURCHASE AND RENOVATE A NEW BUILDING DUE

| Schedule O (Form 990 or 990-EZ) 2017 |  |                                |  |  |  |  |  |  |  |
|--------------------------------------|--|--------------------------------|--|--|--|--|--|--|--|
| Name of the organization             | THE AMERICAN IRELAND FUND (DBA THE IRELAND | Employer identification number |  |  |  |  |  |  |  |
| FUNDS AMERICA /                      | THE IRELAND FUNDS)                         | 25-1306992                     |  |  |  |  |  |  |  |

TO SAFETY CONCERNS IN OLD PROPERTY.

(IV) & (VI) REPORTS: \$2,500 EXPENDED - 8/27/2018

(I) GRANTEE: O'HANLON PARK BOXING CLUB

1 ST. BRIGIDS TERRACE, DUNDALK

CO. LOUTH

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$20,000

(III) PURPOSE OF GRANTS: HELPED PURCHASE AND RENOVATE A NEW BUILDING DUE

TO SAFETY CONCERNS IN OLD PROPERTY.

(IV) & (VI) REPORTS: \$19,523 EXPENDED - 8/27/2018

(I) GRANTEE: O'HANLON PARK BOXING CLUB

1 ST. BRIGIDS TERRACE, DUNDALK

CO. LOUTH

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$50,000

(III) PURPOSE OF GRANTS: HELPED PURCHASE AND RENOVATE A NEW BUILDING DUE

TO SAFETY CONCERNS IN OLD PROPERTY.

(IV) & (VI) REPORTS: \$50,000 EXPENDED - 8/27/2018

(I) GRANTEE: OUR LADY'S HOSPICE

HAROLDS CROSS DUBLIN, D6W RY72

\_\_\_\_, \_\_\_.

IRELAND

| Schedule O (Form 990 or 990 |                | Page 2       |            |        |                                |  |
|-----------------------------|----------------|--------------|------------|--------|--------------------------------|--|
| Name of the organization    | THE AMERICAN   | IRELAND FUND | (DBA THE I | RELAND | Employer identification number |  |
| FUNDS AMERICA /             | THE IRELAND FU | JNDS)        |            |        | 25-1306992                     |  |

(II) AMOUNT OF GRANTS: 2016 - \$1,000

(III) PURPOSE OF GRANTS: CONTRIBUTED TO THE COMPLETE REFURBISHMENT OF

PALLIATIVE CARE UNIT FOR PATIENTS NEEDING RESPITE AND END OF LIFE CARE.

THE UNIT BRINGS DIGNITY, COMFORT AND PEACE OF MIND FOR PATIENTS AND

### FAMILIES

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/30/2018

(I) GRANTEE: OUR LADY'S HOSPICE

HAROLDS CROSS

DUBLIN, D6W RY72

# IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: PROVIDED IMPROVEMENTS TO PATIENTS' ROOMS,

ALLOWING COMFORTABLE OVERNIGHT BEDSIDE ACCOMMODATION FOR PATIENTS'

# FAMILIES.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/30/2018

EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: PETER MCVERRY

29 MOUNTJOY SQUARE

DUBLIN

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IRELAND
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(II) AMOUNT OF GRANTS: 2016 - \$2,500

(III) PURPOSE OF GRANTS: PROVIDED MEALS AT YOUTH CAFÉ FOR HOMELESS YOUTH.

(IV) & (VI) REPORTS: \$2,500 EXPENDED - 8/23/2018

(I) GRANTEE: PIETA HOUSE

6 LOWER MAIN STREET, LUCAN

DUBLIN, K78 W0X2

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,025

(III) PURPOSE OF GRANTS: THIS GRANT SUPPORTED PIETA'S LIFESAVING

COUNSELLING SERVICES AND PROVIDED EMERGENCY INTERVENTION TO A HIGH RISK

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PEOPLE.
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(IV) & (VI) REPORTS: \$5,025 EXPENDED - 8/3/2018

(I) GRANTEE: PLAYHOUSE, THE: NORTH WEST PLAY RESOURCE CENTRE

5 - 7 ARTILLERY STREET, DERRY

CO. LONDONDERRY, BT48 6RG

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$5,000

(III) PURPOSE OF GRANTS: THE FUNDS WILL BE USED TOWARDS THE PRODUCTION

COSTS OF AN EDUCATIONAL FILM THAT AIMS TO DIVERT YOUNG PEOPLE FROM

BECOMING INVOLVED IN PARAMILITARISM.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/6/2018

(I) GRANTEE: PUSHKIN TRUST

BARONSCOURT ESTATE

NEWTOWNSTEWART

TYRONE BT78 4EZ

#### NORTHERN IRELAND

FUNDS AMERICA / THE IRELAND FUNDS)

(II) AMOUNT OF GRANTS: 2016 - 2017 - \$25,000

(III) PURPOSE OF GRANTS: FUNDED A SERIES OF ENVIRONMENTAL AND CREATIVE

ARTS WORKSHOPS FOR PRIMARY SCHOOL CHILDREN FROM DIFFERENT RELIGIOUS

BACKGROUNDS IN NORTHERN IRELAND.

(IV) & (VI) REPORTS: \$25,000 EXPENDED - 8/6/2018

(I) GRANTEE: RIGHTS WATCH UK

54 POLAND STREET, SOHO

LONDON, W1F 7NJ

UNITED KINGDOM

(II) AMOUNT OF GRANTS: 2017 - \$3,500

(III) PURPOSE OF GRANTS: THE GRANT ALLOWED RIGHTS WATCH (UK) TO UNDERTAKE IMPORTANT WORK IN NORTHERN IRELAND ON THE TRANSITIONAL JUSTICE, INCLUDING ENSURING THAT PEACE MECHANISMS ARE ROBUST AND SUFFICIENTLY FUNDED.

(IV) & (VI) REPORTS: \$3,500 EXPENDED - 8/23/2018

(I) GRANTEE: RIGHTS WATCH UK

54 POLAND STREET, SOHO LONDON, W1F 7NJ UNITED KINGDOM

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: ALLOW RWUK TO CONTINUE TO ENSURE THE UK'S INDEPENDENT REVIEW OF THE COUNTER-EXTREMISM STRATEGY AND WORK WITH OTHER EU COUNTRIES TO HIGHLIGHT THE IMPACT OF THESE POLICIES ON CHILDREN.

Employer identification number

25-1306992

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/23/2018

(I) GRANTEE: RORY MCILROY FOUNDATION

UNIT 1, ST HELENS BUSINESS PARK, HOLLYWOOD

CO. DOWN BT18 9HQ

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: FUNDED SCHOLARSHIP PROGRAMME TO BRING AMERICAN GRADUATES TO IRELAND WHERE THEY ENGAGE IN COMMUNITY OUTREACH TO DISADVANTAGED CHILDREN WHILE COMPLETING THEIR MASTERS DEGREE. (IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/9/2018

(I) GRANTEE: ROSCOMMON COUNTY BOARD GAA

ROSCOMMON GAA OFFICES, RACECOURSE ROAD

CO. ROSCOMMON

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$13,000

(III) PURPOSE OF GRANTS: FUNDS WILL BE USED TO DEVELOP THE DERMOT EARLY

CENTRE OF EXCELLENCE. THE FACILITIES INCLUDED FIELDS, DRESSING ROOMS,

MEETING ROOMS AND ADMINISTRATION FACILITIES.

(IV) & (VI) REPORTS: \$0 EXPENDED - 9/19/2018

(I) GRANTEE: ROSCOMMON COUNTY BOARD GAA

ROSCOMMON GAA OFFICES, RACECOURSE ROAD

CO. ROSCOMMON

### IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$31,000

(III) PURPOSE OF GRANTS: THIS GRANT WILL GO TOWARDS THE DEVELOPMENT OF A

CENTRE FOR EXCELLENCE. THIS FACILITY WILL INCLUDE PLAYING FIELDS,

DRESSING ROOMS, MEETING ROOMS.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/24/2018

(I) GRANTEE: ROSCOMMON COUNTY BOARD GAA

ROSCOMMON GAA OFFICES, RACECOURSE ROAD

CO. ROSCOMMON

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$27,000

(III) PURPOSE OF GRANTS: USED TO DEVELOP A CENTRE OF EXCELLENCE WITH

FACILITIES THAT INCLUDE PITCHES, DRESSING ROOMS, MEETING ROOMS AND

ADMINISTRATION FACILITIES.

(IV) & (VI) REPORTS: \$0 EXPENDED - 9/19/2018

(I) GRANTEE: ROSCOMMON COUNTY BOARD GAA

ROSCOMMON GAA OFFICES, RACECOURSE ROAD

CO. ROSCOMMON

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$19,000

(III) PURPOSE OF GRANTS: HELPED LEASE TRANSPORTATION BUS WHICH IS USED TO

TRANSPORT TEAMS AND COMMUNITY GROUPS.

(IV) & (VI) REPORTS: \$19,000 EXPENDED - 9/19/2018

(I) GRANTEE: ROSEMONT SECONDARY SCHOOL FOR GIRLS

ENNISKERRY ROAD, SANDYFORD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - 2017 - \$21,500

(III) PURPOSE OF GRANTS: USED FOR BUILDING PROJECT AND TO HELP FUND

BURSARIES IN THE SCHOOL.

(IV) & (VI) REPORTS: \$21,500 EXPENDED - 8/9/2018

(I) GRANTEE: ROWING IRELAND

NATIONAL ROWING CENTRE FARRAN WOOD

CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$350,000

(III) PURPOSE OF GRANTS: USED TO DEVELOP A REGIONAL HIGH PERFORMANCE

CENTER IN LIMERICK AND TO SUPPORT YOUNG DEVELOPING ATHLETES.

(IV) & (VI) REPORTS: \$350,000 EXPENDED - 9/24/2018

(I) GRANTEE: ROWING IRELAND

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NATIONAL ROWING CENTRE FARRAN WOOD
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CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$593.46

(III) PURPOSE OF GRANTS: GRANT USED TO SUPPORT YOUNG DEVELOPING

### ATHLETES.

(IV) & (VI) REPORTS: \$593.46 EXPENDED - 9/24/2018

(I) GRANTEE: ROYAL IRISH ACADEMY OF MUSIC

36-38 WESTLAND ROW

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$7,000

(III) PURPOSE OF GRANTS: PUT TOWARDS SCHOLARSHIP FUND FOR GIFTED JUNIOR

LEVEL MUSICIANS WHO HAVE SHOWN SPECIAL COMMITMENT TO THEIR ART AND TO

SUPPORT THE COSTS OF STUDENTS TO PERFORM IN NEW YORK.

(IV) & (VI) REPORTS: \$7,000 EXPENDED - 8/3/2018

(I) GRANTEE: SAINT PATRICK VISITOR CENTRE LTD

MARKET STREET, DOWNPATRICK CO. DOWN BT30 6LZ NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$3,000

(III) PURPOSE OF GRANTS: USED TO FACILITATE A CANADIAN YOUNG AMBASSADOR TO SPEND TWO WEEKS WITH THE YOUNG AMBASSADOR PROGRAM IN NORTHERN IRELAND.

(IV) & (VI) REPORTS: \$3,000 EXPENDED - 8/24/2018

EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: SCIENCE GALLERY INTERNATIONAL

27 PEARSE ST

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$50,000

(III) PURPOSE OF GRANTS: SUPPORTED THE ADMINISTRATIVE EXPENSES FOR THE

GLOBAL SCIENCE GALLERY NETWORK TO DEVELOP EIGHT INTERNATIONAL

GALLERIES(IV) & (VI) REPORTS: \$50,000 EXPENDED - 8/15/2018

(I) GRANTEE: SOCIAL ENTREPRENEURS IRELAND

LOWER GROUND FLOOR 11/12 WARRINGTON PLACE

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$5,000

(III) PURPOSE OF GRANTS: SUPPORTED SOCIAL ENTREPRENEURS AWARDEE,

PROVIDING ESSENTIAL FUNDING FOR THE ENTREPRENEUR TO FURTHER DEVELOP THEIR

WORK AND INCREASE OVERALL SOCIAL IMPACT.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 8/24/2018

(I) GRANTEE: SOCIAL ENTREPRENEURS IRELAND

LOWER GROUND FLOOR 11/12 WARRINGTON PLACE

DUBLIN

## IRELAND

JSA 7E1228 1.000

(II) AMOUNT OF GRANTS: 2016 - \$179,925

(III) PURPOSE OF GRANTS: ALLOCATED FUNDING TO SOCIAL ENTREPRENEURS FOR

SUPPORT OF AWARDS PROGRAMMES AND ADMINISTRATIVE COSTS.

(IV) & (VI) REPORTS: \$179,925 EXPENDED - 8/24/2018

(I) GRANTEE: SOCIAL ENTREPRENEURS IRELAND

LOWER GROUND FLOOR 11/12 WARRINGTON PLACE

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$153,595

(III) PURPOSE OF GRANTS: ALLOCATED FUNDING TO SOCIAL ENTREPRENEURS FOR

SUPPORT OF AWARDS PROGRAMMES AND ADMINISTRATIVE COSTS.

(IV) & (VI) REPORTS: \$153,595 EXPENDED - 8/24/2018

(I) GRANTEE: SOCIAL INNOVATION FUND IRELAND

FIRST FLOOR, UNIT 16, TRINITY TECHNOLOGY & ENTERPRISE

CAMPUS

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: PROVIDED ESSENTIAL FUNDING FOR ENTREPRENEURS TO

FURTHER DEVELOP THEIR WORK AND INCREASE OVERALL SOCIAL IMPACT

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 9/20/2018

(I) GRANTEE: ST MARY'S COLLEGE - DUBLIN

73-79 LOWER RATHMINES ROAD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$9,000

|                                    |     |          |         |      |      |     |            |  |                                | Page <b>2</b> |
|------------------------------------|-----|----------|---------|------|------|-----|------------|--|--------------------------------|---------------|
| Name of the organization           | THE | AMERICAN | IRELAND | FUND | (DBA | THE | IRELAND    |  | Employer identification number |               |
| FUNDS AMERICA / THE IRELAND FUNDS) |     |          |         |      |      |     | 25-1306992 |  |                                |               |

(III) PURPOSE OF GRANTS: ASSISTED IN THE EDUCATION OF PUPILS WHOSE FAMILIES HAVE EXPERIENCED FINANCIAL DIFFICULTIES AND ARE UNABLE TO PAY FOR EDUCATION.

(IV) & (VI) REPORTS: \$9,000 EXPENDED - 8/13/2018

(I) GRANTEE: ST PATRICK'S CATHEDRAL - DUBLIN

ST PATRICKS CLOSE

DUBLIN

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,500

(III) PURPOSE OF GRANTS: USED TO DEFRAY COSTS RELATING TO AN ONGOING

DEVELOPMENT PROJECT BY THE DESIGN AND TECHNICAL TEAM.

(IV) & (VI) REPORTS: \$2,500 EXPENDED - 8/24/2018

(I) GRANTEE: ST. BRIGID'S CHURCH BELFAST

40 DERRYVOLGIE AVENUE

BELFAST, BT9 6FP

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: USED TO OFFSET PARISH RUNNING COSTS AND PROVIDE PARTIAL FUNDING TOWARDS THE SALARY OF A NEWLY APPOINTED PERSON TASKED WITH CO-ORDINATING ACTIVITIES OF YOUTH ACROSS OUR PARISH. (IV) & (VI) REPORTS: \$10,000 EXPENDED - 8/15/2018

(I) GRANTEE: ST. JAMES'S HOSPITAL FOUNDATION

ST. JAMES'S HOSPITAL JAMES'S STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$50,000

(III) PURPOSE OF GRANTS: WILL ENABLE A MAJOR INTERNATIONAL STUDY ON

LYMPHOMA AT THE IRISH PATHOLOGY CENTER AT ST. JAMES HOSPITAL.

(IV) & (VI) REPORTS: \$0 EXPENDED - 10/9/2018

(I) GRANTEE: ST. JARLATH'S DIOCESAN TRUST

DIOCESE OF TUAM ARCHBISHOP'S HOUSE, TUAM

CO GALWAY

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - 2017 - \$30,000

(III) PURPOSE OF GRANTS: ENHANCED OUR LADY'S SHRINE AT KNOCK, CO. MAYO.

(IV) & (VI) REPORTS: \$30,000 EXPENDED - 9/17/2018

(I) GRANTEE: ST. MALACHY'S COLLEGE

36 ANTRIM ROAD

BELFAST, BT15 2AE

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: RAISED THE PROFILE OF ACHIEVEMENTS BY STUDENTS

IN SCIENCE AND PROMOTED THE MEDICAL PROFESSION BY REFURBISHING A LIBRARY

CONTAINING A WIDE VARIETY OF HISTORIC BOOKS AND MANUSCRIPTS.

(IV) & (VI) REPORTS: \$6,848 EXPENDED - 10/15/2018

JSA 7E1228 1.000 (I) GRANTEE: STROKESTOWN GAA

FARNBEG

STROKESTOWN

CO. ROSCOMMON

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$156,000

(III) PURPOSE OF GRANTS: FUNDED THE SUPPLY AND INSTALLATION OF

FLOODLIGHTING ON PITCHES WHICH ENABLES PLAYERS TO TRAIN AND PLAY MATCHES

AFTER DARK.

(IV) & (VI) REPORTS: \$156,000 EXPENDED - 8/3/2018

(I) GRANTEE: TEMPLE STREET CHILDREN'S UNIVERSITY HOSPITAL

FUNDRAISING DEPARTMENT TEMPLE STREET

DUBLIN

# IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$9,181

(III) PURPOSE OF GRANTS: PROVIDES FOR THE REFURBISHMENT OF TEMPLE

STREET'S ICU, INCLUDING PAINTING THE WARD AND PARENT AREAS.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/14/2018

(I) GRANTEE: THE IRELAND FUNDS FRANCE

42 RUE VIGNON PARIS, 75009

FRANCE

| Schedule O (Form 990 or 990-EZ) 2017         Pa |     |          |         |      |      |     |            |  |                                | Page <b>2</b> |
|---|-----|----------|---------|------|------|-----|------------|--|--------------------------------|---------------|
| Name of the organization                        | THE | AMERICAN | IRELAND | FUND | (DBA | THE | IRELAND    |  | Employer identification number |               |
| FUNDS AMERICA / THE IRELAND FUNDS)              |     |          |         |      |      |     | 25-1306992 |  |                                |               |

(II) AMOUNT OF GRANTS: 2017 - \$29,897

(III) PURPOSE OF GRANTS: USED TO HARNESS THE POWER OF A GLOBAL

PHILANTHROPIC NETWORK OF FRIENDS OF IRELAND TO PROMOTE AND SUPPORT PEACE,

CULTURE, EDUCATION AND COMMUNITY DEVELOPMENT ACROSS THE ISLAND OF IRELAND

AND AMONG IRISH COMMUNITIES AROUND THE WORLD.

(IV) & (VI) REPORTS: \$29,897 EXPENDED - 10/8/2018

(I) GRANTEE: THE IRELAND FUNDS GREAT BRITAIN

CAN MEZZANINE, 7-14 GREAT DOVER ST

LONDON, SE1 4YR

UNITED KINGDOM

(II) AMOUNT OF GRANTS: 2016 - \$33,248

(III) PURPOSE OF GRANTS: THE GRANT WAS MADE TO SOUTHWARK PENSIONERS TO SUPPORT THE WORK AND SERVICES THEY PROVIDE TO THE OLDER IRISH COMMUNITY, ASSISTING WITH BENEFITS, BEFRIENDING AND HOME VISITS.

(IV) & (VI) REPORTS: \$33,248 EXPENDED - 10/15/2018

(I) GRANTEE: THE MARY ROBINSON CENTRE

VICTORIA HOUSE, BALLINA

CO. MAYO

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$121,808

(III) PURPOSE OF GRANTS: SUPPORTS THE MARY ROBINSON CENTRE, IRELAND'S FIRST PRESIDENTIAL LIBRARY - A MUSEUM, DIGITAL ARCHIVE AND EDUCATIONAL FACILITY.

JSA 7E1228 1.000 (IV) & (VI) REPORTS: \$15,346 EXPENDED - 8/17/2018

(I) GRANTEE: THE MARY ROBINSON CENTRE

VICTORIA HOUSE, BALLINA

CO. MAYO

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$57,754

(III) PURPOSE OF GRANTS: SUPPORTS THE MARY ROBINSON CENTRE, IRELAND'S

FIRST PRESIDENTIAL LIBRARY - A MUSEUM, DIGITAL ARCHIVE AND EDUCATIONAL

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FACILITY.
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(IV) & (VI) REPORTS: \$7,038 EXPENDED - 8/17/2018

EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: THE RORY MCDONAGH TRUST

4 LINCOLN'S INN FIELDS

LONDON, WC2A 3AA

UNITED KINGDOM

(II) AMOUNT OF GRANTS: 2013 - \$736,424

(III) PURPOSE OF GRANTS: PROVIDED DIRECT SUPPORT FOR PROJECTS MEETING THE OBJECTIVES OF OUR CHARITY, AIMING TO ADVANCE EDUCATION FOR YOUNG PEOPLE, PARTICULARLY THOSE FROM DISADVANTAGED BACKGROUNDS.

(IV) & (VI) REPORTS: \$18,142 EXPENDED - 8/2/2018

(I) GRANTEE: THOMAS F. MEAGHER FOUNDATION

34 HENRY STREET, KENMARE KERRY

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$4,000

PATRICK'S DAY FOR STUDENTS AT SECONDARY SCHOOLS TO CELEBRATE A NEW

INCLUSIVE MEANING OF WHAT IT IS TO BE IRISH IN THE 21ST CENTURY.

(IV) & (VI) REPORTS: \$4,000 EXPENDED - 8/17/2018

(I) GRANTEE: THOMAS F. MEAGHER FOUNDATION

34 HENRY STREET, KENMARE

KERRY

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$8,205

(III) PURPOSE OF GRANTS: USED TO PROMOTE PRIDE IN AND RESPECT FOR THE

IRISH FLAG AND ITS MEANING FOR PEACE.

(IV) & (VI) REPORTS: \$8,205 EXPENDED - 8/17/2018

(I) GRANTEE: THOMAS F. MEAGHER FOUNDATION

34 HENRY STREET, KENMARE

KERRY

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$37,500

(III) PURPOSE OF GRANTS: USED TO PROMOTE PRIDE IN AND RESPECT FOR THE

IRISH FLAG AND ITS MEANING FOR PEACE.

(IV) & (VI) REPORTS: \$37,500 EXPENDED - 8/17/2018

(I) GRANTEE: THOMAS F. MEAGHER FOUNDATION

34 HENRY STREET, KENMARE

KERRY

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$11,000

(III) PURPOSE OF GRANTS: USED TO PROMOTE 'FLAG DAY' ON THE EVE OF ST.

PATRICK'S DAY FOR STUDENTS AT SECONDARY SCHOOLS TO CELEBRATE A NEW

INCLUSIVE MEANING OF WHAT IT IS TO BE IRISH IN THE 21ST CENTURY.

(IV) & (VI) REPORTS: \$10,725 EXPENDED - 8/17/2018

(I) GRANTEE: THOOR BALLYLEE DEVELOPMENT LTD.

C/O COURTNEY HOUSE GEORGES STREET, GORT

- CO. GALWAY
- IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$2,800

(III) PURPOSE OF GRANTS: DEVELOPED AND PROMOTED THOOR BALLYLEE AS A CULTURAL DESTINATION AND MEETING PLACE FOR YEATS SCHOLARS, AND PROVIDED A VENUE FOR PERFORMANCES, POETRY, ART AND EDUCATION PROGRAMMES.

(IV) & (VI) REPORTS: \$2,800 EXPENDED - 9/23/2018

(I) GRANTEE: TRINITY FOUNDATION

EAST CHAPEL TRINITY COLLEGE, COLLEGE GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$75,000

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| Name of the organization   | THE                    | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND | Employer identification number |               |
| FUNDS AMERICA /            | THE                    | IRELAND F | UNDS)   |      |      |     |         | 25-1306992                     |               |

(III) PURPOSE OF GRANTS: TO FUND TRINITY BUSINESS SCHOOL.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/30/2018

(I) GRANTEE: TRINITY FOUNDATION

EAST CHAPEL TRINITY COLLEGE, COLLEGE GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$120,000

(III) PURPOSE OF GRANTS: FUNDED CHAIR OF CHEMISTRY AND GENERAL OPERATING

COSTS.

JSA 7E1228 1.000

(IV) & (VI) REPORTS: \$10,619 EXPENDED - 9/25/2018

(I) GRANTEE: TRINITY FOUNDATION

EAST CHAPEL TRINITY COLLEGE, COLLEGE GREEN

DUBLIN

# IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$129,050

(III) PURPOSE OF GRANTS: TO SUPPORT THE TAP PROGRAMME WHICH ENABLES

STUDENTS FROM DISADVANTAGED BACKGROUNDS TO ATTEND UNIVERSITY.

(IV) & (VI) REPORTS: \$30,000 EXPENDED - 9/18/2018

(I) GRANTEE: TRINITY FOUNDATION

EAST CHAPEL TRINITY COLLEGE, COLLEGE GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$54,000

(III) PURPOSE OF GRANTS: THIS GRANT IS TO PRESTIGIOUS SCHOLARSHIP

PROGRAMME - THE GRATTAN SCHOLARS - WITH THE AIM OF ADVANCING HIGH-QUALITY

SOCIAL SCIENCE RESEARCH AND TEACHING IN TRINITY.

(IV) & (VI) REPORTS: \$0 EXPENDED - 9/15/2018

(I) GRANTEE: TRINITY FOUNDATION

EAST CHAPEL TRINITY COLLEGE, COLLEGE GREEN

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$30,000

(III) PURPOSE OF GRANTS: TO FUND THREE PRIZES IN PERPETUITY FOR ZOOLOGY STUDENTS.

(IV) & (VI) REPORTS: \$687 EXPENDED - 8/30/2018

(I) GRANTEE: TRINITY FOUNDATION

EAST CHAPEL TRINITY COLLEGE, COLLEGE GREEN

DUBLIN

### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$245,000

(III) PURPOSE OF GRANTS: WILL ASSIST IN THE CAPITAL CONSTRUCTION OF THE

### E3 PROGAMME.

(IV) & (VI) REPORTS: \$0 EXPENDED - 9/14/2018

(I) GRANTEE: UCD, MICHAEL SMURFIT SCHOOL OF BUSINESS

UNIVERSITY COLLEGE DUBLIN TIERNEY BUILDING BELFIELD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$10,610

(III) PURPOSE OF GRANTS: WILL BE USED TO FUND THE NORMAN C. T. LIU AVIATION SCHOLARSHIP IN THE MICHAEL SMURFIT SCHOOL OF BUSINESS IN SEPTEMBER 2018.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/13/2018

(I) GRANTEE: UCD, MICHAEL SMURFIT SCHOOL OF BUSINESS

UNIVERSITY COLLEGE DUBLIN TIERNEY BUILDING BELFIELD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,637,700

(III) PURPOSE OF GRANTS: WILL BE USED TO SUPPORT THE UCD COLLEGE OF BUSINESS - THE CENTRE FOR THE FUTURE OF LEARNING CAPITAL PROJECT; A STATE-OF-THE ART TEACHING AND LEARNING FACILITY ON BELFIELD CAMPUS. (IV) & (VI) REPORTS: \$1,753,217 EXPENDED - 8/14/2018

(I) GRANTEE: ULSTER UNIVERSITY FOUNDATION

CROMORE ROAD, COLERAINE CO DERRY, BT52 1SA

UK

(II) AMOUNT OF GRANTS: 2017 - \$925

(III) PURPOSE OF GRANTS: SUPPORTS A US STUDENT UNDERTAKING MASTER'S

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|--------------------------------------|-----|-----------|---------|------|------|-----|---------------|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND       | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |               | 25-1306992                     |  |

DEGREE IN APPLIED PEACE AND CONFLICT STUDIES AT ULSTER UNIVERSITY.

(IV) & (VI) REPORTS: \$925 EXPENDED - 8/6/2018

(I) GRANTEE: UNDERGRADUATE AWARDS

TOP FLOOR 65 GREAT STRAND STREET

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$25,000

(III) PURPOSE OF GRANTS: FUNDED UNDERGRADUATE AWARDS 2017 ADMINISTRATIVE

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COSTS.
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JSA 7E1228 1.000

(IV) & (VI) REPORTS: \$25,000 EXPENDED - 10/9/2018

(I) GRANTEE: UNDERGRADUATE AWARDS

TOP FLOOR 65 GREAT STRAND STREET

DUBLIN 1

# IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$189,976

(III) PURPOSE OF GRANTS: SUPPORTED DAILY OPERATIONS OF THE UNDERGRADUATE AWARDS PROGRAMME AND OF COMMUNICATIONS TO EXPAND THE PROGRAMME WORLDWIDE (IV) & (VI) REPORTS: \$189,976 EXPENDED - 10/9/2018

(I) GRANTEE: UNIVERSITY COLLEGE CORK

DEVELOPMENT OFFICE, UNIVERSITY COLLEGE CORK COLLEGE ROAD COUNTY CORK IRELAND (II) AMOUNT OF GRANTS: 2015 - \$11,000

(III) PURPOSE OF GRANTS: SUPPORTED A DIGITIZATION PROJECT FOR GEORGE

BOOLE RECORDS.

(IV) & (VI) REPORTS: \$1,929 EXPENDED - 8/8/2018

## EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: UNIVERSITY COLLEGE CORK

DEVELOPMENT OFFICE, UNIVERSITY COLLEGE CORK COLLEGE ROAD

COUNTY CORK

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$10,000

(III) PURPOSE OF GRANTS: THE GRANT WILL BE UTILIZED IN ENABLING ACCESS,

TO THE DEVELOPMENT IN EDUCATION, TO THOSE DEEMED TO BE IN NEED OF SUCH

SUPPORT.

JSA 7E1228 1.000

(IV) & (VI) REPORTS: \$10,000 EXPENDED - 10/31/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN

EARLSFORT TERRACE

DUBLIN

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$10,000

(III) PURPOSE OF GRANTS: THIS GRANT WILL BE USED TO SUPPORT THE

PRESIDENT'S PRIORITY FUNDS, WHICH INCLUDES SCHOLARSHIPS, LIBRARY BOOKS

AND NON-CAPITAL CAMPUS DEVELOPMENT AND GLOBAL OUTREACH.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/14/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2013 - \$2,710,744

(III) PURPOSE OF GRANTS: USED TO SUPPORT THE NEW UCD ENERGY INSTITUTE: A

TRANSFORMATIONAL RESOURCE FOR ENERGY RESEARCH IN IRELAND AND

INTERNATIONALLY.

(IV) & (VI) REPORTS: \$1,351,542 EXPENDED - 8/16/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$2,771,000

(III) PURPOSE OF GRANTS: WILL SUPPORT THE NEW UCD ENERGY INSTITUTE: A

TRANSFORMATIONAL RESOURCE FOR ENERGY RESEARCH IN IRELAND AND

INTERNATIONALLY.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/16/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$10,600

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|--------------------------------------|-----|-----------|---------|------|------|-----|---------|--------------------------------|--|
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| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         | 25-1306992                     |  |

(III) PURPOSE OF GRANTS: FUNDS WILL BE USED TO KICK START THE FUNDRAISING PROGRAMME FOR THE SUMMER 2019 TOUR

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/16/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD

DUBLIN

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$51,000

(III) PURPOSE OF GRANTS: THIS GRANT WILL BE USED TO SUPPORT BUILDING A MODERN LAW SCHOOL THAT OFFERS AN INCLUSIVE AND DYNAMIC ENVIRONMENT AND SUPPORTS ACADEMIC EXCELLENCE, PROGRAMMES OF EDUCATION AND RESEARCH. (IV) & (VI) REPORTS: \$51,000 EXPENDED - 8/16/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD

DUBLIN

#### IRELAND

JSA 7E1228 1.000

(II) AMOUNT OF GRANTS: 2017 - \$5,375

(III) PURPOSE OF GRANTS: THIS GRANT WILL BE USED TO SUPPORT THE SCHOLARSHIPS WITH UCD BUSINESS CAMPAIGN - EXTENDING OUR EDGES OF EXCELLENCE.

(IV) & (VI) REPORTS: \$5,375 EXPENDED - 8/16/2018

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(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD

DUBLIN

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$20,000

(III) PURPOSE OF GRANTS: THIS GRANT WILL BE USED TO FUND A BURSARY FOR AN

MA STUDENT FROM NORTH AMERICA IN ANGLO-IRISH LITERATURE.

(IV) & (VI) REPORTS: \$20,000 EXPENDED - 8/16/2018

(I) GRANTEE: UNIVERSITY COLLEGE DUBLIN FOUNDATION

ROOM 102, TIERNEY BUILDING BELFIELD

DUBLIN

#### IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$3,500

(III) PURPOSE OF GRANTS: THIS GRANT WILL BE USED TO CELEBRATE FIFTY YEARS

OF ANGLO IRISH LITERATURE AT UCD.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/16/2018

(I) GRANTEE: UNIVERSITY OF LIMERICK FOUNDATION

UNIVERSITY OF LIMERICK

LIMERICK

IRELAND

JSA 7E1228 1.000

(II) AMOUNT OF GRANTS: 2016 - \$18,800

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT THE MUNSTER RUGBY

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     |         | Page <b>2</b>                  |  |
|--------------------------------------|-----|-----------|---------|------|------|-----|---------|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         | 25-1306992                     |  |

ACADEMY SCHOLARSHIPS AND BURSARIES, ASSISTING ACADEMY PLAYERS TO EXCEL IN THEIR SPORT WHILE CONTINUING TO FOCUS ON THEIR ACADEMIC ACHIEVEMENTS. (IV) & (VI) REPORTS: \$18,800 EXPENDED - 8/14/2018

(I) GRANTEE: UNIVERSITY OF LIMERICK FOUNDATION

UNIVERSITY OF LIMERICK

LIMERICK

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$42,347

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT THE FUNDRAISING ACTIVITIES OF THE UL FOUNDATION, RAISING FUNDS FOR PROGRAMMES THAT RUN WITHIN THE UNIVERSITY OF LIMERICK.

(IV) & (VI) REPORTS: \$42,347 EXPENDED - 8/14/2018

(I) GRANTEE: UNIVERSITY OF LIMERICK FOUNDATION

UNIVERSITY OF LIMERICK

LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$14,150

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT THE FOUNDATION OPERATING EXPENSES, WHICH WILL FACILITATE MANY SIGNIFICANT BENEFITS FOR THE UNIVERSITY OF LIMERICK AND THE CAMPUS POPULATION.

(I) GRANTEE: UNIVERSITY OF LIMERICK FOUNDATION

(IV) & (VI) REPORTS: \$14,150 EXPENDED - 8/14/2018

UNIVERSITY OF LIMERICK

LIMERICK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$46,625

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT THE FUNDRAISING

ACTIVITIES OF THE UL FOUNDATION, RAISING FUNDS FOR PROGRAMMES RUN WITHIN

THE UNIVERSITY OF LIMERICK.

(IV) & (VI) REPORTS: \$46,625 EXPENDED - 8/14/2018

(I) GRANTEE: WEST CORK MUSIC LTD

13 GLENGARRIFF ROAD, BANTRY

CORK

IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$5,000

(III) PURPOSE OF GRANTS: GRANT WAS USED TOWARDS ARTISTS COSTS TO MAINTAIN

HIGH LEVEL OF MUSICAL PROGRAMING.

(IV) & (VI) REPORTS: \$5,000 EXPENDED - 9/26/2018

(I) GRANTEE: WEST CORK MUSIC LTD

13 GLENGARRIFF ROAD, BANTRY

CORK

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$1,118

(III) PURPOSE OF GRANTS: ALLOCATED TOWARDS MASTERS OF TRADITION FESTIVAL

PROGRAMMING COSTS WHICH HELPS MAINTAIN HIGH ARTISTIC QUALITY OF

PROGRAMING.

(IV) & (VI) REPORTS: \$1,118 EXPENDED - 9/26/2018

(I) GRANTEE: WEST CORK RURAL TRANSPORT

NO. 5 MAIN STREET

CO. CORK

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$553

(III) PURPOSE OF GRANTS: USED TO TRANSPORT CANCER PATIENTS TO HOSPITAL

FOR RADIOTHERAPY AND CHEMOTHERAPY.

(IV) & (VI) REPORTS: \$553 EXPENDED - 10/10/2018

## EXPENDITURE RESPONSIBILITY STATEMENT

(I) GRANTEE: WEST CORK WOMEN AGAINST VIOLENCE PROJECT

COMMUNITY RESOURCE CENTRE GLENGARRIFF ROAD, BANTRY

COUNTY CORK

## IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$100,000

(III) PURPOSE OF GRANTS: USED TO DELIVER TAILORED AFTERCARE PROGRAMS TO WOMEN WHO HAVE FLED ABUSE AND TO FUND AN EDUCATIONAL AWARENESS PROGRAM FOR TEENAGERS IN LOCAL SCHOOLS TO PROMOTE HEALTHY RELATIONSHIPS. (IV) & (VI) REPORTS: \$10,222 EXPENDED - 10/11/2018

(I) GRANTEE: WEXFORD FESTIVAL OPERA

NATIONAL OPERA HOUSE HIGH STREET

WEXFORD

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$2,740

(III) PURPOSE OF GRANTS: THE GRANT ENABLED WEXFORD FESTIVAL OPERA TO CAST

AND BRING TO IRELAND EMERGING YOUNG SINGERS FROM THE US FOR THE 2017

OPERA FESTIVAL.

(IV) & (VI) REPORTS: \$2,740 EXPENDED - 8/7/2018

(I) GRANTEE: WEXFORD FESTIVAL OPERA

NATIONAL OPERA HOUSE HIGH STREET

WEXFORD

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$14,550

(III) PURPOSE OF GRANTS: THE GRANT ENABLED WEXFORD FESTIVAL OPERA TO CAST

AND BRING TO IRELAND EMERGING YOUNG SINGERS FROM THE US FOR THE 2017

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OPERA FESTIVAL.
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(IV) & (VI) REPORTS: \$14,550 EXPENDED - 8/7/2018

(I) GRANTEE: WHITEGATES COMMUNITY BUSINESS LTD.

WHITEGATES COMPLEX

KILLEAVEY ROAD

NEWRY

CO. DOWN

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2009 - \$5,878

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT A WIDE RANGE OF

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     | Page <b>2</b> |                                |  |
|--------------------------------------|-----|-----------|---------|------|------|-----|---------------|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND       | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |               | 25-1306992                     |  |

COMMUNITY AND SPORTING GROUPS IN THE LOCAL AREA. WHITEGATES ALLOCATED GRANTS TO HELP WITH EVENTS, FUNCTIONS AND TO PURCHASE EQUIPMENT.

(IV) & (VI) REPORTS: 0 EXPENDED -10/31/18

(I) GRANTEE: WHITEGATES COMMUNITY BUSINESS LTD

WHITEGATES COMPLEX

KILLEAVEY ROAD

NEWRY

CO. DOWN

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$5,878

(III) PURPOSE OF GRANTS: THE GRANT WAS USED TO SUPPORT A WIDE RANGE OF COMMUNITY AND SPORTING GROUPS IN THE LOCAL AREA. WHITEGATES ALLOCATED GRANTS TO HELP WITH EVENTS, FUNCTIONS AND TO PURCHASE EQUIPMENT.

(IV) & (VI) REPORTS: \$0 EXPENDED -2018

AWAITING EXPENDITURE REPORT FROM ORGANIZATION.

(I) GRANTEE: WICKLOW HOSPICE FOUNDATION

UNIT 2B ABBEYLANE, ARKLOW

CO. WICKLOW

IRELAND

(II) AMOUNT OF GRANTS: 2014 - \$489,468

(III) PURPOSE OF GRANTS: THE GRANT WILL BE USED TO INCREASE FUNDRAISING

INCOME FOR A NEW HOSPICE FOR THE PEOPLE OF CO WICKLOW.

(IV) & (VI) REPORTS: \$0 EXPENDED - 8/9/2018

(I) GRANTEE: WICKLOW HOSPICE FOUNDATION

UNIT 2B ABBEYLANE, ARKLOW

CO. WICKLOW

IRELAND

(II) AMOUNT OF GRANTS: 2015 - \$86,555

(III) PURPOSE OF GRANTS: THE GRANT IS USED TO INCREASE FUNDRAISING INCOME

FOR A NEW HOSPICE FOR THE PEOPLE OF CO WICKLOW.

(IV) & (VI) REPORTS: \$28,445 EXPENDED - 8/9/2018

(I) GRANTEE: WICKLOW HOSPICE FOUNDATION

UNIT 2B ABBEYLANE, ARKLOW

CO. WICKLOW

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IRELAND
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(II) AMOUNT OF GRANTS: 2016 - \$110,000

(III) PURPOSE OF GRANTS: THE GRANT IS USED TO INCREASE FUNDRAISING INCOME

FOR A NEW HOSPICE FOR THE PEOPLE OF CO WICKLOW.

(IV) & (VI) REPORTS: \$29,624 EXPENDED - 8/9/2018

(I) GRANTEE: WOMEN IN BUSINESS NI

MILLENNIUM HOUSE 2ND FLOOR 17-25 GREAT VICTORIA STREET

BELFAST, ANTRIM BT2 7AQ

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$106,800

JSA 7E1228 1.000

(III) PURPOSE OF GRANTS: THE GRANT WAS AWARDED TO DELIVER THE POWER OF 4

| Schedule O (Form 990 or 990-EZ) 2017 |     |           |         |      |      |     |         | Page 2                         |  |
|--------------------------------------|-----|-----------|---------|------|------|-----|---------|--------------------------------|--|
| Name of the organization             | THE | AMERICAN  | IRELAND | FUND | (DBA | THE | IRELAND | Employer identification number |  |
| FUNDS AMERICA /                      | THE | IRELAND F | UNDS)   |      |      |     |         | 25-1306992                     |  |

PROGRAMME, A FEMALE ENTREPRENEURSHIP PROJECT THAT OFFERS INTENSIVE TRAINING, MENTORING AND SUPPORT TO HELP WOMEN TAKE THEIR IDEA FROM CONCEPT TO LAUNCH.

(IV) & (VI) REPORTS: \$106,800 EXPENDED - 10/10/2018

(I) GRANTEE: WOMEN IN BUSINESS NI

MILLENNIUM HOUSE 2ND FLOOR 17-25 GREAT VICTORIA STREET

BELFAST, ANTRIM BT2 7AQ

NORTHERN IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$13,000

(III) PURPOSE OF GRANTS: THE MONEY WAS USED FOR THE POWER OF 4 PROGRAMME.

PARTICIPANTS (FEMALE STARTUP COMPANIES) PITCH THEIR BUSINESS TO A JUDGING PANEL WHO THEN AWARDED PRIZE MONEY.

(IV) & (VI) REPORTS: \$13,000 EXPENDED - 10/10/2018

(I) GRANTEE: YEATS SOCIETY SLIGO

HYDE BRIDGE

SLIGO

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,050

(III) PURPOSE OF GRANTS: THE INTERNATIONAL SUMMER SCHOOL SUPPORTS

STUDENTS FROM AROUND THE WORLD TO LEARN ABOUT YEATS, SLIGO AND IRELAND.

(IV) & (VI) REPORTS: \$1,050 EXPENDED - 9/22/2018

(I) GRANTEE: YEATS SOCIETY SLIGO

HYDE BRIDGE

SLIGO

## IRELAND

(II) AMOUNT OF GRANTS: 2016 - \$1,000

(III) PURPOSE OF GRANTS: COOLE PARK IS AN IMPORTANT PART OF THE YEATS

STORY AND THE GRANT ALLOWED SUMMER SCHOOL STUDENTS TO TAKE A BUS TO VISIT

AND ENHANCE THEIR STUDIES OF WB YEATS.

(IV) & (VI) REPORTS: \$1,000 EXPENDED - 8/14/2018

(I) GRANTEE: YEATS SOCIETY SLIGO

HYDE BRIDGE

SLIGO

IRELAND

(II) AMOUNT OF GRANTS: 2017 - \$5,000

(III) PURPOSE OF GRANTS: THE GRANT HELPED THE YEATS SOCIETY TO RUN A HIGH QUALITY, WORLD-CLASS ACADEMIC SUMMER SCHOOL, WITH GLOBAL REACH, SUSTAINING THE GREAT TRADITION SET BY THE SCHOOL OVER MANY DECADES. (IV) & (VI) REPORTS: \$5,000 EXPENDED - 9/22/2018

|  |             | ATTACHM    | ENT 1   |
|--|-------------|------------|---------|
| FORM 990, PART III, LINE 4D - OTHER PROGRA | AM SERVICES |            |         |
| DESCRIPTION                                | GRANTS      | EXPENSES   | REVENUE |
| OTHER PROGRAMS                             | 444         | ,986. 444, | 986.    |
| TOTAL                                      | LS 444      | ,986. 444, | 986.    |

| Schedule O (Form 990 or 9 | 90-EZ) 2017                                | Page <b>2</b>                  |  |
|---------------------------|--|--------------------------------|--|
| Name of the organization  | THE AMERICAN IRELAND FUND (DBA THE IRELAND | Employer identification number |  |
| FUNDS AMERICA             | / THE IRELAND FUNDS)                       | 25-1306992                     |  |
| ATTACHMENT 2              |  |                                |  |

## FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

## IRELAND

JSA 7E1228 1.000

UNITED KINGDOM

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT, DE,

DC, FL, GA, IL, KS, KY, ME, MD, MA, MI,

MN, MO, MT, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, TX, VA, WA, WV, WI,

ATTACHMENT 4

# 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

| NAME AND ADDRESS   | DESCRIPTION OF SERVICES | COMPENSATION |
|--|-------------------------|--------------|
| CARLA CAPONE COMPANY, LLC<br>1501 BROADWAY, SUITE 1808<br>NEW YORK, NY 10036 | EVENT PLANNING          | 130,075.     |
| SUSAN O'NEILL AND ASSOCIATES<br>5910 GLOSTER ROAD<br>BETHESDA, MD 20816      | EVENT CONSULTING        | 121,023.     |

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