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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

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-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Fo	r calend	dar year 2016 or tax year beginning ,	and ending						
	lame of fou				A Empl	oyer identification number			
		MIS FOUNDATION LTD							
		JULIA V. PARRY	· · · · · ·			-1728878			
		d street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		hone number (see instruction	- T		
		ONEY POINT ROAD In state or province, country, and ZIP or foreign postal code	L		86	0-442-6987	<u> </u>		
_	MYST	` ' '			C If exe	mption application is pending,	check here		
			rn of a former public cl		D 4 F	orovon oronovnotvono obselvbo			
٥	CHECK	Final return Amended	· ·	larity	D 1 Foreign organizations, check here				
		Address change Name cha				Proreign organizations meeting the 85% test, check here and attach computation			
						on test, ancer here and attack	Computation		
H		type of organization X Section 501(c)(3) exempt private			-	ate foundation status was terr	ninated under		
\Box			le private foundation		sectio	on 507(b)(1)(A), check here			
		rket value of all assets at J Accounting method	X Cash Acc	rual		foundation is in a 60-month te	. 1		
	-	ear (from Part II, col. (c), ▶ \$ 774,259 (Part I, column (d) must	6 b b X		under	section 507(b)(1)(B), check h	lete ,		
	ine 16)						(d) Disbursements		
E	Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net	for charitable		
		the amounts in column (a) (see instructions))	books	Incom	e 	income	purposes (cash basis only)		
~~	1	Contributions, gifts, grants, etc , received (attach schedule)	94,514						
	2	Check ► if the foundation is not required to attach Sch_B							
MAY	3	Interest on savings and temporary cash investments	26		26				
2	4	Dividends and interest from securities	8,564		8,564				
	5a	Gross rents			·				
TI a	b	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of assets not on line 10							
SCANNED Revenue	Ь	Gross sales price for all assets on line 6a							
78	7	Capital gain net income (from Part IV, line 2)			0				
	8	Net short-term capital gain	+			0			
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	103,104		8,590	0			
Š	13	Compensation of officers, directors, trustees, etc	0						
penses	14	Other employee salaries and wages							
ē	15	Pension plans, employee benefits				RECE	IVFD		
X	16а	Legal fees (attach schedule)	7 (10				2 32		
စ	b	Accounting fees (attach schedule) STMT 1	1,619		810	(6)	10,809 - 10,809		
Operating and Administrative	C	Other professional fees (attach schedule)				MAY I	7 2017 6		
ř	17	Interest	116				SE		
ī.	18	Taxes (attach schedule) (see instructions) STMT 2	116			OGDE			
<u>=</u>	19	Depreciation (attach schedule) and depletion				L GGDL	0. 01		
Ad	20	Occupancy Travel conferences and meetings							
þ	21	Travel, conferences, and meetings Printing and publications					· · · · · · · · · · · · · · · · · · ·		
<u> </u>	22 23	Other expenses (att sch) STMT 3	71		-		71		
ing	24	Total operating and administrative expenses.	/ 1				/1		
rat		Add lines 13 through 23	1,806		810	o	880		
Del	- 25	Contributions, gifts, grants paid	32,000		210	<u> </u>	32,000		
Ō	26	Total expenses and disbursements. Add lines 24 and 25	33,806		810	0	32,880		
_	27	Subtract line 26 from line 12	33,000		210	<u> </u>	32,660		
	a	Excess of revenue over expenses and disbursements	69,298						
	b	Net investment income (if negative, enter -0-)	05,250		7,780				
	C	Adjusted net income (if negative, enter -0-)			. ,	0			
	, , , , , , , , , , , , , , , , , , , 								

Fart	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash – non-interest-bearing	304,601	220,892	220,892
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
İ	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
ŀ	disqualified persons (attach schedule) (see			
	instructions)			
7	Other notes and loans receivable (att. schedule)			
ŀ	Less allowance for doubtful accounts ▶ 0			
ম ৪	Inventories for sale or use			
Assets 6 8	Prepaid expenses and deferred charges			
४ 10a	Investments – U S and state government obligations (attach schedule)			
b	Investments – corporate stock (attach schedule) SEE STMT 4	229,462	382,469	553,367
С	Investments – corporate bonds (attach schedule)			
11	Investments – land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach sch.) ▶			
12	Investments – mortgage loans			
13	Investments – other (attach schedule)			
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch) ▶			
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers – see the			
1	instructions Also, see page 1, item l)	534,063	603,361	774,259
17	Accounts payable and accrued expenses			
18	Grants payable			
Liabilities 02 19 20 21 20 20 20 20 20 20 20 20 20 20 20 20 20	Deferred revenue			
≝ 20	Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u> 21	Mortgages and other notes payable (attach schedule)			
그 22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here			
24	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
<u>rg</u> 25	Temporarily restricted			
Net Assets or Fund Balar 25 26 27 28 30 31 30 31	Permanently restricted			
Š	Foundations that do not follow SFAS 117, check here			
빈	and complete lines 27 through 31.	Ì		
O 27	Capital stock, trust principal, or current funds	738,762	833,276	
28	Paid-in or capital surplus, or land, bldg , and equipment fund			
8 29	Retained earnings, accumulated income, endowment, or other funds	-204,699	-229,915	
행 30	Total net assets or fund balances (see instructions)	534,063	603,361	
Z 31	Total liabilities and net assets/fund balances (see			
	instructions)	534,063	603,361	
Part	II Analysis of Changes in Net Assets or Fund Balances			
1 Tota	net assets or fund balances at beginning of year - Part II, column (a), line 30 (mus	st agree with		
end-	of-year figure reported on prior year's return)		1	534,063
2 Ente	r amount from Part I, line 27a		2	69,298
3 Othe	r increases not included in line 2 (itemize) ▶		3	
4 Add	lines 1, 2, and 3		4	603,361
	eases not included in line 2 (itemize) ▶		5	
6 Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	603,361

(a) List and describe th	LOSSES FOR TAX ON INVESTMENT le kind(s) of property sold (e.g., real estate, lise, or common stock, 200 shs. MLC Co.)	(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da	•	(d) Date sold (mo , day, yr)	
1a N/A		-	D - Dona(IDN			
b						
c						
d			<u> </u>			
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a						
_b						
С						
d						
_e						
Complete only for assets showing gain	in in column (h) and owned by the found	dation on 12/31/6	59	(1)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col	col (k), but not less than -0-) or Losses (from col (h))	
a						<u> </u>
b						
с						
d						
е						
2 Capital gain net income or (net capital	If gain, also enter in Par If (loss), enter -0- in Par			2	-	
3 Net short-term capital gain or (loss) a	* * * * * * * * * * * * * * * * * * * *					
If gain, also enter in Part I, line 8, colu	umn (c) (see instructions) If (loss), ente	er -0- in		ľ		
Part I, line 8	r Section 4940(e) for Reduced			3		
f section 4940(d)(2) applies, leave this pa Was the foundation liable for the section 4 f "Yes," the foundation does not qualify u	4942 tax on the distributable amount of		pase period?			Yes X No
1 Enter the appropriate amount in each	column for each year, see the instruction	ons before maki	ng any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) e of noncharitable-use asset	s		(d) ribution ratio livided by col. (c))
2015	29,1	49	659,	760		0.04418
2014	23,6		581,0			0.04062
2013	20,9	54	492,	538		0.04253
2012	21,1	69	412,	510		0.05131
2011	18,4	04	421,0	581		0.04364
2 Total of line 1, column (d)				2		0.22230
3 Average distribution ratio for the 5-year number of years the foundation has b		2 by 5, or by the		3		0.04446
Enter the net value of noncharitable-u	ise assets for 2016 from Part X, line 5			4_		686,03
5 Multiply line 4 by line 3				5		30,50
6 Enter 1% of net investment income (1	l% of Part I, line 27b)			6		7
7 Add lines 5 and 6	•			7		30,57
8 Enter qualifying distributions from Par	rt XII, line 4			8		32,88
	e 7, check the box in Part VI, line 1b, an	nd complete that	part using a 1% tax r		e	

	1 990-PF (2016) ARIEMIS FOUNDATION LTD 31-1/288/8			<u>F</u>	age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check				78
	here ▶ X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
_	Part I, line 12, col (b).				•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2				78
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	\rightarrow			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>			78
6	Credits/Payments				
a	2016 estimated tax payments and 2015 overpayment credited to 2016				
b	Exempt foreign organizations – tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		-		<u>78</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 1	1]			
	art VII-A Statements Regarding Activities		1 :		
1a	, , , , , , , , , , , , , , , , , , , ,			Yes	
	participate or intervene in any political campaign?		1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
_	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				.,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	37 / 3	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or By state largelation that office triply among the property is a that as a good start discrete and the property in the proper				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that applied with the state law remains in the governing instrument?			v	
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X	.,	7	X	
	, , , , , , , , , , , , , , , , , , , ,	V	-		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) CT, CO				
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	N/A	0.		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	H/A	8b		—
3	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		x
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		-		
•	names and addresses		10		x
	THE THE STATE OF T		orm 99	0-PF	
					(20,0)

	Statements Regarding Activities (Continued)			
44	At any topic disease the constitution of the foundation of the standard live of the standard		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
40	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	 -	<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address ► N/A			Ь
14	The books are in care of ▶ JULIA V. PARRY Telephone no ▶ 860-	536-	515	2
	36 MONEY POINT ROAD			
	Located at ▶ MYSTIC CT ZIP+4 ▶ 063	55		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016? Yes X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.)	2b		f
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1 20		
·	► 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
•	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2016) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<u> </u>	_X_
		Form 9	90-PF	(2016)

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		arding Activities for Which	Form 4720 May Be R	Required (con	tınued)	·····	·····
5a	During the year did the foundation p	•			(50)		
	(1) Carry on propaganda, or otherw	· · · · · · · · · · · · · · · · · · ·			Yes X No		
	(2) Influence the outcome of any sp	·	955), or to carry on,		-		
	directly or indirectly, any voter re	· •			Yes X No		
	(3) Provide a grant to an individual	· · · · · · · · · · · · · · · · · · ·	•		Yes X No		
	(4) Provide a grant to an organization		inization described in		GE)		
	section 4945(d)(4)(A)? (see inst	·			Yes 🗓 No		
	(5) Provide for any purpose other th	an religious, charitable, scientific, lit	terary, or educational				
	purposes, or for the prevention of	of cruelty to children or animals?			Yes X No		
b	If any answer is "Yes" to 5a(1)–(5), o	lid any of the transactions fail to qua	alify under the exceptions d	escribed in			
	Regulations section 53 4945 or in a	current notice regarding disaster as:	sistance (see instructions)?	•	N/A	5b	ļ
	Organizations relying on a current ne	otice regarding disaster assistance of	check here				
С	If the answer is "Yes" to question 5a	(4), does the foundation claim exem	nption from the tax	. —			
	because it maintained expenditure re	esponsibility for the grant?		N/A	Yes No		
	If "Yes," attach the statement require	ed by Regulations section 53 4945-	5(d)				
6a	Did the foundation, during the year,	receive any funds, directly or indirec	ctly, to pay premiums				
	on a personal benefit contract?				Yes 🛚 X No		
b	Did the foundation, during the year,	pay premiums, directly or indirectly,	on a personal benefit contr	act?		6b	Х
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was	the foundation a party to a prohibite	ed tax shelter transaction?		Yes X No		
b	If "Yes," did the foundation receive a	ny proceeds or have any net incom-	e attributable to the transac	ction?	N/A	7b	
Pa	rt VIII Information About	Officers, Directors, Truste	es, Foundation Man	agers, Highly	Paid Employ	ees,	
	and Contractors						
1 L	ist all officers, directors, trustees,	foundation managers and their co	ompensation (see instruc	tions)			
			(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name	and address	hours per week	(If not paid,	employee benefit plans and deferred		pense account, er allowances
			devoted to position	enter -0-)	compensation		
ம	LIA V. PARRY	MYSTIC	PRES/DIR				
36	MONEY POINT ROAD	CT _06355	1.00	<u>_</u>		<u> </u>	0
JO	HN R. PARRY	MYSTIC	SEC/TREA/DIR				
36	MONEY POINT ROAD	CT 06355	1.00			<u> </u>	
					<u> </u>	<u> </u>	
				<u> </u>	<u> </u>	<u> </u>	
2	Compensation of five highest-paid	i employees (other than those inc	cluded on line 1 - see ins	tructions). If nor	ne, enter		
	"NONE."				·		
			(b) Title, and average		(d) Contributions to		
	(a) Name and address of each empl	byee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		pense account, er allowances
			devoted to position		compensation		
NO	NE						
						<u> </u>	
						1	
Tota	number of other employees paid over	er \$50 000				1	0

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Part VIII	Information About Officers, Directors, Trustees, Fo	undation Managers, Highly Paid E	mployees,
	and Contractors (continued)		
3 Five high	nest-paid independent contractors for professional services (see i	nstructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		}	
		_ 	
Total number of	of others receiving over \$50,000 for professional services		
			
Part IX-A	Summary of Direct Charitable Activities		
List the foundation	n's four largest direct charitable activities during the tax year. Include relevant statistical inform	ation such as the number of	
organizations and	other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 N/A			
			ļ <u>.</u>
2			
			
3			
			
4			
Part IX-B	Summary of Program-Related Investments (see in	estructions)	
	largest program-related investments made by the foundation during the tax year on lines 1 and		Amount
1 N/A			
2			
			ļ
· -	-related investments. See instructions		
3			
			1

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part F	oreign founda	itions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes		252 727
a	•	1a	253,727
b	•	1b	442,755
C		1c	606 400
d		1d	696,482
е			
	1c (attach detailed explanation)	0	•
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	696,482
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see	1 1	
	instructions)	4	10,447
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	686,035
6	Minimum investment return. Enter 5% of line 5	6	34,302
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	ating foundation	ons
	and certain foreign organizations check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	34,302
2a	Tax on investment income for 2016 from Part VI, line 5	78	
b	Income tax for 2016 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	78
3	Distributable amount before adjustments Subtract line 2c from line 1	3	34,224
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	34,224
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	34,224
Pa	art XII Qualifying Distributions (see instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1a	32,880
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1b	52,000
ь		15	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	32 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	32,880
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	70
•	Enter 1% of Part I, line 27b (see instructions)	5	78
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,802
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	toundation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2016)

Pa	irt XIII Undistributed Income (see	instructions)				
	•		(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI,	<u></u>	Corpus	Years prior to 2015	2015	2016
	line 7	<u> </u>				34,224
2	Undistributed income, if any, as of the end of 20	16				
	Enter amount for 2015 only				31,980	
b	Total for prior years $20 \underline{12}$, $20 \underline{13}$, 20	14				
3	Excess distributions carryover, if any, to 2016	ì				
а	From 2011					
b	From 2012					
С	From 2013					
d	From 2014		İ			
е	From 2015					
f	Total of lines 3a through e	<u></u>				
4	Qualifying distributions for 2016 from Part XII,	}				
	line 4 ▶ \$ 32,880					
а	Applied to 2015, but not more than line 2a	ļ			31,980	······
b	Applied to undistributed income of prior years					
	(Election required – see instructions)	<u> </u>				
C	Treated as distributions out of corpus (Election					
	required – see instructions)	ļ				
d	Applied to 2016 distributable amount	<u></u>				900
е	Remaining amount distributed out of corpus	<u> </u>				
5	Excess distributions carryover applied to 2016	ļ				
	(If an amount appears in column (d), the same	}				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:	1				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	ļ				
b	Prior years' undistributed income Subtract		ĺ			
	line 4b from line 2b	<u> </u>				······································
С	Enter the amount of prior years' undistributed	l				
	income for which a notice of deficiency has					
	been issued, or on which the section 4942(a)	1				
	tax has been previously assessed	<u> </u>				
d	Subtract line 6c from line 6b Taxable	{				
	amount - see instructions	ļ				
е	Undistributed income for 2015 Subtract line					
	4a from line 2a Taxable amount – see					
	instructions	<u> </u>				
f	Undistributed income for 2016 Subtract lines	j				
	4d and 5 from line 1 This amount must be	ļ	ì			
	distributed in 2017	<u> </u> -			***************************************	33,324
7	Amounts treated as distributions out of corpus					
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be	ļ				
	required—see instructions)	-				
8	Excess distributions carryover from 2011 not]	
	applied on line 5 or line 7 (see instructions)	L				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
9	Excess distributions carryover to 2017.					
	Subtract lines 7 and 8 from line 6a	ļ				· · · · · · · · · · · · · · · · · · ·
10	Analysis of line 9	1				
a	Excess from 2012					
b	Excess from 2013					
С	Excess from 2014					
d	Excess from 2015					
е	Excess from 2016				l .	

	990-PF (2016) ARTEMIS FOUN			31-1/28			Page 1
	rt XIV Private Operating For				9)		
1a.	If the foundation has received a ruling or		•	ating	-		
	foundation, and the ruling is effective for		•		Ĺ		
b	Check box to indicate whether the found		rating foundation descr		4942(j)(3) or	4942(j)	(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years			(e) Total
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 201	3	
	investment return from Part X for		1				
	each year listed		<u> </u>	<u> </u>			
b	85% of line 2a					_	
С	Qualifying distributions from Part XII,						
	line 4 for each year listed		1	}			
d	Amounts included in line 2c not used directly						
	for active conduct of exempt activities		Ï	Ì			
е	Qualifying distributions made directly		<u> </u>	† 	 		
•	for active conduct of exempt activities						
	Subtract line 2d from line 2c			Í			
_	· · · · · · · · · · · · · · · · · · ·			 	 -		
3	Complete 3a, b, or c for the		j		}		
	alternative test relied upon						
а	"Assets" alternative test – enter				Ì		
	(1) Value of all assets		 				
	(2) Value of assets qualifying under						
	section 4942(j)(3)(B)(i)		<u> </u>	 	_		
b	"Endowment" alternative test – enter 2/3			1			
	of minimum investment return shown in						
	Part X, line 6 for each year listed		<u></u>	<u> </u>	_i		
С	"Support" alternative test – enter		}	1	}	-	
	(1) Total support other than gross						
	investment income (interest,						
	dividends, rents, payments on					i i	
	securities loans (section						
	512(a)(5)), or royalties)		ļ				
	(2) Support from general public						
	and 5 or more exempt					,	
	organizations as provided in section 4942(j)(3)(B)(iii)						
				 	 		
	(3) Largest amount of support from		1			}	
	an exempt organization		 	 			
	(4) Gross investment income Int XV Supplementary Inform	action (Complet	o this part only if	the foundation l	had \$5,000 a		a accete at
F	• • •	•	•	the foundation	11au \$5,000 t	n more ii	ı assets at
	any time during the ye		tions.)				
1	Information Regarding Foundation Ma	-					
а	List any managers of the foundation who				•	tion	
	before the close of any tax year (but only	-			2))		404 514
	JOHN R. AND JULIA V.						\$94,514
þ	List any managers of the foundation who				ge portion of the	;	
	ownership of a partnership or other entity	 of which the founda 	ition has a 10% or grea	ater interest			
	N/A						
2	Information Regarding Contribution, C						
	Check here \blacktriangleright X if the foundation only	makes contributions	to preselected charita	ible organizations and	does not accep	ot	
	unsolicited requests for funds. If the foun	dation makes gifts, g	rants, etc (see instruc	tions) to individuals of	rorganizations	under	
	other conditions, complete items 2a, b, c	, and d					
	The name, address, and telephone numb		of the person to whom	applications should t	oe addressed		
	N/A		• ====	.,			
	•						
b	The form in which applications should be	submitted and inform	nation and materials th	nev should include			
	N/A	Japanikou unu imuli	nation and materials ti	on our molade			
	Any submission deadlines	· · · · · · · · · · · · · · · · · · ·					
Ü	N/A						
		auch an his access to	vent areas shartely	fiolds lands of materials			
d	Any restrictions or limitations on awards,	such as by geograph	iicai areas, charitable i	neius, kinos of instituti	ons, or other		
	factors						
	N/A						

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year DIRECT RELIEF INTERNATIONAL PC 27 SOUTH LA PATERA LANE NONE MATERNAL & CHILD HEALTH PROMS TRAIN 5,000 SANTA BARBARA CA 93117 FIRST BAPTIST CHURCH OF WAUKEGAN PC PO BOX 44 NONE WAUKEGAN IL 60079 SUMMER LEARNING EXPERIENCE 1,000 THE FISTUAL FOUNDATION 1922 THE ALAMEDA, STE 302 NONE PC SAN JOSE CA 95126 FREE MEDICAL TREATMENT TO DESPERATE 5,000 PLANNED PARENTHOOD FEDERATION AMER 123 WILLIAM STREET NONE PC HEALTH CARE, ADVOCACY AND 8,000 NEW YORK NY 10038 EDUCATION PROJECT CURE (BENEVOLENT HEATHCARE) PC 10377 E. GEDDES AVE. NONE HELPING BABIES BREATHE -7,500 CENTENNIAL CO 80112 NEONATAL WE CARE SOLAR PO BOX 5765 NONE PC 5,500 BERKELEY CA 94705 SUPPORT SOLAR SUITCASE FOR TANZANIA 32,000 Total ▶ 3a Approved for future payment N/ATotal ▶ 3b

	unts unless otherwise indicated	Unrelated by	isiness income	Excluded b	y section 512, 513, or 514	
•	and unless outerwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program sen	vice revenue	ļ				(See instructions)
		_				
		_				<u> </u>
					-	
						
-	contracts from government agencies			+		
	dues and assessments			14	26	
	avings and temporary cash investments d interest from securities			14	8,564	
	come or (loss) from real estate				0,00=	
	nced property	<u> </u>				
	financed property					 -
	come or (loss) from personal property					
7 Other investr						
) from sales of assets other than inventory					
-	or (loss) from special events					
	or (loss) from sales of inventory			- -		
•	e a					
-						
e						
12 Subtotal Add	d columns (b), (d), and (e)			0	8,590	0
13 Total. Add lir	ne 12, columns (b), (d), and (e)				13	8,590
See worksheet i	n line 13 instructions to verify calculations)					
Part XVI-B	Relationship of Activities to the					
Line No. ▼	Explain below how each activity for which incor accomplishment of the foundation's exempt pu					ins)
N/A				•		

Part		Information Reg	_	ansfers To ar	nd Transactio	ns and Relation	onships Wi	th Noncharitab	le		<u> 10 10</u>
1 D:		inization directly or ind		ge in any of the fo	llowing with any	ther organization	described			Yes	No
		01(c) of the Code (other			-	=				163	140
	ganization		or than scott	on so r(c)(s) organ	inzations, or in se	ction 527, relating	to political				
	-	om the reporting found	lation to a no	oncharitable ever	nnt organization o	f					
	Cash	om the reporting round	iation to a ne	onchantable exem	ipt organization o	•			12/11		X
	Other a	ecate							1a(1)		$\frac{\mathbf{x}}{\mathbf{x}}$
	her transa								1a(2)		
			abla avamnt	organization					4 15 /4 \		v
		f assets to a noncharit	-	•					1b(1)		$\frac{x}{x}$
		ses of assets from a no			lion				1b(2)		
		of facilities, equipment,		seis					1b(3)	 	X
		rsement arrangements	•						1b(4)	\vdash	<u>X</u>
		r loan guarantees		- 6					1b(5)		<u> </u>
		ance of services or me	-	•					1b(6)	\vdash	X
	-	acilities, equipment, m	-	-	• •	(I-)			1c	L	<u> </u>
		er to any of the above is		•	-	• •	•				
		goods, other assets, o	=	-	-						
	ine no	transaction or sharing (b) Amount involved	1	e of noncharitable exer				ces received ansactions, and sharing ar			
N/A	ine no	(b) Amount involved	(C) Name	e of Horicitatitable exem	ipi organization	(d) Descrip	otion of transfers, the	ansactions, and snaring at	angeme	1115	
1/11			<u> </u>								
											
					· · · · · · · · · · · · · · · · · · ·						
			ļ								
				······································			·				
		•••						.			
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			ļ								
					· · · · · · · · · · · · · · · · · · ·						
			!								
										· ·	
				•							
2a le	the found	tion directly or indirec	tly affiliated	with or related to	one or more tay	evemnt organizati	lone			-	
		section 501(c) of the	-			. •	ions		¬ "	. Y	No
		nplete the following scl		than section 50 I(c)(3)) or in section	11 527 7			''	es X	INO
U II		i) Name of organization	iledule	(b) Type of	organization		(c) Descrip	tion of relationship			
N/		y realist of organization		(2) 1) 50 01	organization		(6) 5030115	tion of rolationship		-	
											
							•				
		<u> </u>					-				
		alties of perjury, I declare the						my knowledge and belief,	ıt ıs true),	
	correct, ar	nd complete Declaration of p	reparer (other t	than taxpayer) is based	d on all information of	which preparer has any	knowledge	May the IRS disci	iss this re	eturn	
ign								with the preparer	shown be	elow	_ I
lere		a	. 0			/ /		(see instructions)	, X	Yes	No
		Lulia V.	Parr	4	15	11/17	PRES	IDENT			
Ì	Sign	ature of officer or trustee			Date	- / · · ·	Title				
	Print/Tvi	pe preparer's name			Preparer's signatur	e		Date			$\overline{}$
					3	1		Date		Check self-emp	if
aid		HAN P. BRODEUI	₹		Su	ニノフレー	-, CR	A 05/10	/17	- sen-emp	yeu
repare	Firm's n			COMPANY,	CPAS, P.					641	
se Onl	v		BOX 16							564	
			AYBROO		6475		ŀ			8 - 4	

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

Department of the Treasury Internal Revenue Service

Name of the organization

ARTEMIS FOUNDATION LTD

C/O JULIA V. PARRY

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

Employer identification number

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

31-1728878

2016

Organization type (check one)						
Filers of:	ers of: Section:					
Form 990 or 990-EZ						
4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule See					
General Rule						
	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a butions.					
Special Rules						
regulations under section 13, 16a, or 16b, and the \$5,000 or (2) 2% of the	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line at received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one					
	rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, 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.						
990-EZ, or 990-PF), but it must	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, canswer "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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

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

Name of organization
ARTEMIS FOUNDATION LTD

Employer identification number 31-1728878

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, ai	nd ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	JOHN R. AND JULIA V 36 MONEY POINT ROAD MYSTIC		s 71	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, a	nd 7IP + 4	(c) Total contributions	(d) Type of contribution		
2	JOHN R. PARRY 36 MONEY POINT ROAD MYSTIC		\$ 85,356	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a)	(b)	- J 71D . 4	(c) Total contributions	(d) Type of contribution		
3	Name, address, and JULIA V. PARRY 36 MONEY POINT ROAD MYSTIC		\$ 9,087	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, a	nd 7IP + 4	(c) Total contributions	(d) Type of contribution		
NO.	Name, address, a		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, a	nd 7IP + 4	(c) Total contributions	(d) Type of contribution		
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, a	nd ZIP + 4	(c) Total contributions	(d) Type of contribution		
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Name of organization
ARTEMIS FOUNDATION LTD

Employer identification number 31-1728878

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

Part #	Noncash Property (See Instructions) Use duplicat	e copie	es of Part II iI additional sp	ace is needed.
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
2	2,399.663 SHS SCHWAB STK(SWPPX)			
		\$	85,356	12/19/16
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
3	159.93 SHS VANGUARD STK (VTSMX)			
		\$	9,087	12/19/16
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
		\$		

31-1728878	Federal S	Federal Statements		
Stater	Statement 1 - Form 990-PF, Pa	m 990-PF, Part I, Line 16b - Accounting Fees	ıting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
DOTY & ASSOCIATES, CPAS	1,			
TOTAL	, 1, 619	810	& O	808
	Statement 2 - Form 990-PF,	Part I, Line 18	- Taxes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
2015 FED EXERCISE TAX PAYMENT TOTAL	\$ \$ 116	w w	\$ \$	\$
State	Statement 3 - Form 990-PF, P	Part I, Line 23 - Other Expenses	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	w	v ₂	₩.	w.
POSTAGE FILING FEE	61			61 10
TOTAL	\$ 71	v.	₩	\$ 71
Statement 4	- Form 990-	PF, Part II, Line 10b - Corporate Stock Investments	ock Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
VANGUARD 500 INDEX FUND VANGUARD TOTAL STOCK MKT INDEX VANGUARD 500 INDEX		w	•	\$ 82,596 234,087
TOTAL	\$ 229,462	\$ 382,		\$ 553,367
				4

			•					•
\sim	4	- 4	~	$\overline{}$	\sim	\sim	-,	◠
	71	_ 1		•	×	×	•	×
•	- 1	-1		_	v	v		v

Federal Statements

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

	A	mount	
JOHN R. AND JULIA	V. PARRY (SEE SCH B, I	PART I) \$	94,514
TOTAL		\$	94,514

31-1728878	Federal Statements				
Taxable Interest on Investments					
Description	Unrelated Exclusion Postal US Amount Business Code Code Code Obs (\$ or %) \$ 26 \$ 26				
	axable Dividends from Securities				
Description	Unrelated Exclusion Postal US Amount Business Code Code Code Obs (\$ or %)				
TOTAL	\$ 8,564 \$ 8,564				
,					
1					

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