

**THE AMERICAN CENTER
FOR PHILANTHROPY, INC**

990 Tax Filings – Public Inspection Copy

December 31, 2016



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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)

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE AMERICAN CENTER FOR PHILANTHROPY, INC.		D Employer identification number 41-2010078	
	Doing business as		E Telephone number (507) 321-4027	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 11 BRIDGE SQUARE 200		G Gross receipts \$ 9,839,487.	
	City or town, state or province, country, and ZIP or foreign postal code NORTHFIELD, MN 55057		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
	F Name and address of principal officer: GREGORY A. CARLSON SAME AS C ABOVE		H(c) Group exemption number ▶	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.AMERICANCP.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **2001** **M** State of legal domicile: **MN**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	5
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	5
	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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 3,918,066.	Current Year 3,307,325.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	909,651.	786,727.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,827,717.	4,094,052.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,809,479.	2,974,540.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	173,234.	183,760.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,982,713.	3,158,300.	
19 Revenue less expenses. Subtract line 18 from line 12	1,845,004.	935,752.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 23,140,321.	End of Year 25,346,416.
	21 Total liabilities (Part X, line 26)	0.	62,250.
	22 Net assets or fund balances. Subtract line 21 from line 20	23,140,321.	25,284,166.

Part II Signature Block

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.

Sign Here	▶ Signature of officer		Date
	▶ GREGORY A. CARLSON, PRESIDENT Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name CHRIS HENKE	Preparer's signature	Date
	Firm's name ▶ AKINS HENKE AND COMPANY	Firm's EIN ▶ 46-3220328	Check if self-employed <input type="checkbox"/> PTIN P01008921
	Firm's address ▶ 600 INWOOD AVENUE NORTH, SUITE 160 OAKDALE, MN 55128	Phone no. 651-636-3806	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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: PROMOTE PHILANTHROPY BY PROVIDING EFFECTIVE, EFFICIENT, AND FLEXIBLE MEANS FOR INDIVIDUALS TO CARRY OUT THEIR PERSONAL CHARITABLE OBJECTIVES BY UTILIZING DONOR ADVISED FUNDS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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 \$ 3,040,440. including grants of \$ 2,974,540.) (Revenue \$) THE AMERICAN CENTER FOR PHILANTHROPY PROMOTES PHILANTHROPY BY PROVIDING EFFECTIVE, EFFICIENT, AND FLEXIBLE MEANS FOR INDIVIDUALS TO CARRY OUT THEIR PERSONAL CHARITABLE OBJECTIVES BY UTILIZING DONOR ADVISED FUNDS. THE CENTER MADE 983 GRANTS TO CHARITABLE ORGANIZATIONS DURING 2016.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,040,440.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f 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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	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)?		X
4b	If "Yes," enter the name of the foreign country: 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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		X
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?	X	
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **MN**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **GREGORY A. CARLSON - (507) 321-4027**
11 BRIDGE SQUARE, SUITE 200, NORTHFIELD, MN 55057

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,307,325.				
	g Noncash contributions included in lines 1a-1f: \$		3,119,748.				
	h Total. Add lines 1a-1f		3,307,325.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		611,184.			611,184.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		5,896,600.	24,378.				
		b Less: cost or other basis and sales expenses					
		5,713,560.	31,875.				
	c Gain or (loss)	183,040.	-7,497.				
	d Net gain or (loss)			175,543.		175,543.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a _____							
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			4,094,052.	0.	0.	786,727.	

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,974,540.	2,974,540.		
2 Grants and other assistance to domestic 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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	29,850.	10,903.	18,947.	
b Legal				
c Accounting	12,220.		12,220.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	134,651.	49,182.	85,469.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	1,199.		1,199.	
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.)				
a MISCELLANEOUS	5,840.	5,815.	25.	
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	3,158,300.	3,040,440.	117,860.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	1,854,604.	2	1,467,965.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities	21,253,842.	11	23,878,451.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	31,875.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 34)	23,140,321.	16	25,346,416.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	62,250.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	62,250.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	23,015,175.	27	25,284,166.
	28 Temporarily restricted net assets	125,146.	28	0.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	23,140,321.	33	25,284,166.
	34 Total liabilities and net assets/fund balances	23,140,321.	34	25,346,416.

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,094,052.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,158,300.
3	Revenue less expenses. Subtract line 2 from line 1	3	935,752.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	23,140,321.
5	Net unrealized gains (losses) on investments	5	1,208,093.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	25,284,166.

Part XII Financial Statements and Reporting

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2016)

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2493094.	2838095.	3030366.	3918066.	3307325.	15586946.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2493094.	2838095.	3030366.	3918066.	3307325.	15586946.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2194003.
6 Public support. Subtract line 5 from line 4.						13392943.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	2493094.	2838095.	3030366.	3918066.	3307325.	15586946.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	480,194.	526,033.	570,266.	587,826.	611,184.	2775503.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						18362449.
12 Gross receipts from related activities, etc. (see instructions)					12	5,803.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	72.94 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	65.23 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, 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 for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c 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.		
11a		
11b		
11c		

Section 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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 Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

Section 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 instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a 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 Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	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		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

THE AMERICAN CENTER FOR PHILANTHROPY,

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.)

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2016

Name of the organization

THE AMERICAN CENTER FOR PHILANTHROPY, INC.

Employer identification number

41-2010078

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization THE AMERICAN CENTER FOR PHILANTHROPY, INC.	Employer identification number 41-2010078
---------------------------------------------------------------------------	-----------------------------------------------------

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>99,343.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>69,948.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>100,734.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>80,042.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>92,510.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>105,062.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE AMERICAN CENTER FOR PHILANTHROPY, INC.	Employer identification number 41-2010078
---------------------------------------------------------------------------	-----------------------------------------------------

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>95,517.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ <u>151,070.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ <u>102,480.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ <u>506,488.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ <u>100,578.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE AMERICAN CENTER FOR PHILANTHROPY, INC.	Employer identification number 41-2010078
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Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	5,680 SHARES OF DFA U.S. LARGE COMPANY	\$ 99,343.	12/29/16
2	477 SHARES OF MICROSOFT, 381 SHARES OF DFA US LARGE VALUE II	\$ 39,948.	12/29/16
3	VARIOUS SHARES OF PUBLICLY TRADED SECURITIES	\$ 100,734.	12/06/16
4	468 SHARES OF 3M STOCK	\$ 80,042.	11/09/16
5	925 SHARES OF VANGUARD US LARGE CAP INDEX	\$ 92,510.	12/02/16
6	280 SHARES OF UNITED HEALTHCARE	\$ 35,062.	03/15/16

Name of organization THE AMERICAN CENTER FOR PHILANTHROPY, INC.	Employer identification number 41-2010078
---------------------------------------------------------------------------	-----------------------------------------------------

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7	6,334 SHARES OF SCHWAB FUNDAMENTAL US	\$ 95,517.	12/27/16
8	1,816.52 SHARES OF DFA TAX-MANAGED US SMALL CAP AND 2,215 SHARES OF DFA TAX-MANAGED US SMALL VALUE	\$ 151,070.	12/12/16
9	572 SHARES OF 3M STOCK	\$ 102,480.	07/13/16
10	451 SHARES OF VALSPAR, 8,216 SHARES OF HORMEL FOODS, 1,421 SHARES OF ECOLAB	\$ 506,488.	12/14/16
11	3,833 SHARES OF DFA TAX-MANAGED US LARGE VALUE II	\$ 100,578.	12/21/16
		\$	

Name of organization THE AMERICAN CENTER FOR PHILANTHROPY, INC.	Employer identification number 41-2010078
---------------------------------------------------------------------------	-----------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization THE AMERICAN CENTER FOR PHILANTHROPY, INC. **Employer identification number** 41-2010078

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete 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 end of year	169	
2 Aggregate value of contributions to (during year)	3,286,435.	
3 Aggregate value of grants from (during year)	2,633,540.	
4 Aggregate value at end of year	24,823,894.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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

Schedule D (Form 990) 2016

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 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? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.

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 (including name of security)	(b) Book value	(c) Method of valuation: 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. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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. (Col. (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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	5,302,145.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	1,208,093.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,208,093.
3	Subtract line 2e from line 1	3	4,094,052.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	4,094,052.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	3,158,300.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	3,158,300.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	3,158,300.

Part XIII Supplemental Information.

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

PART X, LINE 2:

U.S. GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE CENTER AND RECOGNIZE A TAX LIABILITY IF THE CENTER HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. THE CENTER HAS ANALYZED THE TAX POSITIONS IT HAS TAKEN, AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2016, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization **THE AMERICAN CENTER FOR PHILANTHROPY,
INC.** Employer identification number
41-2010078

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ADOPTACCLASSROOM.ORG 110 N. 5TH ST, 10TH FLOOR MINNEAPOLIS, MN 55403	65-0828272	501(C)(3)	18,000.	0.			HASTINGS, MN: CLASSROOMS TBD
ARNOLD S. LEONARD CANCER RESEARCH FUND - 715 FLORIDA AVE S, STE 406B - GOLDEN VALLEY, MN 55426	20-2924536	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
ASCENSION CATHOLIC CHURCH 1723 BRYANT AVENUE N. MINNEAPOLIS, MN 55411	41-0705767	501(C)(3)	7,500.	0.			ASCENSION CATHOLIC SCHOOL
ASSUMPTION CHURCH 51 WEST 7TH STREET ST. PAUL, MN 55102	41-0694736	501(C)(3)	9,000.	0.			GENERAL ACCOUNT
AUGUSTANA UNIVERSITY 2001 S. SUMMIT AVE SIOUX FALLS, SD 57197	46-0224588	501(C)(3)	6,000.	0.			JULIE BLOCKHUS LARSON AND DAVID LARSON ENDOWED SCHOLARSHIP FOR NURSING/CAMPAIGN EVENT -
BAPTIST HEALTH RICHMOND FOUNDATION P.O. BOX 1600 RICHMOND, KY 40476	31-1506378	501(C)(3)	6,000.	0.			CAPITAL CAMPAIGN/PATTIE A. CLAY AUXILLARY CHARITY BALL/FOUNDATION FUNDRAISER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **122.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2016)

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

Schedule I (Form 990)

41-2010078

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEREA COLLEGE CPO 2216 EDWARDS BLDG. BEREA, KY 40404	61-0444650	501(C)(3)	12,723.	0.			GENERAL ACCOUNT
BETHEL LUTHERAN CHURCH 1321 NORTH AVENUE NORTHFIELD, MN 55057	41-6049270	501(C)(3)	57,100.	0.			GENERAL FUND, ANNUAL GIVING, DEBT REDUCTION
BLUE HILLS FRIENDS OF SCOUTING 110 W. POPLAR AVE. CAMERON, WI 54822	39-0807227	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
BOY SCOUTS OF AMERICA - NORTHERN STAR COUNCIL - 393 MARSHALL AVE. - ST. PAUL, MN 55102	20-3000282	501(C)(3)	8,250.	0.			GENERAL ACCOUNT
BOYS & GIRLS CLUB OF ROCHESTER 1026 E. CENTER STREET ROCHESTER, MN 55904	41-1945875	501(C)(3)	11,000.	0.			GENERAL ACCOUNT
BRIAR CLIFF UNIVERSITY 3303 REBECCA STREET SIOUX CITY, IA 51104	42-0707124	501(C)(3)	10,500.	0.			FOLLOWING: PRESIDENT'S LEADERSHIP COUNCIL (\$1000), INSPIRE PHYSICAL THERAPISTS (\$3750),
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE., GSIA 213 PITTSBURGH, PA 15213	25-0969449	501(C)(3)	10,000.	0.			TEPPER SCHOOL OF BUSINESS
CATHOLIC CHARITIES 1200 SECOND AVE. S, SUITE 201 MINNEAPOLIS, MN 55403	41-1302487	501(C)(3)	8,000.	0.			GENERAL ACCOUNT
CHANNEL ONE REGIONAL FOOD BANK 131 35TH ST. SE ROCHESTER, MN 55904	41-1379713	501(C)(3)	22,500.	0.			GENERAL ACCOUNT

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CHRIST OUR LIGHT CATHOLIC PARISH 804 S. SEVENTH AVE. PRINCETON, MN 55371	27-2606585	501(C)(3)	8,000.	0.			CATHOLIC RELIEF SERVICES-- 1,000; CATHOLIC CHARITIES--1,000;
CHRIST UNITED METHODIST CHURCH 400 5TH AVE SW ROCHESTER, MN 55902	41-0693980	501(C)(3)	9,000.	0.			GENERAL ACCOUNT
CHURCH OF ST. ODILIA 3495 VICTORIA STREET NORTH SHOREVIEW, MN 55126	41-0837655	501(C)(3)	19,000.	0.			GENERAL ACCOUNT/CAPITAL CAMPAIGN
CITY OF HASTINGS 101 4TH STREET EAST HASTINGS, MN 55033	41-6005220	501(C)(3)	326,804.	0.			CINEMA SYSTEM/ROTARY PAVILION
CITY OF WABASHA 900 HIAWATHA DR. E. WABASHA, MN 55981	41-1810909	501(C)(3)	35,000.	0.			REFURBISHING OF BRICK APRONS AND RETAINING WALL AT HERITAGE PARK
COMMUNITY ACTION CENTER 1651 JEFFERSON PKWY, STE HS200 NORTHFIELD, MN 55057	41-0970984	501(C)(3)	11,800.	0.			NORTHFIELD WORKS
CRU P.O. BOX 628222 ORLANDO, FL 32862	95-6006173	501(C)(3)	5,250.	0.			GENERAL ACCOUNT
CUYUNA LAKES MOUNTAIN BIKE CREW P.O. BOX 162 DEERWOOD, MN 56444	37-1706581	501(C)(3)	50,000.	0.			GENERAL ACCOUNT
DOCTORS WITHOUT BORDERS 333 SEVENTH AVE., 2ND FLOOR NEW YORK, NY 10001	13-3433452	501(C)(3)	9,550.	0.			GENERAL ACCOUNT

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DUNWOODY COLLEGE OF TECHNOLOGY 818 DUNWOODY BLVD. MINNEAPOLIS, MN 55403	41-0693856	501(C)(3)	11,000.	0.			GENERAL ACCOUNT
EAGLE BROOK CHURCH 7015 20TH AVENUE CENTERVILLE, MN 55038	41-0872884	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
EDINA COMMUNITY LUTHERAN CHURCH 4113 W. 54TH STREET EDINA, MN 55424	41-0836936	501(C)(3)	27,000.	0.			GENERAL ACCOUNT/CAPITAL CAMPAIGN
EMMAUS BAPTIST CHURCH 712 LINDEN STREET NORTH NORTHFIELD, MN 55057	41-1435680	501(C)(3)	12,000.	0.			GENERAL ACCOUNT
FAIRVIEW FOUNDATION 2344 ENERGY PARK DRIVE ST. PAUL, MN 55108	41-1573810	501(C)(3)	14,000.	0.			MS ACHIEVEMENT CENTER
FIRST BAPTIST CHURCH 1108 WESTWOOD DRIVE FARIBAULT, MN 55021	41-6028643	501(C)(3)	23,600.	0.			GENERAL ACCOUNT
FIRST CONGREGATIONAL CHURCH OF ANOKA - 1923 THIRD AVE. S. - ANOKA, MN 55303	41-0959634	501(C)(3)	8,000.	0.			GENERAL ACCOUNT
FIRST COVENANT CHURCH 2302 TWIN BLUFF RD RED WING, MN 55066	51-0139925	501(C)(3)	5,700.	0.			FIRST COVENANT PARKING LOT - ONE-TIME GIFT/BUILDING FUND
FOOTHILLS FOOD BANK P.O. BOX 715 CAREFREE, AZ 85377	86-0619725	501(C)(3)	46,000.	0.			GENERAL ACCOUNT

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FORDHAM UNIVERSITY 45 COLUMBUS AVE, 8TH FLOOR BRONX, NY 10023	13-1740451	501(C)(3)	10,000.	0.			FORDHAM FUND & GABELLI SCHOOL OF BUSINESS (UNDERGRADUATE FUND)
FRIENDS OF THE ST. CROIX COUNTY FAIRGROUNDS - 1468 85TH STREET - NEW RICHMOND, WI 54017	27-0506251	501(C)(3)	20,000.	0.			PURCHASE OF LED DIGITAL SIGN FOR FAIRGROUNDS
FRIENDS OF THE WILLOW RIVER AND KINNICKINNIC STATE PARKS - 1034 COUNTY ROAD A - HUDSON, WI 54016	39-1667467	501(C)(3)	16,636.	0.			THE LEANN C. TOLK SCHOLARSHIP FUND
GENERAL CONFERENCE OF SEVENTH DAY ADVENTIST - 12501 OLD COLUMBIA PIKE - SILVER SPRINGS, MD 20904	52-0643036	501(C)(3)	11,500.	0.			ECD, FOR PROPOSED WESTERN ETHIOPIAN UNION OFFICE
GRACE COMMUNITY BIBLE CHURCH 16075 HAWTHORN PATH LAKEVILLE, MN 55044	80-0387805	501(C)(3)	12,000.	0.			TEAM HORNIST (\$6,000) AND THE GENERAL FUND (\$6,000)
GRAND CENTRAL CHARITIES DBA FIRST STEP INITIATIVE - 4940 W. 77TH STREET, STE 30 - EDINA, MN 55435	20-5147038	501(C)(3)	20,000.	0.			GENERAL ACCOUNT
GREATER MINNEAPOLIS CRISIS NURSERY 4544 4TH AVE S MINNEAPOLIS, MN 55419	41-1379021	501(C)(3)	25,500.	0.			MULTIPLYING EFFECT CAMPAIGN
GREEN LAKE LUTHERAN MINISTRIES 9916 LAKE AVENUE SOUTH SPICER, MN 56288	41-0726172	501(C)(3)	20,000.	0.			SHORES OF ST. ANDREW SITE DIRECTOR
GREENPEACE FUND 702 H STREET NW, SUITE 300 WASHINGTON, DC 20001	95-3313195	501(C)(3)	12,773.	0.			GENERAL ACCOUNT

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GUARDIAN ANGELS CHURCH 217 2ND STREET WEST CHASKA, MN 55318	41-0785167	501(C)(3)	9,000.	0.			2016 CALENDAR WEEKLY GIVING
GUSTAVUS ADOLPHUS LUTHERAN CHURCH 1669 ARCADE STREET ST. PAUL, MN 55106	41-0711504	501(C)(3)	12,000.	0.			GENERAL FUND (\$3,000), GATEWAY FUND (\$1,500), AND THE LIGHTING RETROFIT FUND (\$3,000)
HASTINGS FAMILY SERVICE 301 2ND STREET EAST HASTINGS, MN 55033	23-7083534	501(C)(3)	33,917.	0.			FOOD SHELF
HASTINGS ISD #200 1000 W. 11TH STREET HASTINGS, MN 55033	41-6000810	501(C)(3)	97,550.	0.			ATTACHED LIST
HASTINGS PRESCOTT AREA ARTS COUNCIL - P.O. BOX 370 - HASTINGS, MN 55033	41-1758837	501(C)(3)	22,500.	0.			CONCERT
HASTINGS UNITED METHODIST CHURCH 615 W. 15TH STREET HASTINGS, MN 55033	43-6111835	501(C)(3)	33,350.	0.			GENERAL FUND (50%), YOUTH (25%), CONFERENCE MISSIONS (25%)GENERAL FUND (50%), YOUTH (35%),
HASTINGS YMCA 85 PLEASANT DRIVE HASTINGS, MN 55033	45-2563299	501(C)(3)	8,500.	0.			CAPITAL CAMPAIGN
HAZEL PARK CONGREGATIONAL CHURCH 1831 E. MINNEHAHA AVENUE ST. PAUL, MN 55119	41-0832887	501(C)(3)	18,000.	0.			GENERAL ACCOUNT
HEALTHFINDERS COLLABORATIVE P.O. BOX 731 NORTHFIELD, MN 55057	20-1805262	501(C)(3)	6,000.	0.			GALA SPONSORSHIP/ANNUAL FUND

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HOLY FAMILY CATHOLIC HS 8108 KOCHIA LANE VICTORIA, MN 55386	41-1848970	501(C)(3)	8,740.	0.			2016 HF SPIRIT OF FIRE DONATION PORTION/HOLY FAMILY FUND/CAPITAL CAMPAIGN
HOUSE OF HOPE PRESBYTERIAN CHURCH 797 SUMMIT AVENUE ST. PAUL, MN 55105	41-0694740	501(C)(3)	6,000.	0.			GENERAL FUND (\$4000), GRIEF OUTREACH (\$1000) AND CAPITAL CAMPAIGN (\$1000)
INVER HILLS COMMUNITY COLLEGE FOUNDATION - 2500 80TH ST. E. - INVER GROVE HEIGHTS, MN 55076	41-1410445	501(C)(3)	7,500.	0.			GEORGE AND RUTH DOFFING CHARITABLE FUND SCHOLARSHIPS
LAKE WAPOGASSET LUTHERAN BIBLE CAMP - 738 HICKORY PT. - LAKE AMERY, WI 54001	39-0973783	501(C)(3)	10,100.	0.			FOR THE RENEWAL CAMPAIGN
LUTHER COLLEGE 700 COLLEGE DRIVE DECORAH, IA 52101	42-0680466	501(C)(3)	12,000.	0.			AREAS LISTED ON THE ATTACHED
LUTHER SEMINARY 2481 COMO AVENUE ST. PAUL, MN 55108	41-1425961	501(C)(3)	13,500.	0.			LEADERSHIP CIRCLE (\$10,000) AND SCHOLARSHIP FUND (\$1,000)
LUTHERAN WORLD RELIEF P.O. BOX 17061 BALTIMORE, MD 21297	13-2574963	501(C)(3)	6,000.	0.			GENERAL ACCOUNT
MACALESTER COLLEGE 1600 GRAND AVENUE ST. PAUL, MN 55105	41-0693962	501(C)(3)	83,613.	0.			DOROTHY DODGE SCHOLARSHIP FUND
MAGNUM CHORUM 3800 W. 32ND MINNEAPOLIS, MN 55416	41-1729332	501(C)(3)	10,500.	0.			GENERAL ACCOUNT

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MAYO CLINIC 200 FIRST STREET SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	11,000.	0.			GENERAL ACCOUNT
MINNEAPOLIS PATHWAYS 3115 HENNEPIN AVENUE SOUTH MINNEAPOLIS, MN 55408	41-1628884	501(C)(3)	10,000.	0.			GENERAL FUND
MINNESOTA MUSEUM OF AMERICAN ART 141 E. 4TH ST., STE 101 ST. PAUL, MN 55101	41-0726138	501(C)(3)	7,000.	0.			GENERAL ACCOUNT/IMAGINE FUND
MINNESOTA OPERA 620 N. FIRST STREET MINNEAPOLIS, MN 55401	41-0946789	501(C)(3)	15,450.	0.			GENERAL ACCOUNT
MINNESOTA ORCHESTRAL ASSOCIATION 1111 NICOLLET MALL MINNEAPOLIS, MN 55403	41-0693875	501(C)(3)	8,000.	0.			GENERAL ACCOUNT
MOUNDS PARK ACADEMY 2051 LARPEUR AVENUE EAST ST. PAUL, MN 55109	41-1420915	501(C)(3)	6,500.	0.			ANNUAL FUND/GENERAL ACCOUNT
MT. OLIVET LUTHERAN CHURCH 5025 KNOX AVE. S. MINNEAPOLIS, MN 55419	41-0773766	501(C)(3)	8,600.	0.			2017 STEWARDSHIP CONTRIBUTION/GENERAL ACCOUNT
NATIONAL EAGLE CENTER 50 PEMBROKE AVENUE WABASHA, MN 55981	41-1817466	501(C)(3)	30,000.	0.			ACQUISITION AND TRAINING OF TWO EAGLE AMBASSADORS
NORTHFIELD AREA YMCA 1501 HONEYLOCUST DRIVE NORTHFIELD, MN 55057	59-3817686	501(C)(3)	21,618.	0.			JINGLE BELL RUN 2015

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NORTHFIELD COMMUNITY ACTION CENTER 1651 JEFFERSON PKWY, HS200 NORTHFIELD, MN 55057	41-0970984	501(C)(3)	6,200.	0.			GENERAL ACCOUNT/CHRISTMAS SHARING PROJECT/SEEDS FOOD
NORTHFIELD UNITED METHODIST CHURCH 1401 MAPLE STREET NORTHFIELD, MN 55057	03-6009781	501(C)(3)	6,860.	0.			JUBILEE CAPITAL CAMPAIGN/GENERAL ACCOUNT
NORTHFIELD UNITED WAY 1651 JEFFERSON PARKWAY NORTHFIELD, MN 55057	41-6025711	501(C)(3)	7,420.	0.			GENERAL ACCOUNT
NORWEGIAN-AMERICAN HISTORICAL ASSOCIATION - 1510 ST. OLAF AVENUE - NORTHFIELD, MN 55057	41-6038548	501(C)(3)	5,250.	0.			CLIMATE CONTROL PROJECT/GENERAL ACCOUNT
NPH USA 134 N. LASALLE ST., SUITE 500 CHICAGO, IL 60602	65-1229309	501(C)(3)	11,000.	0.			DEDICATED TO UPPER MIDWEST OFFICE FOR THEM TO DIRECT TO HAITI/FR. RICK POST HURRICANE
OSHKOSH AREA COMMUNITY FOUNDATION (OACF) - 230 OHIO STREET, SUITE 100 - OSHKOSH, WI 54901	39-2034571	501(C)(3)	10,000.	0.			OSHKOSH POLICE DEPT; ANALYST'S NOTEBOOK SOFTWARE
PARK NICOLLET FOUNDATION 6500 EXCELSIOR BLVD. ST. LOUIS PARK, MN 55426	23-7346465	501(C)(3)	7,000.	0.			LOVE & LEGACY CANCER CENTER EXPANSION FOR THE BUD AND ELLEN GREEN ROOM
PAX CHRISTI CATHOLIC CHURCH 4135 18TH AVENUE NW ROCHESTER, MN 55901	41-1532400	501(C)(3)	13,000.	0.			GENERAL ACCOUNT
PROJECT HEALING WATERS FLY FISHING 12844 GLORIA DRIVE FISHERS, IN 46037	61-1518154	501(C)(3)	16,636.	0.			ST. CLOUD AND MINNEAPOLIS PHWFF CHAPTERS

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RICE UNIVERSITY 6100 MAIN STREET HOUSTON, TX 77251	74-1109620	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
SAINT PATRICK PARISH 1500 VINE STREET HUDSON, WI 54016	39-0806399	501(C)(3)	86,500.	0.			CHURCH STORAGE BUILDING/2016 ANNUAL CONTRIBUTION
SAINT PAUL AREA SYNOD 105 W. UNIVERSITY AVENUE ST. PAUL, MN 55103	36-3514252	501(C)(3)	12,008.	0.			BEGA KWA BEGA HARRIS ACCOUNT/GENERAL ACCOUNT
SALVATION ARMY - MN 2445 PRIOR AVENUE NORTH ROSEVILLE, MN 55113	41-0698597	501(C)(3)	14,500.	0.			GENERAL ACCOUNT
SAVE THE NORTHFIELD DEPOT 712 4TH STREET EAST NORTHFIELD, MN 55057	27-2081273	501(C)(3)	5,800.	0.			GENERAL ACCOUNT
SECOND HARVEST HEARTLAND 1140 GERVAIS AVENUE ST. PAUL, MN 55109	23-7417654	501(C)(3)	12,500.	0.			GENERAL ACCOUNT
SHEPHERD OF THE VALLEY 14107 HUDSON ROAD SOUTH AFTON, MN 55001	41-1314182	501(C)(3)	5,500.	0.			GENERAL ACCOUNT
SIOUX FALLS AREA COMMUNITY FOUNDATION - 200 N. CHERAPA PLACE - SIOUX FALLS, SD 57103	31-1748533	501(C)(3)	6,000.	0.			FALLS COMMUNITY HEALTH MEDICATION ASSISTANCE FUND
SISTERS OF ST. LOUIS LEAGUE 22300 MULHOLLAND DRIVE WOODLAND HILLS, CA 91364	95-3074013	501(C)(3)	20,000.	0.			GENERAL ACCOUNT

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SKY KIDS INCORPORATED 14988 N. 78TH WAY, STE 106 SCOTTSDALE, AZ 85260	45-3177806	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
SMILE TRAIN 41 MADISON AVENUE, 28TH FLOOR NEW YORK, NY 10010	13-3661416	501(C)(3)	7,000.	0.			GENERAL ACCOUNT/AREAS MOST NEEDED
SOUTH DAKOTA STATE UNIVERSITY FOUNDATION - 815 MEDARY AVE., SUITE 301 - BROOKINGS, SD 57007	46-0273801	501(C)(3)	25,454.	0.			LEANN C. TOLK SCHOLARSHIP
SOUTHWEST MINNESOTA STATE UNIVERSITY - 1501 STATE STREET, FOUNDERS HALL #220 - MARSHALL, MN 56258	23-7108470	501(C)(3)	24,954.	0.			THE LEANN C. TOLK SCHOLARSHIP FUND
ST. DOMINIC CHURCH 104 LINDEN STREET NORTH NORTHFIELD, MN 55057	41-0711501	501(C)(3)	8,000.	0.			GENERAL ACCOUNT
ST. DOMINIC SCHOOL 216 SPRING STREET NORTHFIELD, MN 55057	41-0711501	501(C)(3)	18,000.	0.			GENERAL ACCOUNT
ST. ELIZABETH'S COMMUNITY DEVELOPMENT FOUNDATION - 1200 GRANT BLVD. W. - WABASHA, MN 55981	41-1453829	501(C)(3)	94,171.	0.			FOLLOWING: SCHOLARSHIPS (\$45,000) AND MAMMOGRAPHY TECHNOLOGY (\$48,171)/GENERAL ACCOUNT
ST. FELIX SCHOOL 130 E. 3RD STREET WABASHA, MN 55981	41-0695538	501(C)(3)	10,000.	0.			THE PURCHASE OF ENERGY EFFICIENT SOLAR SHADES FOR THE CLASSROOMS
ST. JOHN'S LUTHERAN 500 THIRD STREET WEST NORTHFIELD, MN 55057	41-1636168	501(C)(3)	10,975.	0.			FOLLOWING: REGULAR OFFERING (\$1560) AND JULY 3, 2016 RADIO FUND/GENERAL

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ST. JOHN'S UNIVERSITY P.O. BOX 7222 COLLEGEVILLE, MN 56321	41-0693973	501(C)(3)	27,300.	0.			MEN'S SOCCER PROGRAM/ANNUAL FUND/GAGLIARDI FIELD
ST. MARY'S OF THE LAKE CATHOLIC CHURCH - 4690 BALD EAGLE AVENUE - WHITE BEAR LAKE, MN 55110	41-0789357	501(C)(3)	12,000.	0.			BUILDING RENOVATION AND HAITI RELIEF EFFORT/CAPITAL CAMPAIGN/PARISH DONATION
ST. OLAF COLLEGE 1520 ST. OLAF AVENUE NORTHFIELD, MN 55057	41-0693979	501(C)(3)	18,400.	0.			NURSING PROGRAM/THE ST. OLAF FUND/GT HARSTAD SCHOLARSHIP IN MEMORY OF MEL GEORGE/GENERAL
ST. PHILIPS LUTHERAN CHURCH 1401 15TH STREET WEST HASTINGS, MN 55033	41-0972019	501(C)(3)	7,500.	0.			CAPITAL INVESTMENT FUND/GENERAL FUND
ST. STEPHEN LUTHERAN CHURCH 8400 FRANCE AVENUE SOUTH BLOOMINGTON, MN 55431	41-0838964	501(C)(3)	7,300.	0.			GENERAL ACCOUNT
TECHNOSERVE, INC. 1120 19TH STREET NW, 8TH FLOOR WASHINGTON, DC 20036	13-2626135	501(C)(3)	12,773.	0.			GENERAL ACCOUNT
TRINITY LUTHERAN CHURCH 601 2ND STREET EAST WACONIA, MN 55387	41-0713894	501(C)(3)	14,600.	0.			ROOF/SOUND PROJECT, GENERAL FUND
TWIN CITIES CATHOLIC CHORALE P.O. BOX 4234 ST. PAUL, MN 55104	14-1975264	501(C)(3)	8,000.	0.			MUSIC SPONSOR
TWIN CITIES HABITAT FOR HUMANITY 1954 UNIVERSITY AVE W, STE 16 ST. PAUL, MN 55104	36-3363171	501(C)(3)	17,250.	0.			3M CARES

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UNITED METHODIST CHURCH 615 W. 15TH STREET HASTINGS, MN 55033	43-6111835	501(C)(3)	6,000.	0.			CAMP SCHOLARSHIPS- \$100, YOUTH SOUND SYSTEM- \$800, RED BIRD MISSION- \$400, ZOE MINISTRIES- \$200,
UNITED METHODIST CHURCH - NORTHFIELD - 1401 S. MAPLE STREET - NORTHFIELD, MN 55057	41-0729976	501(C)(3)	10,000.	0.			GENERAL FUND
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET SE, STE 500 MINNEAPOLIS, MN 55455	41-6042488	501(C)(3)	12,800.	0.			LAW SCHOOL/HUMAN RIGHTS/DR. VERN CARDWELL SCHOLARSHIP (80802)/FRIENDS OF THE
UNIVERSITY OF NOTRE DAME 1251 N. EDDY STREET, SUITE 300 SOUTH BEND, IN 46617	35-0868188	501(C)(3)	20,250.	0.			ENDOWMENT FOR EXCELLENCE FOR ATHLETIC MANAGERS
UNIVERSITY OF SOUTH DAKOTA FOUNDATION - P.O. BOX 5555, 1110 N. DAKOTA ST. - VERMILLION, SD 57069	46-6018891	501(C)(3)	15,000.	0.			TRUMAN AND BEVERLY SCHWARTZ DISTINGUISHED AWARD ENDOWMENT
UNIVERSITY OF SOUTHERN CALIFORNIA MARSHALL SCHOOL OF BUSINESS - 3551 TROUSDALE PKWY - LOS ANGELES, CA 90089	95-1642394	501(C)(3)	10,000.	0.			DEAN'S FUND
UNIVERSITY OF THE CUMBERLANDS 6191 COLLEGE STATION DR. WILLIAMSBURG, KY 40769	61-0470593	501(C)(3)	12,773.	0.			GENERAL ACCOUNT
UNIVERSITY OF WISCONSIN FOUNDATION US BANK LOCKBOX #78807 MILWAUKEE, WI 53278	39-0743975	501(C)(3)	5,500.	0.			UW SCHOOL OF VETERINARY MEDICINE (\$250) AND WOMEN'S ROWING (\$250)/L&S DEAN
UNIVERSITY OF WISCONSIN RIVER FALLS - 410 S. 3RD STREET - RIVER FALLS, WI 54022	39-6064630	501(C)(3)	6,000.	0.			MICKEY MCDERMOTT SCHOLARSHIP FUND

Schedule I (Form 990)

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

Schedule I (Form 990)

41-2010078

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US FRIENDS OF THE DAVID SHELDRIK WILDLIFE TRUST - 25283 CABOT ROAD - LAGUNA HILLS, CA 92653	30-0224549	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
WINGS P.O. BOX 845 NORTHFIELD, MN 55057	41-6031510	501(C)(3)	5,350.	0.			GENERAL ACCOUNT/ANNUAL FUND/ENDOWMENT
W-K PUBLIC SCHOOL 2113 HIAWATHA DRIVE EAST WABASHA, MN 55981	41-6004412	501(C)(3)	10,000.	0.			WABASHA-KELLOGG HIGH SCHOOL'S INDUSTRIAL TECHNOLOGY DEPARTMENT
WOLF RIDGE ENVIRONMENTAL LEARNING CENTER - 6282 CRANBERRY ROAD - FINLAND, MN 55603	41-1251705	501(C)(3)	10,000.	0.			GENERAL ACCOUNT
WORLD MISSION PRAYER LEAGUE 232 CLIFTON AVENUE MINNEAPOLIS, MN 55403	41-0786986	501(C)(3)	10,000.	0.			EKKA FAMILY SUPPORT ACCOUNT
WOUNDED WARRIOR PROJECT P.O. BOX 758517 TOPEKA, KS 66675	20-2370934	501(C)(3)	5,500.	0.			GENERAL ACCOUNT
YOUNG LIFE - HASTINGS 204 SIBLEY STREET HASTINGS, MN 55033	84-0385934	501(C)(3)	14,750.	0.			GENERAL ACCOUNT
ZUMBRO LUTHERAN CHURCH 624 3RD AVE SW ROCHESTER, MN 55902	41-0718374	501(C)(3)	13,750.	0.			GENERAL ACCOUNT/HELPING LAMBI DELIVER FUND

Schedule I (Form 990)

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

USE OF FUNDS BY CHARITIES IS NOT MONITORED BY THE ORGANIZATION.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
CARLSON CAPITAL MANAGEMENT	A BOARD MEMBER OF A	164,501.	THE ORGANIZ		X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CARLSON CAPITAL MANAGEMENT

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

A BOARD MEMBER OF ACP IS ALSO A SHAREHOLDER OF CARLSON CAPITAL MANAGEMENT.

(D) DESCRIPTION OF TRANSACTION: THE ORGANIZATION PAID CARLSON CAPITAL MANAGEMENT FOR INVESTMENT ADVISORY SERVICES AND ADMINISTRATIVE SERVICES.

GREGORY CARLSON IS MORE THAN 35% OWNER OF CARLSON CAPITAL MANAGEMENT.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **THE AMERICAN CENTER FOR PHILANTHROPY, INC.** Employer identification number **41-2010078**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
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	X	137	3,119,748.	QUOTED STOCK PRICE
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 organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2016)

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.

SCHEDULE M, LINE 32B:

THE CENTER USES A THIRD PARTY REAL ESTATE BROKER TO HANDLE THE SALE OF ALL REAL ESTATE DONATIONS RECIEVED BY THE CENTER.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

THE AMERICAN CENTER FOR PHILANTHROPY,
INC.

Employer identification number
41-2010078

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROMOTE PHILANTHROPY BY PROVIDING EFFECTIVE, EFFICIENT, AND FLEXIBLE
MEANS FOR INDIVIDUALS TO CARRY OUT THEIR PERSONAL CHARITABLE OBJECTIVES
BY UTILIZING DONOR ADVISED FUNDS.

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

GREGORY A CARLSON AND MATTHEW RICH HAVE A BUSINESS RELATIONSHIP.

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

A DRAFT OF THE FORM 990 IS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE. A
COPY OF THE RETURN IS THEN SENT TO THE ENTIRE BOARD PRIOR TO BEING FILED.

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

COMPLIANCE WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS REVIEWED
ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION DOES NOT HAVE ANY PAID EMPLOYEES.

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

THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.