**Return of Private Foundation** 

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

2016

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

Internal Revenue	e Service	▶ Information ab	out Form 990-PF and its se	parate instru	ctions is a	t www.irs.gov/	form990pf.	Open to Public Inspection
		6 or tax year be	ginning			nd ending		, 20
Name of foun	ndation					A Employe	r identification n	umber
	ct Foundation		<del></del>	<del></del>	<del></del>		66-0823	
Number and	street (or P.O b	oox number if mail is i	not delivered to street address)		Room/suite		e number (see ins	
		Artes y Clencias	afarona postal and		Ste 201		787-626-	
		ce, country, and ZIP o	r roreign postai code			C If exempt	ion application is	pending, check here ►
	erto Rico 006 all that apply		um	of a former p	uhla aha			
H Check t Section Fair ma end of y	type of orga 4947(a)(1) r arket value o year (from	Final return Address nization: Senonexempt charit of all assets at Part II, col. (c),	rn	return nge rivate founda able private :	tion foundatio	2. Foreign check E if private section 5	here and attach c foundation status 07(b)(1)(A), check	eeting the 85% test, omputation
line 16)		300329		on cash basis	<u>.)                                      </u>			
a a	amounts ın col		kpenses (The total of may not necessarily equal uctions).)	(a) Revenue a expenses p books		Net investment income	(c) Adjusted n	et (d) Disbursements for chantable purposes (cash basis only)
1 (	Contributions,	gifts, grants, etc.,	received (attach schedule)	32	6483			
2 (			ot required to attach Sch. B	<b>&gt;</b>	* *	*	· *; .	
3			orary cash investments		1	0		
4 (		nd interest from s			0	0		
					0	0		
		come or (loss)	0	<u> </u>		* ;	8 × × ×	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6a 1	_		f assets not on line 10		0	<u>x</u> <u>x</u>	× ×, &	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b (	•	ice for all assets on				` <i>`</i>	** * * * * * * * * * * * * * * * * * *	
<b>~</b> _		•	Part IV, line 2)	* *	*	0	<u>≉ ∳</u>	
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			· 10					
		<b>1</b>	,					

Form 990-	Attached sebadide and execute of the description of	Beginning of year	End o	Page 2
Part II	Balance Sheets Attached schedules and amounts in the description column 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	203746	257694	257694
2	Savings and temporary cash investments	490	357	357
3		430	- 557	
	Accounts receivable ►  Less: allowance for doubtful accounts ►	أه	o	,
4				
	Pledges receivable ►  Less: allowance for doubtful accounts ►	Ō	ر مار السام 0	
5	Grants receivable	0	0	
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)	o	n	
7	Other notes and loans receivable (attach schedule) ▶			* ( - 3 * 35 *
1 -	Less: allowance for doubtful accounts ▶			`
8 12	Inventories for sale or use	0	0	
Assets 6 8	Prepaid expenses and deferred charges	0	0	
¥ 10a	·	0	0	
ŀ		0	0	
		0	0	(
11	Investments – land, buildings, and equipment: basis ▶		, ,,,,	<u> </u>
- }	Less: accumulated depreciation (attach schedule) ▶	0	0	
12	Investments—mortgage loans	0	0	
13	Investments – other (attach schedule)	0	0	
14	Land, buildings, and equipment: basis ▶	i z A		K. M. MAK
	Less: accumulated depreciation (attach schedule) ▶	0	0	
15	Other assets (describe Donated Furniture	0	42278	42278
16	Total assets (to be completed by all filers-see the	<del>_</del>		
	instructions. Also, see page 1, item I)	204236	300329	300329
17	Accounts payable and accrued expenses	0	0	
<sub>0</sub> 18	Grants payable	0	0	
Liabilities 61 0 19 0 19 0 19 0 19 0 19 0 19 0 19 0	Deferred revenue	0	0	
<b>⋛</b> 20	Loans from officers, directors, trustees, and other disqualified persons	0	0	736
<u>.e</u> 21	Mortgages and other notes payable (attach schedule)	0	0	
<b>-</b> 22	Other liabilities (describe Payroll Liabilities, Credit Cards )	_ 28	11599	
23	Total liabilities (add lines 17 through 22)	28	11599	
S	Foundations that follow SFAS 117, check here ▶ □			A Part of the second
Sec 24	and complete lines 24 through 26 and lines 30 and 31.			
€ 24	Unrestricted ,			- A Contract

A ...

_	V Capital Gains and					
		e kind(s) of property sold (e.g., real estates, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
С						
d	<del> </del>					
e				<u>l</u>		<u></u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		n or (loss) (f) minus (g)
_a						
b						
C						
<u>d</u>		<del></del>				
е		<del>.</del>				
	Complete only for assets sho	wing gain in column (h) and owned	by the foundation	n on 12/31/69		l (h) gain minus
	(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any		t less than -0-) <b>or</b> from col (h))
а		_				
b						
С						
d						
е						
2	Capital gaın net income or		, also enter in F s), enter -0- in P		2	
3		n or (loss) as defined in section L. line 8. column (c) (see instru				
art	If gain, also enter in Part Part I, line 8	n or (loss) as defined in section I, line 8, column (c) (see instruction in the column	uctions). If (los	Net Investmen		
Part or o sect as the	If gain, also enter in Part Part I, line 8	I, line 8, column (c) (see instru- er Section 4940(e) for Red vate foundations subject to the e this part blank. section 4942 tax on the distribingualify under section 4940(e).	uctions). If (loss) luced Tax on e section 4940(a	Net Investment  It is any year in the ethis part.	t Income tment income.) base period?	
Part or o sect	If gain, also enter in Part Part I, line 8	I, line 8, column (c) (see instru- er Section 4940(e) for Red vate foundations subject to the e this part blank. section 4942 tax on the distribi	uctions). If (loss) luced Tax on e section 4940(a	Net Investment  I tax on net invest  of any year in the ethis part.  ructions before m	t Income tment income.) base period? aking any entries.	(d)
Part or o sect as th "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribution qualify under section 4940(e). It is the earth of the earth	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complet ear; see the inst	Net Investment  It is any year in the ethis part.	t Income tment income.) base period? aking any entries.	
Part or o sect as th "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribution qualify under section 4940(e). It is the earth of the earth	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complet ear; see the inst	Net Investment  I) tax on net invest of any year in the ethis part. ructions before m	t Income tment income.) base period? aking any entries.	(d) tribution ratio
Part or o sect as th "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribution qualify under section 4940(e). It is the earth of the earth	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complet ear; see the inst	Net Investment  I) tax on net invest of any year in the ethis part. ructions before m	t Income tment income.) base period? aking any entries.	(d) tribution ratio
Part or o sect as th "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribution qualify under section 4940(e). It is the earth of the earth	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complet ear; see the inst	Net Investment  I) tax on net invest of any year in the ethis part. ructions before m	t Income tment income.) base period? aking any entries.	(d) tribution ratio
Part for of sect /as th "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribution qualify under section 4940(e). It is the earth of the earth	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complet ear; see the inst	Net Investment  I) tax on net invest of any year in the ethis part. ructions before m	t Income tment income.) base period? aking any entries.	(d) tribution ratio
Part for of sect /as th "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribution qualify under section 4940(e). It is the earth of the earth	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complet ear; see the inst	Net Investment  I) tax on net invest of any year in the ethis part. ructions before m	t Income tment income.) base period? aking any entries.	(d) tribution ratio
Part for o sect /as tt "Yes 1	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribit qualify under section 4940(e). I bunt in each column for each years and the each qualifying distribution.	uctions). If (loss uced Tax on e section 4940(a utable amount of Do not complete ear; see the inst  Net value	Net Investment I) tax on net investof any year in the ethis part.  ructions before more of noncharitable-use a	t Income tment income.) base period? aking any entries. ssets (col (b)	(d) tribution ratio
Part or of of sections as the "Yes of the Cale	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribit qualify under section 4940(e). I with the each column for each years and the each qualifying distribution.	uctions). If (loss) uced Tax on e section 4940(a utable amount of Do not complete ear; see the instead	Net Investment  I) tax on net investor  of any year in the ethis part.  ructions before m  (c)  of noncharitable-use a	t Income tment income.) base period? aking any entries. ssets (col (b)	(d) tribution ratio
Part for of sect as the "Yes	If gain, also enter in Part Part I, line 8	er Section 4940(e) for Red vate foundations subject to the ethis part blank.  section 4942 tax on the distribit qualify under section 4940(e). I bunt in each column for each years and the each qualifying distribution.	uctions). If (lossing leaves and lossing leaves are the instance are the i	Net Investment I) tax on net investor of any year in the ethis part. ructions before m (c) of noncharitable-use a	t Income tment income.) base period? aking any entries. ssets (col (b)	(d) tribution ratio
Part or or sect as the "Yes 1	If gain, also enter in Part Part I, line 8	I, line 8, column (c) (see instru- er Section 4940(e) for Red vate foundations subject to the e this part blank. section 4942 tax on the distribit qualify under section 4940(e). I bunt in each column for each ye (b) Adjusted qualifying distribution for the 5-year base period—div	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complete ear; see the inst Net value  vide the total or less than 5 year	Net Investment I) tax on net invest of any year in the lethis part. ructions before m (c) of noncharitable-use a	t Income tment income.)  base period?  akıng any entries.  ssets (col (b)	(d) tribution ratio
Part or o sect 'as th "Yes 1 Cale	If gain, also enter in Part Part I, line 8	I, line 8, column (c) (see instru- er Section 4940(e) for Red vate foundations subject to the e this part blank. section 4942 tax on the distribit qualify under section 4940(e). I sunt in each column for each ye  (b) Adjusted qualifying distribution  Adjusted qualifying distribution  for the 5-year base period—dividation has been in existence if I	uctions). If (loss) luced Tax on e section 4940(a utable amount of Do not complete ear; see the inst Net value  vide the total or less than 5 year	Net Investment I) tax on net invest of any year in the lethis part. ructions before m (c) of noncharitable-use a	t Income tment income.)  base period?  akıng any entries.  ssets (col (b)	(d) tribution ratio
Part or o sect 'as ti "Yes 1 Cale	If gain, also enter in Part Part I, line 8	I, line 8, column (c) (see instru- er Section 4940(e) for Red vate foundations subject to the e this part blank. section 4942 tax on the distribit qualify under section 4940(e). I sunt in each column for each ye  (b) Adjusted qualifying distribution  Adjusted qualifying distribution  for the 5-year base period—dividation has been in existence if I	uctions). If (los.  uced Tax on e section 4940(a  utable amount of Do not complete ear; see the instead of Net value  vide the total or less than 5 year  from Part X, lin	Net Investment I) tax on net invest of any year in the lethis part. ructions before m (c) of noncharitable-use a	t Income tment income.)  base period?  aking any entries.  ssets (col (b)	(d) tribution ratio

Form 99	00-PF (2016)				Pa	ige <b>4</b>
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48-s	ee ir	stru	ction	s)
	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b	Dômestic foundations that meet the section 4940(e) requirements in Part V, check	1			$\dashv$	
С	here ▶ ☐ and enter 1% of Part I, line 27b					•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3 4	Add lines 1 and 2	3 4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5				
6	Credits/Payments:				188	<u>,</u>
a b	2016 estimated tax payments and 2015 overpayment credited to 2016   6a   Exempt foreign organizations—tax withheld at source   6b			*	3	
С	Tax paid with application for extension of time to file (Form 8868) . 6c	1				
d	Backup withholding erroneously withheld	7		-		\$ er 1
7 8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9				
ţΩ	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	. —			
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)					1
	Date of rulling or determination letter: (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				
b	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	1				
b c 2	Date of rulling or determination letter: (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b	2				
b c	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check  here ▶ □ and enter 1% of Part I, line 27b					
b c 2 3 4 5	Date of rulling or determination letter:  (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b	2 3				
b c 2 3 4 5	Date of rulling or determination letter: (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b	2 3 4			11/9	
b c 2 3 4 5	Date of rulling or determination letter:  (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b	2 3 4			W. S.	
b c 2 3 4 5 6 a b c	Date of rulling or determination letter:  (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check  here ▶ □ and enter 1% of Part I, line 27b	2 3 4			138	
b c 2 3 4 5 6 a b c d	Date of rulling or determination letter:  (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check  here ▶ □ and enter 1% of Part I, line 27b	2 3 4 5				
b c 2 3 4 5 6 a b c d 7	Date of rulling or determination letter:  (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b	2 3 4			128	
b c 2 3 4 5 6 a b c d	Date of rulling or determination letter:  (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check  here ▶ □ and enter 1% of Part I, line 27b	2 3 4 5			11/4	
b c 2 3 4 5 6 a b c d 7 8 9 10	Date of ruling or determination letter:    (attach copy of letter if necessary—see instructions)	2 3 4 5 7 8 9 10			138	
b c 2 3 4 5 6 a b c d 7 8 9 10 11	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check  here ▶ □ and enter 1% of Part I, line 27b  All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Credits/Payments:  2016 estimated tax payments and 2015 overpayment credited to 2016  Exempt foreign organizations—tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶  Refunded	2 3 4 5				
b c 2 3 4 5 6 a b c d 7 8 9 10 11 Part	Date of rulling or determination letter: (attach copy of letter if necessary – see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check  here ▶ □ and enter 1% of Part I, line 27b	2 3 4 5 7 8 9 10 11	-		Yes	No
b c 2 3 4 5 6 a b c d 7 8 9 10 11 Part	Date of ruling or determination letter:	7 8 9 10 11	. [	1a	Yes	No V
b c 2 3 4 5 6 a b c d 7 8 9 10 11 Part	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)  Dômestic foundations that meet the section 4940(e) requirements in Part V, check here	7 8 9 10 11	see		Yes	

	90-PF (2016)	Otata and Danadina Astritica /autimos		F	age 5
Par	t VII-A	Statements Regarding Activities (continued)		Yes	No
11	At any ti	me during the year, did the foundation, directly or indirectly, own a controlled entity within the			
		of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the fo	nundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	1				
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5-100 <del></del>	′				
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3 Five	highest-naid independent contractors for professional continue foca	instructions) If none enter "	NONE "
	highest-paid independent contractors for professional services (see (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	(u) Name and address of each person paid more than \$50,000	(b) Type of Service	(c) Compensation
NONE			
	<del></del>	<del></del>	
<del></del>			<del>_</del>
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1 Fair mai purpose a Average b Average c Fair mar d Total (ace Reduction 1c (attack)	monthly fair market value of securition of monthly cash balances	ructions)		1	1a   1b   1c   1d   1d   1d   1d   1d   1d   1d
purpose a Average b Average c Fair mar d Total (ac e Reduction 1c (attace)	monthly fair market value of securition of monthly cash balances	ructions)		1	1b   1c
b Average c Fair mar d Total (ac e Reduction 1c (attact)	of monthly cash balances ket value of all other assets (see instant dollars 1a, b, and c)	cructions)		· · · · <u>1</u>	1b   1c
c Fair mar d Total (ad e Reducted 1 c (attact	ket value of all other assets (see instantial lines 1a, b, and c)	ructions)		[1	1c/
d Total (ad e Reduction 1c (attact	dd lines 1a, b, and c)	ctors reported on lir			
e Reduction 1c (attac	on claimed for blockage or other faith detailed explanation)	ctors reported on lir	nes 1a and		3
1c (attac	ch detailed explanation)				
		· ·			
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PAR SECURE OF SECURE					
	1755-28-18-18-18-18-18-18-18-18-18-18-18-18-18				
	<u>_</u>				
(a) No.	• • • • • • • • • • • • • • • • • • •				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of	how gift is held
Parti		<del> </del>			
<u> </u>		(e) Trans	fer of aift		
		(S) Trails	.c. or girt		
	Transferee's name, address, a	and ZIP + 4	Relationshi	p of transferor to tr	ransferee
(a) No. from					

Part	XV Supplementary Information (conti	nued)			<del></del>
3	<b>Grants and Contributions Paid During t</b>	he Year or Approve	ed for Fut	ture Payment	<u>-                                    </u>
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	,	
	Paid during the year atement Attached	NONE		A A A A A A A A A A A A A A A A A A A	
	Total			▶ 3a	
	Approved for future payment				
NONE					
	Total				
					990-PF (2016)

	er arc	oss amounts unless otherwise indicated.	Ctivities Unrelated busi	ness income	Excluded by section	n 512, 513, or 51	4 (2)
1		gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•		Fundralsing efforts					326483
	b						1
	С						
	d				<u> </u>		<del> </del>
	e •		<del> </del>		<u> </u>		<del> </del>
	g	Fees and contracts from government agencies		<del></del>	<del> </del>		<del> </del>
2		mbership dues and assessments		<del></del> ,	<del>                                     </del>		<u> </u>
3	Inte	erest on savings and temporary cash investments					1
4		idends and interest from securities					
5		t rental income or (loss) from real estate:		<u> </u>	ļ	* * *	
	а	Debt-financed property					<del></del>
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		100 Ta			e.	-	
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					e /		
- Vr							
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(f).							
(f)							
. %							
(%)							
. %							

Part	XVII		n Regarding Transfers To ar ganizations	nd Transaction	ns and Relationships With Noncha	ıritabl	е	
1	in se	he organization of	directly or indirectly engage in any		with any other organization described s) or in section 527, relating to political		Yes	No
а		•	oorting foundation to a noncharita			1a(1)	, , ,	« ·
b	Othe		a noncharitable exempt organiza	ation		1a(2) 1b(1)	^_	✓ **:-**
	(3) F	Rental of facilities	ets from a noncharitable exempt of a comment, or other assets arrangements are assets are set as a comment of the comments are assets.			1b(2) 1b(3) 1b(4)		<del>\</del>
_	(5) L (6) F	oans or loan gua Performance of se	rantees	sing solicitations		1b(5) 1b(6)		<del>1</del>
c d	If the	e answer to any e of the goods, o	of the above is "Yes," complete ther assets, or services given by	the following so	oloyees	s than	fair m	arket
(a) Line		(b) Amount involved	(c) Name of noncharitable exempt		(d) Description of transfers, transactions, and sha			
20	le th	o foundation dire	actly or indirectly offiliated with	or related to or	ne or more tax-exempt organizations			
						]_Yes	· [7]	Νο
-	<u></u>							
7-887	.1111	-4						

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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.

Employer identification number

OMB No 1545-0047

Organization type (check	
	k one):
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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
instructions.  General Rule  For an organizati	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See sion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 bey or property) from any one contributor. Complete Parts I and II See instructions for determining a all contributions.
Special Rules	
regulations unde 13, 16a, or 16b,	cion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the er sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1)
\$5,000 or <b>(2)</b> 2%	6 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 organizati	

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)

No. Name, address, and ZIP + 4  Total contributions  Type of contribution  Person		organization Act Foundation Inc	E	mployer identification number 66-0823462
No. Name, address, and ZIP + 4    Total contributions   Type of contribution	art I	Contributors (See instructions). Use duplicate cop	ples of Part I if additional space i	s needed
Galeria de Artes y Ciencias, 875 Carr. 693, Sulte 202  Dorado, PR 00646  Dorado, PR 00646  (a) Name, address, and ZIP + 4  Zisson Burns  Urb. Plantation Village  Dorado, PR 00646  Dorado, PR 00646  (b) (c) (d) Type of contribution  Person Payroll Payroll Payroll Payroll (Complete Part II for noncash contributions)  (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d		(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Gaiería de Artes y Clencias, 875 Carr. 693, Suite 202  Dorado, PR 00646  (Complete Part II for noncash contributions)  (a) Name, address, and ZIP + 4  Life, Plantation Village  Urb. Plantation Village  Dorado, PR 00646  (b) Noncash  (c) (c) (d) Type of contributions  Person Payroll Noncash  (Complete Part II for noncash contributions)  (d) Noncash  (c) (d) Type of contributions  (c) (d) Noncash  (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	1	Matt Martorello		
Dorado, PR 00646   noncash contributions		Galeria de Artes y Ciencias, 875 Carr. 693, Suite 202	\$ 42278	Noncash 🗹
No. Name, address, and ZIP + 4  Total contributions  Type of contribution  2  Jason Burns		Dorado, PR 00646		
Urb. Plantation Village \$ 16000   Noncash   (Complete Part II for noncash contributions)		(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Urb. Plantation Village  Dorado, PR 00646  (Complete Part II for noncash contributions)  (a)  (b)  (c)  (d)	2	Jason Burns		<u></u>
Dorado, PR 00646 noncash contributions )  (a) (b) (c) (d)		Urb. Plantation Village	\$16000	Noncash
No. Transferred Tibuta (Transferred Tibuta (Tr	ļ	Dorado, PR 00646		
		(b)	(c)	(d)
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#### Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

Distributions to nonprofit organizations: the foundation's largest direct charitable activity during the year was related to its exempt purpose, which is the making of distributions to nonprofit organizations in Puerto, Rico, A total of

Name of organization
The 20 22 Act Foundation Inc

Employer identification number 66-0823462

Noticasii Property (See instructions). Ose duplicate copie	es of Part II if additional space	ce is needed.
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Home furniture: accessories, lamps, home interior furniture, and patio furniture.	42278	0/45/46
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	8/15/16 (d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	·   s	
	Description of noncash property given  Home furniture: accessories, lamps, home interior furniture, and patio furniture.  (b)  Description of noncash property given  (b)  (b)  Description of noncash property given	Description of noncash property given  Home furniture: accessories, lamps, home interior furniture, and patio furniture.  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  (d)  FMV (or estimate) (See instructions)  (e)  FMV (or estimate) (See instructions)  (f)  FMV (or estimate) (See instructions)  (g)  FMV (or estimate) (See instructions)  (h)  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  (d)  FMV (or estimate) (See instructions)  (e)  FMV (or estimate) (See instructions)  (f)  FMV (or estimate) (See instructions)  (h)  Description of noncash property given  (h)  Description of noncash property given  (c)  FMV (or estimate) (See instructions)

Name of or	ganization		Employer identification number
Part III	(10) that total more than \$1,000 for the the following line entry. For organization contributions of \$1,000 or less for the y	e year from any one contribut ns completing Part III, enter the rear. (Enter this information onc	is described in section 501(c)(7), (8), or tor. Complete columns (a) through (e) and total of exclusively religious, charitable, etc., e. See instructions.) > \$
	Use duplicate copies of Part III if addition	onal 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	
		-	ationshin of transferor to transferee
	)pny		
	<u> </u>		

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#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

Page 1, Letter D - Computation to demonstrate that at least 85% of the Foundation's funds have come from sources outside of the US

Funds outside of the US received in 2015	\$ 315,607
Funds outside of the US received in 2016	 300,483
Total Funds from outside sources	\$ 616,090
Total funds received in 2015	\$ 348,227
Total funds received in 2016	 326,483
Total funds received since inception	\$ 674,710
Ratio of funds from sources outside of the US	
to total funds received since inception	 91%

#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

Part I, Line 11 - Other Income	 
<u>Description</u>	
Refund from setting up a credit card processing terminal	1
Total	\$ 1

#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

Part I, Line 23 - Other Expenses

<u>Description</u>	<u>Total</u>
Bank Service Charges	545
Chanty Labor	8,762
Computer Expenses	5,702
Contract Labor	1,575
Credit Card Fees	7,215
Dog Feeding Route	232
Events	56,818
Filing Fees	874
Insurance	160
Internet Fees	1,254
Licenses, Fees, and Permits	425
Meals and Entertainment (50%)	1,167
Postage and Delivery	73
Supplies	98
Veterinary Expense	190
	\$ 85,090

#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

Part VII-A, Line 8b - Reason why the Foundation is not required to furnish a copy of Form 990-PF to the Attorney

General (or designate) of any state

Per Form 990-PF Instructions in page 6, letter G, as the Foundation has received more than 85% of its support from sources outside of the United States since its inception, it is not required to furnish a copy of its annual returns to the Attorney General (or designate) of any state as required by *General Instruction G*. As of the end of taxable year 2016, 91% of the Foundation's funds have been paid by individuals and companies domiciled in the Commonwealth of Puerto Rico

# A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

#### Part VII-A, Line 10 - Substantial Contributors

#### **Contributor Name**

#### **Address**

Matt Martorello

Galeria de Artes y Ciencias 875 Carr. 693, Suite 202 Dorado, PR 00646

Jason Burns

Urb. Plantation Village Dorado, PR 00646

#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

#### Part IX-B, Line 3 - Other program-related investments

Description	I	<u>otal</u>
Distributions to educational nonprofit organizations	\$	20,250
Distributions to social nonprofit organizations		16,000
Total	\$	36,250

#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION

		FOR THE YEAR EN	RIVATE FOUNDATION RDED 2016		
		Part XV, Line 3a - Contribution	s Paid During the Year		
	Recipient's name and address	Foundation status of recipient	Purpose of Contribution	Amount	
	Puerto Rico Alliance for Companion Animals, Inc 130 Winston Churchill Avenue Suite 1, PMB 208	PC	Care and adoption of rescued dogs	71,822	
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#### A STATEMENT ATTACHED TO AND MADE A PART OF FORM 990-PF - RETURN OF PRIVATE FOUNDATION FOR THE YEAR ENDED 2016

#### Part XV, Line 3a - Contributions Paid During the Year

Recipient's name and address	Foundation status of recipient	Purpose of Contribution	Amount
Hogar Irma Fe Pol Mendez Calle Pedro Albizu Campos, 50 PO Box 1185 Lares, PR 00669	PC	Care center for the elderly	500
Comite de Gericultura Guayama PO Box 2565 Guayama, PR 00785	PC	Care and education for the elderly	500
Instituto Santa Ana Carr 5516 Km 0 2 Sector El Desvío P O Box 554 Adjuntas, PR 00601	PC	Children's boarding home	500
Centro Coameño para la Velez 60, 2 Calle Mario Brashi Coamo, PR 00769	PC	Care and recreational center for the elderly	500
Total			\$ 129,500