Form .990-PF

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. Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

Fo	carer	ndar year 2017 or tax year beginning		, a	nd ending				
	ne of for					identification number			
The	e Ephr	aim Project, Inc							
Nui	nber and	street (or PO box number if mail is not delivered to street address)		Room/suite	=]	20-4149806			
		catur Street			B Telephone	number (see instruction	ns)		
City	or town	, state or province, country, and ZIP or foreign postal code							
Orl	ando_	FL	3280	<u>7</u>		(407) 415-024			
For	eign cou	intry name Foreign province/state/county	Foreig	n postal cod	le C If exempt	ion application is pendin	g, check here 🕨 🔲		
							_		
G	Check		of a former pu	blic chari	ty D 1. Foreig	n organizations, check h	ere ► 📗		
		☐ Final return ☐ Amended ret	turn		-	n organizations meeting			
		Address change				here and attach comput			
Н	Check	k type of organization. 💢 Section 501(c)(3) exempt pri	vate foundation	n al		foundation status was te 07(b)(1)(A), check here	minated under		
	Section	on 4947(a)(1) nonexempt charitable trust	able private fo	<u>undation</u>	5555	, (b)(1)() (); dilack iioio			
1	Fair m	narket value of all assets at J Accounting method	🛛 Cash [☐ Accru	ial I	idation is in a 60-month	termination		
	end o	f year (from Part II, col (c), Other (specify)				tion 507(b)(1)(B), check			
	line 16	6) ▶ \$ (Part I, column (d) must be	e on cash basis)					
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue a	ind			(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily	expenses pe		Net investment income	(c) Adjusted net income	for charitable purposes		
		equal the amounts in column (a) (see instructions))	books			1,1001112	(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)		,770 📆		· Alder Alder	W .744		
	2	Check ▶ ☐ if the foundation is not required to attach Sch B	1.5 A.V	11.	<u> </u>	constitution in	**		
	3	Interest on savings and temporary cash investments					1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
	4	Dividends and interest from securities							
	5a	Gross rents					1 1 1 1 1 1		
	b	Net rental income or (loss)	2 4 8 x 1 2 X	1 i 21					
ne	6a	Net gain or (loss) from sale of assets not on line 10		1 7 7		45.7%			
eu	b	Gross sales price for all assets on line 6a		533.					
Revenue	7	Capital gain net income (from Part IV, line 2)		<i></i>	_ 				
œ	8	Net short-term capital gain							
	9	Income modifications				a. se e. · · · · · · · · · · · · · · · · · ·			
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold	* * * * : ;	1 . 4	````````````````		2002. 24		
	C	Gross profit or (loss) (attach schedule)	·	***	<u> </u>				
	11	Other income (attach schedule)	400	770					
	12	Total. Add lines 1 through 11	403	,770	0	0	*******		
enses	13 14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages	 			<u> </u>	<u> </u>		
ů.	15	Pension plans, employee benefits							
ğ	16a	Legal fees (attach setebolie) PR 06 2018							
Exp	b	Legal fees (attach schedule) PR 0 6 2018 Accounting fees (attach schedule)							
Ş	C	Other professional thes (attaches the dule)	ļ		<u> </u>				
ati	17	Other professional tees (attach schedule) Interest OGDEN, UT				<u></u>			
str	18	Taxes (attach schedule) (see instructions)							
Ξ.	19	Depreciation (attach schedule) and depletion							
돈	20	Occupancy					<u> </u>		
¥	21	Travel, conferences, and meetings .		-					
Operating and Administrative	22	Printing and publications .							
<u> </u>	23	Other expenses (attach schedule)	21	137					
ī	24	Total operating and administrative expenses.	<u></u>						
ati		Add lines 13 through 23	21	,137	0	0	0		
Je.	25	Contributions, gifts, grants paid	381				381,171		
Ö	26	Total expenses and disbursements. Add lines 24 and 25		308	0	0	381,171		
_	27	Subtract line 26 from line 12		79 G			361,171		
	a a	Excess of revenue over expenses and disbursements .	AND THE REAL PROPERTY.	462					
	b	Net investment income (if negative, enter -0-)	58.8-1-49		0		24×10×1		
	c	Adjusted net income (if negative, enter -0-)				~, ~ ~			

For Paperwork Reduction Act Notice, see instructions.

HTA

990-PF (2017)

Da	rt II		Attached schedules and amounts in the description column	Beginning of year	End o	of year	
Ге	444		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	2,094	3,556		
	2٠	Savings and tempor	rary cash investments .				
	3`	Accounts receivable	· •				
		Less allowance for	doubtful accounts				
	4	Pledges receivable					
	-	_	doubtful accounts				
	5	Grants receivable					
	6		om officers, directors, trustees, and other				
			s (attach schedule) (see instructions)	1			
	7	•	receivable (attach schedule)				
	′	Less: allowance for dou			and the second s		
S		Inventories for sale		 			
Assets	8						
SS	9		and deferred charges	} 			
٩	10a		state government obligations (attach schedule)	ļ <u>-</u>		 	
	b	•	prate stock (attach schedule)				
	C		orate bonds (attach schedule) .	7 6 9 7 7 3 7 2 8		2	
	11		Idings, and equipment, basis			ا با الشاك المستالة	
		•	reciation (attach schedule)				
	12	Investments—morto	•				
	13	Investments—other	· ·				
	14	Land, buildings, and eq	'			ià Wiyin	
		•	reciation (attach schedule)	<u> </u>			
	15	Other assets (descr					
	16	•	completed by all filers—see the	1		<i>[</i> .	
		instructions Also, s		2,094	3,556	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	17	• •	ind accrued expenses				
Ş	18	Grants payable					
itie	19	Deferred revenue					
Liabilities	20	Loans from officers, d	irectors, trustees, and other disqualified persons				
ja.	21	Mortgages and other	er notes payable (attach schedule)				
	22	•	scribe ► Amex CC due				
	23	Total liabilities (ad	d lines 17 through 22)	0	0		
s			follow SFAS 117, check here				
alances		and complete lines	s 24 through 26, and lines 30 and 31.				
an	24	Unrestricted		2,094	3,556		
3al	25	Temporarily restricted	ed .				
a	26	Permanently restric					
E			do not follow SFAS 117, check here 🕒 🗌	ļ			
L		and complete lines	_				
0	27		principal, or current funds .				
et	28		ırplus, or land, bidg , and equipment fund				
SS	29	Retained earnings, ac	ccumulated income, endowment, or other funds				
t A	30	Total net assets or	fund balances (see instructions)	2,094	3,556		
Net Assets or Fund B	31		inet assets/fund balances (see				
		instructions)	_ <u></u>	2,094	3,556		
_	rt III		anges in Net Assets or Fund Balances				
1			alances at beginning of year—Part II, column (a)	, line 30 (must agree	with		
			d on prior year's return)		1	2,094	
2		amount from Part I,		•	2	1,462	
3			led in line 2 (itemize)		3	<u>.</u>	
4		nes 1, 2, and 3			4	3,556	
5		eases not included in			5		
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)—Par	t II, column (b), line 30	0 6	3,556	

Page 3

Part	a) List and describe the ki	d Losses for Tax on Investn ind(s) of property sold (for example, real est		Income	(b) How acquired P—Purchase		Date acquired	(d) Date sold
	2-story brick wareho	use, or common stock, 200 shs MLC Co)			D—Donation	(n	no , day, yr)	(mo , day, yr)
<u> 1a</u>								
b								
<u> </u>								
<u>d</u>							_	
е					L	 		<u> </u>
					other basis nse of sale			n or (loss) f) minus (g))
<u>a</u>								
<u>b</u>						ļ		
<u> </u>						<u> </u>		
<u>d</u>		<u></u>						
е	Complete only for accets of	nowing gain in column (h) and owned	l by the	foundation	on 12/21/60	<u> </u>		
	Complete only for assets si	nowing gain in column (h) and owned	by the					(h) gain minus
	(i) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess	sofcol(ı) (ı)ıfanv			t less than -0-) or rom col (h))
а								
<u>a</u>								
c								
d								
e								
		f If gain	also e	nter in Par	t Lline 7			
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line If (loss), enter -0- in Part I, line					•	2		0
3	Net short-term capital gair	or (loss) as defined in sections 1				_		
-		, line 8, column (c) See instruction			r-0- in 1			
	Part I, line 8			.000), 01110	}	3		0
Part		der Section 4940(e) for Redu	iceq .	Tax on N	et Investment		me	
Was t	tion 4940(d)(2) applies, leav he foundation liable for the s s," the foundation doesn't qu	re this part blank section 4942 tax on the distributat Jalify under section 4940(e) Do n	ole am	ount of any	y year in the base part	e perio	od?	Yes No
1		unt in each column for each year,		<u> </u>		ng anv	entries	
	(a)	(b)			(c)	3 7		(d)
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	.	Net value of	f noncharitable-use as	sets		ribution ratio divided by col. (c))
	2016		3,740			0	(00/ (2)	0 000000
	2015		2,092			0		0 000000
	2014		3,356			ō		0 000000
	2013		3,388			0		0 000000
	2012		1,609			0		0 000000
		•						
2	Total of line 1, column (d)						2	0 000000
3	Average distribution ratio f	or the 5-year base perioddivide	the to	tal on line	2 by 5 0, or by	Ì		
	the number of years the fo	undation has been in existence if	less th	nan 5 years	S		3	0 000000
			_					
4	Enter the net value of none	charitable-use assets for 2017 fro	m Part	t X, line 5		ļ	4	
_								
5	Multiply line 4 by line 3	•					5	·····
6	Enter 10/ of not investmen	tinggmo (49/ of Dort Line 27h)						
6	Liner 176 of Het Investmen	t income (1% of Part I, line 27b)	•			}	6	0
7	Add lines 5 and 6						_	•
•	ridu inica o anu 0 .	•				}	7	0
8	Enter qualifying distribution	ns from Part XII, time 4				l	8	^
-		ter than line 7, check the box in Pa	art \/I	line 1h an	d complete that =	ا د باد		rate. See the
	Part VI instructions		V I, I	ID, all	a complete that p	ait US	miga i /o lax	TAIG OGG ING

Part ^a		ons)				
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 and enter 1% of Part I, line 27b 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). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	ا				
2	(4),(-)					
3 4	Add lines 1 and 2	 				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	0				
6	Credits/Payments	<u>-</u>				
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a	1				
b	Exempt foreign organizations—tax withheld at source 6b	1				
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld . 6d	230				
7	Total credits and payments Add lines 6a through 6d	o				
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 . • 9	0				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0				
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ► Refunded ► 11	0				
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	🗼 💹 Yes 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					
	published or distributed by the foundation in connection with the activities	### - / * * * `				
C	Did the foundation file Form 1120-POL for this year?	1c X				
u	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?	4a X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b N/A				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5				
	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 legislation that effectively amends the governing instrument so that no mandatory directions that	**************************************				
	conflict with the state law remain in the governing instrument?	6 X				
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 X				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions					
	FL CONTRACTOR OF THE PROPERTY					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
_	(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)	The state of the s				
	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If					
40	"Yes," complete Part XIV	9 X				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10 X				
		1 1 1 1 1				

Part	VII-A · Statements Regarding Activities (continued)								
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	L	Yes	No					
	the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions .	11		X					
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 ► TheEphriamProject org	1 024							
14	The books are in care of ► Rachelle Hood Telephone no ► (407) 45	1-024	<u></u>						
	Located at ► 5479 Decatur Street Orlando FL ZIP+4 ► 32807								
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 2017, did the foundation have an interest in or a signature or other authority		Yes	No					
10	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	Ì	_						
Part	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)	- Tag	4						
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?).	, ź					
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		·						
	disqualified person?	8 A. 85.	San .	, î					
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	7.	, ,×	, , ,					
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	2 % 2 % 30 %	, **.	`					
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		3.	~ - ,					
	the benefit or use of a disqualified person)?	\$ - ·	***	\$					
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1	\$	100					
	foundation agreed to make a grant to or to employ the official for a period after	1							
	termination of government service, if terminating within 90 days)	* C							
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	N/A						
	Organizations relying on a current notice regarding disaster assistance, check here		, m.	5					
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		. (4 ³	M					
	were not corrected before the first day of the tax year beginning in 2017?	1c		X					
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	34.	-,M	\					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	**	*, `						
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	1.	XA.						
	6e, Part XIII) for tax year(s) beginning before 2017?		35 m	, , , ,					
	If "Yes," list the years 20 11, 20 , 20 , 20	- 2							
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		37	1					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		me of	- 31					
_	all years listed, answer "No" and attach statement—see instructions)	2b		_ X					
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					
2~	▶ 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise								
3a	at any time during the year? Yes X No		14	c					
h	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or		¾; ≻.	1.					
b	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		* (* * * * * * * * * * * * * * * * * *	ľ × ľ					
	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 2017)	3b	N/A						
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	14/1	X					
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>	-,	<u> </u>					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	aarra Nertha	x `					

Form 99	0-PF (2017)	The Ephraim Project, Inc							20-41	49806	Pa	ge 6
Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 N	lay Be Re	quire	d (contin	ued)			
 5a		year, did the foundation pay or incur an n propaganda, or otherwise attempt to			section	4945(e))?		Yes	X No			
		e the outcome of any specific public el or indirectly, any voter registration drive		see section 49	955), or	to carry on	,	Yes	X No			•
	(3) Provide	a grant to an individual for travel, stud	y, or oth	er sımilar pur	poses?			Yes	X No	.		ļ
		a grant to an organization other than a 4945(d)(4)(A)? See instructions	charita	ble, etc., orga	ınızatıo	n described	ın	☐ Yes	⊠ No	,		
	(5) Provide for any purpose other than religious, c purposes, or for the prevention of cruelty to ch				terary, o	or education	nal	Yes	X No	,		£
b	•	ver is "Yes" to 5a(1)–(5), did any of the s section 53 4945 or in a current notice			-				d in	5b	N/A	i
С	If the answ	ons relying on a current notice regarding er is "Yes" to question 5a(4), does the f maintained expenditure responsibility fo	oundati	on claim exen				☐ Yes	► X	٠ .		
6a	Did the fou	ach the statement required by Regulati ndation, during the year, receive any fu				pay premiur	ms	□ v	[V] N.	š., .		· · · · · · · · · · · · · · · · · · ·
b	Did the fou	nal benefit contract? ndation, during the year, pay premiums 6b, file Form 8870	, directly	 y or indirectly,	on a p	ersonal ber	efit cor	Yes	⊠ No	6b	5 4.644	X
7a b Part	At any time If "Yes," did VIII In ar	during the tax year, was the foundation a p. it the foundation receive any proceeds of formation About Officers, Directed Contractors cers, directors, trustees, and foundation	or have a	any net incom rustees, Fo	ie attrib undati	outable to the	e trans gers, I	lighly P		7b	ees,	X
'	List all Olli	(a) Name and address	(b) Title	e, and average irs per week	(c) Co (lf i	mpensation not paid,	(d) empl	Contribution oyee benefit	s to plans		ense acci	
See A	ttached Stat	ement	devoted to position		er	nter -0-) and de		ferred compe	ensation			
				00		0				·		
			00			0				 .		
				00		0						
2	Compensa "NONE."	tion of five highest-paid employees	other t	han those inc	cluded	on line 1—	see in:	structions	s). If no	ne, ent	er	
	(a) Name and	address of each employee paid more than \$50,000)	(b) Title, and a hours per w devoted to po	eek	(c) Compen	sation	(d) Contribi employee plans and compens	benefit deferred	(e) Expe	nse acco	
NONE												
			i	1						-		

Total number of other employees paid over \$50,000

▶

20-4149806

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	ıployees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE`	
	
Total number of others receiving over \$50,000 for professional services . ▶	
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
Program served approximately 17185 meals to homeless people in downtown Orlando and provided	
tolletries, clothing and housing assistance to these people	
they also assisted in getting benefits and jobs for some of these people	381,171
2 Partnered with local churches and ministries in serving urban complexes for several families	
3 Sheltered 20 families, impacting 31 people Provided rent and utilities for subsidies for four families impacting 9 pe	
4 Distributted bus passes, bicycles, wheelchairs, walkers, as well as misc services including mail services	
Assisted with necessary job related items like skid free shoes, work boots and licenses	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	
3	
	<u></u>
Total. Add lines 1 through 3	0
F	orm 990-PF (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign foundati	ons,
	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
b	Average of monthly cash balances	1b	1,733
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,733
е	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	
3	Subtract line 2 from line 1d	3	1,733
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	26
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,707
6	Minimum investment return. Enter 5% of line 5	6	85
Part		tions	
	and certain foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	85
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	85
4	Recoveries of amounts treated as qualifying distributions .	4	
5	Add lines 3 and 4	5	85
6	Deduction from distributable amount (see instructions)	6	85
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 .	7	0
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	381,171
b	Program-related investments—total from Part IX-B	1b	
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	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	381,171
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	381,171
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	ether the four	ndation
	qualifies for the section 4940(e) reduction of tax in those years		

art <u>،</u>	Undistributed income (see instructions				
		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1	Distributable amount for 2017 from Part XI,	Corpus	Tears prior to 2010		
	line 7				
	Undistributed income, if any, as of the end of 2017:			0	
_	Enter amount for 2016 only		2,094		
b	Total for prior years: 20 13 , 20 14 , 20 15		2,034		
3	Excess distributions carryover, if any, to 2017.				
a	From 2012 . 1,103 From 2013 . 830	!			
þ	110111 2010				eco
C.	From 2014				de (
d	From 2015				i
e	From 2016 .	1,933			
Ţ	Total of lines 3a through e	1, 3 33	3	-	
4	Qualifying distributions for 2017 from Part XII,				. ,
	line 4 ▶ \$ 381,171				,
a	Applied to 2016, but not more than line 2a		A88"		
b	Applied to undistributed income of prior years (Election required—see instructions)				
_	Treated as distributions out of corpus (Election				41
С					
	required—see instructions) Applied to 2017 distributable amount	**************************************			
d	Remaining amount distributed out of corpus		2 - NE 30.		-276
е 5	Excess distributions carryover applied to 2017				
o o	(If an amount appears in column (d), the same			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	W. Mar V.
	amount must be shown in column (a))				
6	Enter the net total of each column as				
o	indicated below:				
•	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,933			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		2,094		
С	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
-	amount—see instructions		2,094		81 . TO 10 Ja
е	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines	\$48.00 m			
	4d and 5 from line 1 This amount must be				
	distributed in 2018			Principle of the second	0
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				
	required—see instructions)			(
8	Excess distributions carryover from 2012 not				Profession of the
	applied on line 5 or line 7 (see instructions)	1,103	e. 1		
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a .	830			
10	Analysis of line 9	图10 多重扩		1 Fig. King	
а	Excess from 2013 830	化 图 经国际			
b	Excess from 2014 .				
С	Excess from 2015				
d	Excess from 2016				
е	Excess from 2017	War and the state of the state	1 - 80 3 20 20 20 20 20 20	1 1 2 2 2 2	- 000 DE
					Form 990-PF (2017)

The form in which applications should be submitted and information and materials they should include

Any submission deadlines

factors:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other Form **990-PF** (2017)

Pari	XV Supplementary Information (continued Continued Contin	the Year or America	ad fan Frid	Downsont	
3_	Grants and Contributions Paid During	If recipient is an individual,	}	ure Payment	
	Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				}
]		
			ļ		
					I II
	Total		,	▶ 3a	0
a	Approved for future payment)		
		1			
]		
	Total .			▶ 3b	0

		-A · Analysis of Income-Producing Ad			Fuel de at	E40 E40 - C44	
Ente	er gros 、	s amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Progr	ram service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
	a						
	ь <u> </u>		<u> </u>				
	c _		ļ		_	· · · · · · · · · · · · · · · · · · ·	
	d _				 		
	e _						
							
•		ees and contracts from government agencies			 		
2		bership dues and assessments					
3 4		ends and interest from securities		<u> </u>			
5		ental income or (loss) from real estate	~.	· * * * * * * * * * * * * * * * * * * *	15	8/3-X-	£
•		Debt-financed property .	326 68		w.185	*** · · · · · · · · · · · · · · · · · ·	
		lot debt-financed property					
6		ental income or (loss) from personal property					-
7		r investment income					·
8	Gain	or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	r revenue a					
	b _		_				
	c _						
	d _						
	e _						
		otal Add columns (b), (d), and (e)	\$ 1 1 C 25 1	0	12 3/10/2	0	(
		l. Add line 12, columns (b), (d), and (e)				13	
_		sheet in line 13 instructions to verify calculations			<u> </u>	<u></u>	
	rt XVI	1					
Lir —	e No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur	poses (other than	by providing fund	s for such purpos	ses) (See instructi	ons)
_	1	The Ephriam Project located in downtown Orlai				to	
	2	assist the homeless with hot meals, clothinhg,					
	<u>3</u>	job hunts and assisting them with collecting ber					
	5	14,100 meals to 12,000 homeless people 97 P					
	6	finding Jobs, 13 VA SSDI cases were won to as these services	ssist the nomeis	s with income in	o rees were rec	eived for	
	<u> </u>	triese services					-
			·				
_							
				, <u> </u>		·	
						-	
			·				
			·				

Form 990-PF (2017) The Ephraim Project, Inc 20-4149806 Page **13** Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

_		`_ Exempt Org	janizations								
1	Did t	he organization d	irectly or indirectly en	gage in any of the fol	llowing v	with any oth	er organizat	ion described		Yes	No
	ın se	ction 501(c) (other	er than section 501(c)((3) organizations) or	ın sectio	n 527, relat	ing to politic	al	ļ		[
	_	nizations?	• , ,	,		•	•				
а	-		orting foundation to a	noncharitable evem	nt organ	uzation of					١,
4		•	ording louridation to a		pt organ	iization oi			10(1)		'
	(1) C		•	•					1a(1)		├──
		other assets	•	•	•				1a(2)		
b	Othe	r transactions.									:
	(1) S	sales of assets to	a noncharitable exem	pt organization .					. 1b(1)		<u> </u>
	(2) P	urchases of asse	ets from a noncharitab	le exempt organization	on .				1b(2)		
	٠,		equipment, or other a	. •					1b(3)		
	(4) Reimbursement arrangements										
	(5) Loans or loan guarantees										$\vdash \vdash$
		-							1b(5)		
			rvices or membership						1b(6)		├──
С			quipment, mailing lists						1c_		<u> </u>
d			he above is "Yes," com								
	value	e of the goods, other	er assets, or services gi	ven by the reporting fo	oundatio	n. If the found	dation receiv	ed less than fair r	narket		
	value	in any transaction	or sharing arrangemer	nt, show in column (d)	the valu	e of the good	ls, other ass	ets, or services re	eceived.		
(a) Lin	e no	(b) Amount involved	(c) Name of nonch	naritable exempt organization	on	(d) Desc	ription of transfe	ers, transactions, and	sharing arrai	ngemer	nts
. , -						 		<u></u>	<u>-</u>		
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	-+					+					
			ļ								
						<u> </u>					
						 					
						+					
						 	·				
				 		<u> </u>					
						ļ					
						 					
2a	Is the	foundation direct	tly or indirectly affiliate	ad with or related to	000 05	more tax ex	compt organ	uzations			
Za			01(c) (other than sect				tempt organ	1124110115	☐ Yes	Πи	10
			` ' '		ection 5	21 *	•		1es	<u></u> ''	U
b	IT "YE		following schedule								
		(a) Name of organ	ization	(b) Type of org	anization		 	(c) Description of re	lationship		
							· · · · · · · · · · · · · · · · · · ·				
-		 -									
											——
	Lindo	r nenables of nerusy 1 doo	clare that I have examined this ret	urn uncluding accompanying cal	nedulae and	statements and to	the heet of multi-	nowledge and holist 4:-	truo		
	corre	ct, and complete Declarati	ion of preparer (other than taxpay	er) is based on all information of	ieuules ailu f which nred	aver has any know	rie best of my Kr	iowieuge and belief, ICIS	uue,		
Sign	N	1000	11 0 11	1 2 0		/)			he IRS discuss		
lere		Kach	elle (10m	2 3/29/18		resid	int		ne preparer sho		
	Sigi	nature of officer or trus	itee	Date 7	Title			266 1	ian denotia	Yes	No
		Print/Type preparer's	s name	Preparer's signature			Date		PTIN		
Paid		Norbert N Young		Modsigni	u.	your		Check	ıf [2006	
^o repa					<u> </u>	/ -	3/29/20			ากลด	
Jse C		Firm's name	Norbert N Young, Cf						-3760029		
	<u> </u>	Firm's address	401 W Colonial Drive	e, Suite 801, Orlando	, FL 32	8,04		Phone no (40	07) 422-15		
									- 001	DE	

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

The Ephraim Project, Inc.			20-4149806				
Organization type (check	one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1)	nonexempt charitable trust not treated as a p	rivate foundation				
	527 politica	al organization					
Form 990-PF	X 501(c)(3) e	501(c)(3) exempt private foundation					
	4947(a)(1)	nonexempt charitable trust treated as a private	e foundation				
	501(c)(3) ta	axable private foundation					
• •	· · · · · · · · · · · · · · · · · · ·	neral Rule or a Special Rule. Installation can check boxes for both the General	Rule and a Special Rule See				
General Rule							
	or property) from any	-EZ, or 990-PF that received, during the year, one contributor. Complete Parts I and II. See					
Special Rules							
regulations under 13, 16a, or 16b, a	sections 509(a)(1) and nd that received from a	501(c)(3) filing Form 990 or 990-EZ that met to 170(b)(1)(A)(vi), that checked Schedule A (Form one contributor, during the year, total control orm 990, Part VIII, line 1h, or (ii) Form 990-EZ,	orm 990 or 990-EZ), Part II, line ibutions of the greater of (1)				
contributor, during	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
contributor, during contributions total during the year for General Rule app	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization	that isn't covered by the	e General Rule and/or the Special Rules does	n't file Schedule B (Form 990,				

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization Employer identification number
The Ephraim Project, Inc 20-4149806

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed					
(a)` No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	Brenda Flanagan 2630 Berg Road Apt 130 Southfield MI 48033 Foreign State or Province Foreign Country	\$7,050	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	Anne Van Den Berg 849 Greens Avenue Orlando FL 32804 Foreign State or Province Foreign Country	\$5,552	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	Various Food Stores (In Kind) Various Various FL 32804 Foreign State or Province Foreign Country	\$ 391,168	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province. Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

Name of organization
The Ephraim Project, Inc

Employer identification number 20-4149806

Part ĮI	Noncash Property (see instructions). Use duplicate	copies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3		\$	
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		• \$	

Name of or			Employer identification number				
Part III	m Project, Inc Exclusively religious, charitable, etc., contre (10) that total more than \$1,000 for the year the following line entry. For organizations componentiations of \$1,000 or less for the year. (E. Use duplicate copies of Part III if additional spirits)	from any one contributor. Corpleting Part III, enter the total of nter this information once. See	mplete columns (a) through (e) and exclusively religious, charitable, etc,				
(a) No.	Ose duplicate copies of Part III II additional sp.	ace is needed.					
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
		(e) Transfer of gift					
	Transferee's name, address, and ZIP	+ 4 Relation	Relationship of transferor to transferee				
	For Prov Country						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	(-, ··-··						
	Transferee's name, address, and ZIP	+ 4 Relation	Relationship of transferor to transferee				
	For Prov Country						
(a) No. from	(h) Burnona of sift	(a) Han of wife	(d) Deceription of how wife in hold				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	(c) Transier of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere						
	For Prov Country						
(a) No.	, , , , , , , , , , , , , , , , , , , ,						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
raiti							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP	anchin of transforce to transforce					
	inansieree s name, audress, and ZIP	Relatio	onship of transferor to transferee				
	For Drov.		· · ·				

Part I, Line 23 (990-PF) - Other Expenses

		21,137	0	0	0
	,	Revenue and			Disbursements
J	`	Expenses	Net Investment	Adjusted Net	for Charitable
Ĺ	Description	per Books	Income	Income	Purposes
1	Auto Expenses	5,467	0		
2	Board Insurance	599	0		
3	Communications	598	0		
4	Bank Fees	461	0		
5	Meetings	480	0		
6	Office Supplies	811	0		
7	Pest Control	5,171	0		
8	Postage	555	0		
9	Printing	144	0		
10	Professional Services	98	0		
11	Rent	2,292	0		
12	Telephone	3,760	0		
13	Utilities	701	0		
14		0	0		
15		0	0		

Part II, Line 22 (990-PF) - Other Liabilities

		0	0
	Description	Beginning Balance	Ending Balance
1	Amex CC due		

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

The Ephraim Project, Inc

ó		Γ	i		i		Γ.	
	Expertise Account							
0	Benefits	,						
0	Compensation	0	0	0	0	0	0	0
	Avg Hrs Per Week	00 09	10 00	10 00	20 00	10 00	15 00	20 00
	Tie Tie	President	Treasurer	Secretary	Director	Director	Director	Director
	Foreign Country							
	Zip Code	32807	32801	32801	34761	32701	32828	32804
	State	교	근	근	<u></u>	급	교	H
	Cuty		Orlando	Orlando	Осте	Altamonte Spnngs	Orlando	Orlando
	Street	5479 Decatur Street	10 N Summerlin Apt 16	10 N Summerlin Apt 16	2032 Ancient Oak Drive	278 Onenta Point St	14016 Morning Frost Drive	849 Greens Ave
	Check "X" if Business		×					
	Name	Rachelle Hood	Scott Concelman	Tara Concelman	Julian DaCosta	John Paul Conners	Nanda Mueller-Padro	Anne van den Berg
	L	-	2	က	4	'n	9	-
l l								