

Form 990-PF

Department of the Treasury

Return of Private Foundation

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

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

20**17**

Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. Open to Public Inspection For calendar year 2017 or tax year beginning , 2017, and ending January 1 December 31 Name of foundation A Employer identification number **Aging Solutions For Central Ohio** 02-0595200 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 3776 South High Street 614-645-7250 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Columbus, OH 43207 ☐ Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test. □ Address change ☐ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: ✓ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method: ☐ Cash ☐ Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col. (c), line 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per purposes (cash basis only) income the amounts in column (a) (see instructions)) books Contributions, gifts, grants, etc., received (attach schedule) <u>19,24</u>2.04 2 Check ► I if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 0.00 0.00 0.00 4 Dividends and interest from securities 0.00 0.00 0.00 Gross rents 5a 0.00 റ ററ 0.00 b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a 0.00 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . 0.00 8 Net short-term capital gain 0.00 q Income modifications 0.00 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 0.00 0.00 11 Other income (attach schedule) 0.00 0.00 0.00 12 Total. Add lines 1 through 11 . . 19,242.04 0.00 0.00 13 Compensation of officers, directors, trustees, etc. 0.00 0.00 0.00 0.00 14 Other employee salaries and wages . . . 0.00 0.00 0.00 0.00 15 Pension plans, employee benefits 0.00 0.00 0.00 0.00 Legal fees (attach schedule) 16a 0.00 0.00 0.00 0.00 Accounting fees (attach schedule) 0.00 0.00 0.00 0.00 Other professional fees (attach schedule) 0.00 0.00 0.00 17 0.00 0.00 0.00 18 Taxes (attach schedule) (see instructions) . 0.00 0.00 0.00 19 Depreciation (attach schedule) and depletion . 0.00 0.00 20 Occupancy 0.00 0.00 0.00 21 Travel, conferences, and meetings and / 0.00 0.00 0.00 22 Printing and publications 0.00 0.00 0.00 23 Operating Other expenses (attach schedule) 0.00 0.00 0.00 24 Total operating and administrative expenses. Add lines 13 through 23 0.00 0.00 0.00 25 Contributions, gifts, grants paid 9,006.22 0.00 26 Total expenses and disbursements. Add lines 24 and 25 9,006.22 0.00 0.00 0.00 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 10,235.82 Net investment income (if negative, enter -0-) 0.00 Adjusted net income (if negative, enter -0-) 0.00

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2017)



Part II		Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
	اللحان	————————	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1、	Cash - non-interest-b	pearing	9,370.03	19,605.85	0.00
	2	Savings and tempora	ary cash investments	0.00	0.00	0.00
	3	Accounts receivable	>			
		Less: allowance for o	loubtful accounts ▶	0.00	0.00	0.00
	4	Pledges receivable ▶	•	,		
		Less: allowance for o	loubtful accounts ▶	0.00	0.00	0.00
	5	Grants receivable .		0.00	0.00	0.00
	6		m officers, directors, trustees, and other		-	
		disqualified persons	(attach schedule) (see instructions)	0.00	0.00	0 00
	7	Other notes and loans re	eceivable (attach schedule) ▶			
		Less: allowance for dou	ıbtful accounts ▶	0.00	0.00	0.00
ţ	8	Inventories for sale o	ruse	0.00	0.00	0.00
Assets	9	Prepaid expenses an	d deferred charges	0.00	0.00	0.00
Ą	10a	Investments-U.S. and	state government obligations (attach schedule)	0.00	0.00	0.00
	b	Investments-corpor	ate stock (attach schedule)	0 00	0.00	0.00
	С	Investments-corpor	ate bonds (attach schedule)	0.00	0.00	0.00
	11	Investments-land, build	lings, and equipment basis ►			
		Less. accumulated depre	ciation (attach schedule) ▶	0.00	0.00	0.00
	12	Investments-mortga	age loans	0.00	0.00	0.00
	13	Investments-other (attach schedule)	0.00	0.00	0.00
	14	Land, buildings, and eq	uipment: basis >			
		Less: accumulated depi	reciation (attach schedule) ▶	0.00	0.00	0.00
	15	Other assets (describ	pe ▶)	0.00	0.00	0.00
	16	Total assets (to	be completed by all filers—see the			,
		ınstructions. Also, se	e page 1, item l)	9,370.03	19,605.85	X 0.00
	17	Accounts payable an	d accrued expenses	0.00	0.00	
S	18	Grants payable		0.00	0.00	
Liabilities	19	Deferred revenue .		0.00	0.00	
ij	20	, , ,		0.00	0.00	
<u>.</u>	21	Mortgages and other	notes payable (attach schedule)	0.00	0.00	•
_	22	Other liabilities (desc		0.00	0.00	-
	23	Total liabilities (add	lines 17 through 22)	0.00	0.00	,
Balances			llow SFAS 117, check here ▶ ☐ 24 through 26, and lines 30 and 31.			· ;
ğ	24	Unrestricted		0.00	0.00	
ä	25	Temporarily restricted	d	0.00	0.00	
	26	Permanently restricted	ed	0.00	0.00	1
Net Assets or Fund		Foundations that do and complete lines	o not follow SFAS 117, check here ► ✓ 27 through 31.			
ō	27	Capital stock, trust p	rıncıpal, or current funds	0.00	0.00	
ts	28	Paid-in or capital sur	plus, or land, bldg., and equipment fund	0.00	0.00	
SS	29	Retained earnings, acc	umulated income, endowment, or other funds	0.00	0.00	ļ !
Ř	30	Total net assets or f	fund balances (see instructions)	9,370.03	19,605.85	
ē	31	Total liabilities a	nd net assets/fund balances (see			
_		instructions)	<u> </u>	9,370.03	19,605.85	-1
Pa	rt III	Analysis of Char	nges in Net Assets or Fund Balances			
1			palances at beginning of year-Part II, colu			
			d on prior year's return)			9,370.03
2			line 27a			10,235.82
3			ed in line 2 (itemize)		3	0.00
4					4	19,605.85
5	Decr	reases not included in	line 2 (itemize) ► alances at end of year (line 4 minus line 5) – I		5	0.00
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)—I	Part II, column (b), lir	ne 30 6	19,605.85
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Part	(a) List and describe the kind(osses for Tax on Investn s) of property sold (for example, real e or common stock, 200 shs MLC Co)	state,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>						
b	·					
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		n or (loss) f) minus (g))
a					-	
<u>b</u>						
С						
<u>d</u>						
е						·
	Complete only for assets show	ng gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (Co	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any	col (k), but no	t less than -0-) or rom col (h))
а				,		
b						
С						
d						
е						
2	Capital gain net income or (r		also enter in Pa , enter -0- in Pa		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c). See instru				
				· 1	3	
Part	V Qualification Under	Section 4940(e) for Redu	ced Tax on N	let Investment	Income	
Was t		this part blank. ection 4942 tax on the distribu alify under section 4940(e). Do			pase period?	☐ Yes ☐ No
1	Enter the appropriate amour	nt in each column for each yea	ar; see the instri	uctions before ma	akıng any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	s Net value o	(c) of noncharitable-use as		(d) inbution ratio divided by col (c))
	2016					
	2015		-			
	2014					
	2013					
	2012					
2	Total of line 1, column (d)				. 2	
3		r the 5-year base period—div ndation has been in existence				
4	Enter the net value of nonch	arıtable-use assets for 2017 fı	rom Part X, line	5	4	
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investment	income (1% of Part I, line 27b))		. 6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distributions If line 8 is equal to or greate				. 8	

P	a	a	e	4
г	а	ч	С	_

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstruc	tion	s)					
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)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check								
	here ▶ ☐ 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-)								
3	Add lines 1 and 2								
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)								
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		_						
6	Credits/Payments:		- {						
a	2017 estimated tax payments and 2016 overpayment credited to 2017 Exempt foreign organizations—tax withheld at source 6b		- 1	Ì					
b	Tax paid with application for extension of time to file (Form 8868) . 6c		}						
c 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								
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed								
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10								
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11								
Part	VII-A Statements Regarding Activities	-							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Y	/es	No					
	participate or intervene in any political campaign?	1a		✓					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b							
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			Ť					
	published or distributed by the foundation in connection with the activities.								
C	Did the foundation file Form 1120-POL for this year?	1c		✓					
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. ▶ \$			1					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		✓					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			į					
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		√ ·					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>,</u>					
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		√					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>					
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 legislation that effectively amends the governing instrument so that no mandatory directions that								
	conflict with the state law remain in the governing instrument?	6		1					
7	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 XV	7	İ	✓					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions ▶			:					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1					
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		·-·-					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or								
-	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"	-							
	complete Part XIV	9		✓					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their								
	names and addresses	10		✓					

Part	VII-A Sta	atements Regarding Activities (continued)					
						Yes	No
11	meaning of se	during the year, did the foundation, directly or indirectly, own a controlled action 512(b)(13)? If "Yes," attach schedule. See instructions			11		✓
12		lation make a distribution to a donor advised fund over which the foundatio dvisory privileges? If "Yes," attach statement. See instructions			12		✓
13	•	ition comply with the public inspection requirements for its annual returns and exer		,	13		✓
	Website addre						
14		e in care of David Anderson Telepho	ne no. 🕨	937	7-243-	0403	
	Located at ▶	3776 South High Street, Columbus, OH	ZIP+4 ▶		4320		
15		(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —ch amount of tax-exempt interest received or accrued during the year		 15			▶ ⊔
16		uring calendar year 2017, dıd the foundation have an interest in or a signature				Yes	No
		securities, or other financial account in a foreign country?			16		✓
		uctions for exceptions and filing requirements for FinCEN Form 114. If "Yes,	enter th	e name of			
	the foreign co				<u></u>		
Part		atements Regarding Activities for Which Form 4720 May Be Required				Yes	No
		20 if any item is checked in the "Yes" column, unless an exception applie	S.			163	140
та		ar, did the foundation (either directly or indirectly): the sale or exchange, or leasing of property with a disqualified person?		s 🗸 No			1
		noney from, lend money to, or otherwise extend credit to (or accept it from)		3 🖭 110		:	
		ed person?	_	s ✓ No	-		1
		bods, services, or facilities to (or accept them from) a disqualified person?		=			
		pensation to, or pay or reimburse the expenses of, a disqualified person?		s 🗸 No			}
	(5) Transfer a	iny income or assets to a disqualified person (or make any of either available		s 📝 No			
	(6) Agree to p	pay money or property to a government official? (Exception. Check "No" if t	ne				
	foundation	n agreed to make a grant to or to employ the official for a period af on of government service, if terminating within 90 days.)	er	s 🗸 No			
b	If any answer i	is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions descr	ibed in Re	egulations			
		41(d)-3 or in a current notice regarding disaster assistance? See instructions selying on a current notice regarding disaster assistance, check here		 . ▶□	1b		
С		dation engage in a prior year in any of the acts described in 1a, other than e		_			1
	were not corre	ected before the first day of the tax year beginning in 2017?			1c		1
2	operating four	ure to distribute income (section 4942) (does not apply for years the founda indation defined in section 4942(j)(3) or 4942(j)(5)).		a private			
а		tax year 2017, did the foundation have any undistributed income (lines 6d a	_	- [Z]A1-		1	
		for tax year(s) beginning before 2017?	. ∐Ye	s ✓ No			
1	·	he years 20, 20, 20, 20	coction	10/2/2)/2)			
D	(relating to in	years listed in 2a for which the foundation is not applying the provisions of correct valuation of assets) to the year's undistributed income? (If applying se	ction 49	+342(a)(2) 12(a)(2) to	1		
	all years listed	d, answer "No" and attach statement—see instructions.)			2b		1
С	-	ons of section 4942(a)(2) are being applied to any of the years listed in 2a, list		here			
_		20 , 20 , 20	•				
3a	Did the found	dation hold more than a 2% direct or indirect interest in any business enterpr	se				
	•	uring the year?	. Ye				
b	If "Yes," did	it have excess business holdings in 2017 as a result of (1) any purchase by	the four	dation or			
		persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period					
		er under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest			1		
	tne 10-, 15-,	, or 20-year first phase holding period? (Use Schedule C, Form 4720, to ad excess business holdings in 2017.)	ueterm	пе п те	26		⁻
4-		lation invest during the year any amount in a manner that would jeopardize its ch			3b 4a	 	1
4a b		lation make any investment in a prior year (but after December 31, 1969) that				1	•
-		rpose that had not been removed from jeopardy before the first day of the tax year			4b		1

_	_
rage	Q

Pan	VIES Statements Regarding Activities	tor w	Inich Form	4/20	мау ве н	equire	a (contir	nuea)			
5a	During the year, did the foundation pay or incur a	-								Yes	No
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	✓ No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,									. 1	!
	directly or indirectly, any voter registration drive?									i l	ł
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									ı İ	}
	(4) Provide a grant to an organization other than a charitable, etc., organization described in										
	section 4945(d)(4)(A)? See instructions										ļ
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in										
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions										
	Organizations relying on a current notice regarding										
С	If the answer is "Yes" to question 5a(4), does the										1
	because it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No		. 1	1
	If "Yes," attach the statement required by Regula									. [ĺ
6a	Did the foundation, during the year, receive any		-	-		emiums	_	_		i 1	1
	·					•	Yes	✓ No			
b	Did the foundation, during the year, pay premium	ıs, dıre	ctly or indired	ctly, on	a personal	benefit	contract	?.	6b		
_	If "Yes" to 6b, file Form 8870.									. 1	1
_	At any time during the tax year, was the foundation a		•				Yes	_			
b Par	If "Yes," did the foundation receive any proceeds VIII Information About Officers, Direct								7b		
rail	and Contractors	1015, 1	rustees, rt	Junua	uon man	iyers,	migrily F	alu El	пріоу	ees,	
1	List all officers, directors, trustees, and found	ation r	managers an	d their	compens	ation S	See instru	ctions			
<u> </u>			e, and average		mpensation		Contributions	e to			
	(a) Name and address	hours per week devoted to position		(If not paid, enter -0-)		employee benefit plans and deferred compensation		piano j	(e) Expense accou		
Jane T	avlor						io do on o o o o o o o o o o o o o o o o				
		Preside	ent		0.00			0.00			0.00
Mary C	onahue										
331 Sh	ı	Vice Pr	esident		0.00			0.00			0.00
David .	Anderson	Treasu	rer								
<u>15114</u>		2 hrs/m	·		0.00		0.00				0.00
Jerry E	Borin										
<u>9694 S</u>		Secreta			0.00			0.00			0.00
2	Compensation of five highest-paid employee "NONE."	s (oth	er than thos	se incli	uded on li	ne 1—:	see instri	uctions). If no	one, e	enter
_			(b) Title, and a				(d) Contribu		(e) Expe	nee 201	
	(a) Name and address of each employee paid more than \$50,00	0	hours per v devoted to po		(c) Comper	sation	plans and c	leferred		allowan	
 None					·				-		
				_							
]					1			
		•••									
		_									
								_ [_	
Total	number of other employees paid over \$50,000 .							. ▶			
									orm 99	0-PF	(2017)

3	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	."
_ -	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
		
_,		
Total r	number of others receiving over \$50,000 for professional services	
Part	IX-A Summary of Direct Charitable Activities	<u> </u>
		
	he foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of nizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
	rovided emergency supplies/services to senior citiznes in the Central Ohio area who otherwise would not be able	
to	obtain those supplies/services through other public means and because they are not financially able to do it	
	nemselves.	9,006.2
2		
3 -		
4 _		
	N. D. Community of Drawn and Drawn and American American	
Part	IX-B Summary of Program-Related Investments (see instructions) ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	The tile two largest program-related investments made by the foundation during the tax year of lines 1 and 2	Amount
٠		
2		
		<u> </u>
	her program-related investments. See instructions	
3		
Total.	Add lines 1 through 3	
		Form 990-PF (201

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn founc	lations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0.00
b	Average of monthly cash balances	1b	12,661.74
C	Fair market value of all other assets (see instructions)	1c	0.00
d	Total (add lines 1a, b, and c)	1d	12,661.74
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.00
3	Subtract line 2 from line 1d	3	12,661.74
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	189.93
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,471.81
6	Minimum investment return. Enter 5% of line 5	6	623 59
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	oundatio	ns
1	Minimum investment return from Part X, line 6	1	623.59
2a	Tax on investment income for 2017 from Part VI, line 5 2a 0.00		
b	Income tax for 2017 (This does not include the tax from Part VI.) 2b 0.00	1	
C	Add lines 2a and 2b	2c	0.00
3	Distributable amount before adjustments Subtract line 2c from line 1	3	623.59
4	Recoveries of amounts treated as qualifying distributions	4	0.00
5	Add lines 3 and 4	5	623.59
6	Deduction from distributable amount (see instructions)	6	0.00
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	623.59
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0.00
b	Program-related investments—total from Part IX-B	1b	0.00
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.00
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.00
b	Cash distribution test (attach the required schedule)	3b	0.00
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b. See instructions	5	0.00
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.00
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	whether	the foundation

1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				623.59
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only			0.00	
þ	Total for prior years: 20,20,20		0.00		
3	Excess distributions carryover, if any, to 2017:		1		į
a	From 2012	1		ŀ	
þ	From 2013	•			Í
C	From 2014				
d	From 2015	-			
e	From 2016			ì	į
f 4	Total of lines 3a through e	0.00			
а	Applied to 2016, but not more than line 2a .		[-		
-	Applied to undistributed income of prior years			0.00	
_	(Election required—see instructions)		0.00		
С	Treated as distributions out of corpus (Election		0.00		
-	required—see instructions)	0.00			!
d	Applied to 2017 distributable amount	0.00			0.00
e	Remaining amount distributed out of corpus	0.00	· · · · · · · · · · · · · · · · · · ·		0.00
5	Excess distributions carryover applied to 2017	0.00			0.00
	(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:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.00			
b	Prior years' undistributed income. Subtract				ş
	line 4b from line 2b		0.00		1
С	Enter the amount of prior years' undistributed				
-	income for which a notice of deficiency has	,			1
	been issued, or on which the section 4942(a)		İ		Í !
	tax has been previously assessed		0.00		!
đ	Subtract line 6c from line 6b. Taxable				
	amount-see instructions	i	0 00		
e	Undistributed income for 2016. Subtract line				1
	4a from line 2a. Taxable amount-see	Ì	\		! !
	instructions			0.00	
f	Undistributed income for 2017 Subtract lines				
	4d and 5 from line 1. This amount must be	Ì			
	distributed in 2018				623.59
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section			ļ	
	170(b)(1)(F) or 4942(g)(3) (Election may be			-	i 1
_	required—see instructions)	0.00	-		
8	Excess distributions carryover from 2012 not				J
_	applied on line 5 or line 7 (see instructions) .	0.00			
9	Excess distributions carryover to 2018.				,
	Subtract lines 7 and 8 from line 6a	0.00			
10	Analysis of line 9	ĺ		-	, !
a	Excess from 2013				i 1
b	Excess from 2014 0.00	1		ŀ	
C	Excess from 2015	}		j	
d	Excess from 2016	į			,
e	Excess from 2017 0.00	į.	3	l l	

Part	XIV Private Operating Founda	tions (see ınstru	ictions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective fo			· •		
b	Check box to indicate whether the four	ndation is a private	operating foundate	tion described in se	ction	(3) or 4942(j)(5)
2a		Tax year	T	Prior 3 years		<u> </u>
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	investment return from Part X for each year listed			,,		
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4 for each year listed .					
d	Amounts included in line 2c not used directly				<i></i>	
_	for active conduct of exempt activities					
е	Qualifying distributions made directly				 -	
	for active conduct of exempt activities.			jin n 1		
	Subtract line 2d from line 2c .			1		
3	Complete 3a, b, or c for the				.	
	alternative test relied upon:					
а	"Assets" alternative test—enter.					
a	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3	<u>-</u>				
	of minimum investment return shown in Part X, line 6 for each year listed					
_	"Support" alternative test—enter.			- "	_	
С						
	(1) Total support other than gross investment income (interest,	:				
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties) (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					
	an exempt organization					
	· ·					
Part	(4) Gross investment income XV Supplementary Information	n (Complete th	is part only if the	he foundation h	ad \$5,000 or me	oro in acceto et
rart	any time during the year-	•	•	ne iounuation n	au \$5,000 or mi	ore in assets at
1	Information Regarding Foundation		13.7			
a	List any managers of the foundation v		ited more than 2%	6 of the total contr	hutions received	by the foundation
_	before the close of any tax year (but o	only if they have co	ontributed more th	an \$5.000). (See se	ection 507(d)(2))	by the loundation
	, , , ,	,,		45,555). (555 5.	, o o o . (a,(=,,,	
b	List any managers of the foundation	who own 10% or	more of the stor	ck of a corporation	(or an equally la	rae portion of the
_	ownership of a partnership or other er					igo portion or the
		• /		•		
2	Information Regarding Contribution	. Grant. Gift. Loa	n. Scholarship, e	tc. Programs:		
	Check here ▶ ☑ If the foundation				organizations and	does not accept
	unsolicited requests for funds. If the fo	oundation makes	aifts, grants, etc	to individuals or or	ganizations under	other conditions
	complete items 2a, b, c, and d. See in		J , J ,		g	
а	The name, address, and telephone nu		dress of the person	n to whom applicat	tions should be ac	ddressed:
_			po.oo		Silodia bo de	
b	The form in which applications should	be submitted and	Information and	materials they shou	ıld ınclude:	
	The state of the s	. I III				
с	Any submission deadlines:					
-	•					
d	Any restrictions or limitations on aw	ards, such as by	y geographical ar	reas, charitable fie	lds, kinds of inst	titutions, or other
	factors:	·		,	,	_, •

Pari	XV Supplementary Information (continue)	inued)			
3	Grants and Contributions Paid During t	ne Year or Approv		ture Payment	·
	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	Contribution	
a	Paid during the year				
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		}			
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		<u></u>	<u> </u>		
	Total			<u></u> ▶ 3a	
b	Approved for future payment				
]			
		}			
		i			1
			L		
	Total			N 01-	i .

	t XV r gros	Analysis of Income-Producing Acts amounts unless otherwise indicated.		isiness income	Excluded by secti	(e)	
_	,		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Prog a	ram service revenue					
	ь -						
	c				1		
	d _					· ·	
	е _						
	f						
	g F	ees and contracts from government agencies				•	
2	Mem	bership dues and assessments					
3		est on savings and temporary cash investments					
4		lends and interest from securities					
5		rental income or (loss) from real estate					
		Debt-financed property					
_		lot debt-financed property					
_		rental income or (loss) from personal property					
7		or (loss) from sales of assets other than inventory					
8 9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11		er revenue: a					
	b						
	c -						
	d _						
	е _						
			-		<u> </u>		
						13	
•		sheet in line 13 instructions to verify calculation					
	rt XV e No.		•				
LIII	e 110. ▼	Explain below how each activity for which accomplishment of the foundation's exempt put	ncome is report rposes (other tha	ortea in column n by providing fui	e) of Part XVI) ds for such purp	-A contributed i oses) (See instru	mportantly to the ctions)
							·
				*	· · · · · · · · · · · · · · · · · · ·		
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		 				······································	
				-		-	
							
		 					

		Organization	ons														
1	ın se	ne organization of ection 501(c) (onizations?														Yes	No
а	Trans	fers from the rep	porting four	ndation to	a nonchar	itable exe	mpt org	anıza	ition o	f.							1 1
		ash	-												1a(1)		1
		ther assets .			• • •		•				•	•	•	•	1a(2)	-	1
b		r transactions.			• •				• •		• •	•	•		14(2)		+
b			a nanaha-	table even											4 15 (4)	.	 '
		ales of assets to						•			• •	•	•		1b(1)	+	/
		urchases of asse			-	-		•							1b(2)		/
		ental of facilities,										•		•	1b(3)		
	(4) Reimbursement arrangements .									<i>.</i>					1b(4)		✓
	(5) L	oans or loan gua	rantees .												1b(5)	<u> </u>	✓
	(6) P	erformance of se	ervices or n	nembershij	or fundra	aising solic	citations	s.							1b(6)	<u> </u>	✓
С	Shari	ng of facilities, e	quipment,	mailing list	s, other as	ssets, or p	aid emi	oloye	es .						1c		1
d	If the	answer to any	of the abov	ve ıs "Yes,	" complet	e the follo	wing s	chedi	ule. Co	olumn	(b) sl	nould	alwa	ys sh	now the	fair n	narket
		of the goods, o															
		in any transaction															
(a) Line		b) Amount involved		me of noncha											sharing an		
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	desc	e foundation direction 5 for complete the	501(c) (othe	er than sec											☐ Ye	s 🗌	No
	11 16		<u> </u>	Scriedule.	(6)	Tunn of are								-41-			
(a) Name of organization				(b) Type of organization					_	- (1) Desc	npuon	or rela	tionship			
						_											
							_				_		_		_		
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled												vledge and	belief,	rt is true,		
Sign Here		and complete Deck	arer (other than	an taxpayer) is based on all information of which prepared by the same of the				, ,	May the I with the p					e IRS disc e preparer	shown	below?	
_	Signature of officer or trustee Date Title								structions	∟Yes	UNO						
	-	Print/Type preparer	's name		Preparer's s	signature	· · ·		$\neg \neg$	Date			<u> </u>		PTIN		
Paid					'	-							Check self-en		·		
Prepa		Firmle and			<u> </u>		_		l					اع و د. م.	- 1		
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	Firm's address ▶ Phone no																