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.

Form 990-PF (2017)

		nue Service	► Go to www.	irs.gov/Form990PF for	r instructions a	nd th	e lates	t informatio	n. Oper	to Public Inspection
			7 or tax year beginn	ing			, and	ending '		
	me of for						•	A Employer	dentification number	
- Ma	aliasılı I	nitiatives, Inc	•			•				•
Nu	mber and	d street (or PO b	ox number if mail is not deliv	vered to street address)		Room	/suite	1	27-3183146	•
4 (	Carmic	hael Street		•		111	-193	B Telephone	number (see instruction	ns)
Cit	y or town	n, state or provinc	e, country, and ZIP or foreign	n postal code						
Es	sex Ju	nction		VT	05452	2			(301) 956-474	3
Fo	reign cou	intry name	Foreign pi	rovince/state/county	Foreign	posta	l code	C If exempt	ion application is pendin	g, check here 🕨 🗌
				<u> </u>				ļ		,
G	Check	k all that apply	y 🔲 Initial return	☐ Initial return	of a former pub	olic ch	harity	D 1. Foreig	n organizations, check h	ere ▶ 🗌
		•	Final return	Amended ref	turn			2. Foreig	n organizations meeting	the 85% test,
4			X Address chan	ge 🔲 Name chang	je		A	check	here and attach comput	ation 🐪 🕨 🗌
Н	Check	k type of orga	n 501(c)(3) exempt pr	ıvate foundatıoı	n /"	14-		foundation status was te	rminated under	
	Section	on 4947(a)(1)	nonexempt charitable	trust    Other tax	able private fou	ındat	ion	section 50	07(b)(1)(A), check here	P L.
ī	Fair m	narket value o	of all assets at	* Accounting method	Cash 2	( A	ccrual	F 1645 - 6	idation is in a 60-month	
	end o	f year (from F	Part II, col (c),	Other (specify)					tion 507(b)(1)(B), check	
	line 16	6) ▶ \$	283,502 (F	Part I, column (d) must be	e on cash basis )	)			,	·
P	art I	Analysis of	Revenue and Expen	ses (The total of	(a) Revenue a	nd				(d) Disbursements
		amounts in c	olumns (b), (c), and (d) r	may not necessarily	expenses per		,	t investment ncome	(c) Adjusted net income	for charitable ' purposes ,
		equal the am	ounts in column (a) (see	instructions))	books	٠	"	icome	ilicolile	(cash basis only)
	1	Contributions	gifts, grants, etc , received	d (attach schedule)	504,	659		THE STATE OF	PROMET HAVE	GATHER PARTY
	2		if the foundation is not re			<b>新疆</b>	福政的	TO CHARGO	247 P	<b>经过程的</b>
	3		savings and temporary			125		125	シンプラ	対が記録が、
ŧ	4	Dividends a	nd interest from secur	ities				//	(C) [2]	
	5a	Gross rents				•		( , )	7018	(大学)
	b	Net rental in	ncome or (loss)		PER	620			EREAL PROPERTY OF THE PARTY OF	100 A
ne	6a	-	(loss) from sale of ass		Su - Si des Viale de Real Coli			10/1 E		N. S.
evenue	b	•	rice for all assets on line 6		ACCUPANT.		的接触		Versearch (SA)	
ě	7 Capital gain net income (from Part IV, line 2)		CHINA	TW half	wide melahada kili diri	Vocine transport				
N. S.	8		rm capital gain			Trib. C				
6.	9	Income mod		i .	APPELLANCE TO A	9454 7435	Company Romany	orena de la como	Property and the second second	No Planting
2	10a		ss returns and allowances		ALCOHOLOGICA SAN	MARK C	2442-7990 148801-860	AND EXPENSES.		Kalaria de la
OAZZT	b		of goods sold		Tribusi (Ideal Control	(30. (shr)	Kerker Karetari		Parriode about the	
Ö	11	•	or (loss) (attach sche ne (attach schedule)	uule)	81	647	" Distant 1 1 15 Jores	RIEGE AND		
<b>=</b>	12		lines 1 through 11	, ,	586,	$\overline{}$		125	n	711-221-425311
$\Xi_{\mathbf{s}}$	13		on of officers, director	s trustees etc	209,			120		147,139
ဆဖ	14		yee salaries and wag		138,					75,063
	15	•	ns, employee benefits			503				14,949
∽≎	16a		attach schedule)			210				· ·
<u> </u>	b	Accounting	fees (attach schedule)	)	7,	525	•			-
<u>``</u>	С	Other profes	ssional fees (attach sc	hedule)	281,	615				276,045
ā	17	Interest		-						
ist	18	Taxes (attac	ch schedule) (see instr	uctions)		095			·	- 11,960
Ë	19		n (attach schedule) an	d depletion		730				
P	20	Occupancy	,			600				
Ϋ́	21		erences, and meeting	S		491				73,109
3UC	22	-	publications			235	•	<u> </u>	- ,	3,235
<u>5</u>	23		nses (attach schedule)		<u>- 119,</u>	936		125		·57,506
tin	24 -		ting and administrati	ive expenses.				405	_	250 222
Fa	0.5		3 through 23		901,	_	WALCHING.	125	0	659,006
5107 T Operating and Administrative Expen	25		ns, gifts, grants paid	dd Imaa 04 4 05	160,			ANG MENGAGORA		160,000
<u> </u>	ļ <del></del>		es and disbursements. A	oo lines 24 and 25	1,061,	654	Chilling Israelog	- 125	· 0	819,006
	27		e 26 from line 12							
	a		enue over expenses and		-475,	223		e sammani.		HELLENGE LEED AND AND AND AND AND AND AND AND AND AN
	, b		nent income (if negati		LEAST TOTAL	CALL	the head week	O Udana, disabilitati	78-14-14-14-14-14-14-14-14-14-14-14-14-14-	
	l c	Adjusted n	et income (if negative	e enter -U-)	In the second second	12.25	WIND OF THE	2006年11月1日	ı n	

For Paperwork Reduction Act Notice, see instructions.

ь	a = 4   11	Attached schedules and amounts in the description column	Beginning of year	_ Ena o	or year
H	art II	Balance Sheets Addition Scriedules 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	143,514	247,331	247,331
	2	Savings and temporary cash investments			
	3	Accounts receivable 15,264		• 1	
		Less allowance for doubtful accounts ▶	528,868	15,264	15,264
	4	Pledges receivable ▶	L	_	
	ł	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		•	
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	65,540	20,907	20,907
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			-
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			,
	14	Land, buildings, and equipment basis   2,190			
		Less. accumulated depreciation (attach schedule)   2,190	1		
	15	Other assets (describe  )			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	738,652	283,502	283,502
	17	Accounts payable and accrued expenses	38,397	76,021	
	18	Grants payable			,
Ë	19	Deferred revenue	103,480	10,929	
Ĕ	20	Loans from officers, directors, trustees, and other disqualified persons		75,000	
Liabilities	21	Mortgages and other notes payable (attach schedule)		·	• ,
	22	Other liabilities (describe  )			
	23	Total liabilities (add lines 17 through 22)	141,877	161,950	
<b>'</b>		Foundations that follow SFAS 117, check here			*•-
ĕ		and complete lines 24 through 26, and lines 30 and 31.			, ,
alances	24	Unrestricted	96,775	-73,641	
3a	25	Temporarily restricted	500,000	195,193	,
7	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			В
F		and complete lines 27 through 31.			י
Net Assets or Fund B	27	Capital stock, trust principal, or current funds			19
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Ţ.	30	Total net assets or fund balances (see instructions)	596,775	121,552	, , ,
Š	31	Total liabilities and net assets/fund balances (see			
		instructions)	738,652	283,502	., ,
	irt III	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year—Part II, column (a),	line 30 (must agree	with	
		of-year figure reported on prior year's return)		1	596,775
		amount from Part I, line 27a		2	-475,223
		r increases not included in line 2 (itemize)		3	
		nes 1, 2, and 3		4	121,552
		eases not included in line 2 (itemize)	<b>,,,</b>	5	
6	lotal	net assets or fund balances at end of year (line 4 minus line 5)—Part	TL column (h) line 36	n lal	121 552

Part	a) List and describe the ki	d Losses for Tax on Investment(s) of property sold (for example, real estuse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		te acquired , day, yr)	(d) Date sold (mo , day, yr )
1a		<del> </del>			<u> </u>		
b							
С							
d							
e							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) f) minus (g))
<u>a</u> b				···			
C							
d							
е		·					
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	on 12/31/69		(I) Gains (Col	(h) gain minus
	(i) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (ı) (j), ıf any		col (k), but no	t less than -0-) or rom col (h))
а							
b							
c				•			
d							
<u>         e                           </u>							<del></del>
2	Capital gain net income or	Ther canital loss) 1 "	also enter in Pai , enter -0- in Pai	<b>&gt;</b>	2		0
3	Net short-term capital gain	or (loss) as defined in sections 1	222(5) and (6)				
	If gain, also enter in Part I,	line 8, column (c) See instruction	ns If (loss), ente	er -0- in \			
	Part I, line 8			ſ	3		0
Part	V Qualification Und	ler Section 4940(e) for Redu	uced Tax on N	let Investment	Incom	ie	
Was		section 4942 tax on the distributal ialify under section 4940(e) Do n			e period	?	☐ Yes ☒ No
1	Enter the appropriate amo	unt in each column for each year,	see the instruct	ions before makir	ig any e	entries	
Cal	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use as	sets		(d) tribution ratio divided by col (c))
	2016		7,561		0		0 000000
	2015		6,521		0		0 000000
	2014	416	6,024		0		0 000000
	2013	416	6,495		0		0 000000
	2012	250	0,911		0		0 000000
2	Total of line 1, column (d)					2	0 000000
3	Average distribution ratio f	or the 5-year base period—divide	the total on line	2 by 5 0, or by			
	the number of years the fo	undation has been in existence if	less than 5 year	S	-	3	0 000000
4	Enter the net value of nonc	charitable-use assets for 2017 fro	m Part X, line 5			4	
5	Multiply line 4 by line 3				-	5	<del></del>
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)				6	0
7	Add lines 5 and 6					7	0
8	Enter qualifying distribution	ne from Part XII. line 4				8	819,006
J		ter than line 7, check the box in P	art VI, line 1b, ar	nd complete that p			

₹ á

1a `	Excise Tax Based on Investment Income (Section 4940(a), 494	<del>7(2), 10</del>	l0(e), or 4948—se	<u> </u>	T	7115)			
	· · · · · · · · · · · · · · · · · · ·		ter "N/A" on line 1	)					1
	Date of ruling or determination letter (attach copy of letter if r	-	•						
b	Domestic foundations that meet the section 4940(e) requirements in Par	t V, che	ck	}	1				<del></del> ;
	here ► X and enter 1% of Part I, line 27b			ı					.
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization I, line 12, col (b)	anızatıor	is, enter 4% of	J			<u> </u>		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ons only,	others, enter -0-)		2			0	
3	Add lines 1 and 2				3			0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	-			4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or	less, er	nter -0-		5			0	
6	Credits/Payments		1	ı	ŀ			٠. ا	1 137
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a			ι,			ĺ	
b	Exempt foreign organizations—tax withheld at source	6b			,				., ]
C	Tax paid with application for extension of time to file (Form 8868)	6c			1		ć		- 1
_d	Backup withholding erroneously withheld	6d		<u> </u>	<del>┤</del> ╼—				
7	Total credits and payments Add lines 6a through 6d				7			0	
8			2220 is attached		8			_	
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of				9		—	0	
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the a Enter the amount of line 10 to be Credited to 2018 estimated tax	imount	overpaid Refunded		10			0	
Part \			Returided		1	_		υl	
1a	During the tax year, did the foundation attempt to influence any national,	state o	r local legislation o	r did	ıt		7	Yes	No
	participate or intervene in any political campaign?	state, o	i local legislation o	ı dıd		1	a	103	X
b	Did it spend more than \$100 during the year (either directly or indirectly)	for polit	cal purposes? See	the		<u> </u>			<del></del>
-	instructions for the definition .	ioi poiit	our purpodour out			1	ь		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the act	ıvıtıes ar	nd copies of any m	ateria	ıls	<u> </u>	_	<del></del>	<del></del> -
	published or distributed by the foundation in connection with the activitie								-
С	Did the foundation file Form 1120-POL for this year?					1	c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) i	mposed	during the year						1
	(1) On the foundation ► \$ (2) On foundation m							- 1	_ ,]
е	Enter the reimbursement (if any) paid by the foundation during the year	-		ımpo	sed	<del>-</del>			1
	on foundation managers > \$					i i			
2						<u> </u>	ملحجة		
2	Has the foundation engaged in any activities that have not previously be If "Yes," attach a detailed description of the activities	en repoi	ted to the IRS?			-	2		<u> </u>
3	If "Yes," attach a detailed description of the activities			s			2		<u>X</u>
		governii	ng instrument, article	s		_	2		
	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its	governii rmed cor	ng instrument, article by of the changes	s					η,
	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo Did the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?	governii rmed cop nore duri	ng instrument, article by of the changes ng the year?	s		4	3 la	N/A	, <sub>п</sub>
3 4a	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo Did the foundation have unrelated business gross income of \$1,000 or m If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction	governii rmed cop nore duri	ng instrument, article by of the changes ng the year?	s		4	3 la	N/A	, п. Х
3 4a b	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo Did the foundation have unrelated business gross income of \$1,000 or m  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction  If "Yes," attach the statement required by General Instruction T	governii rmed cop nore duri n during	ng instrument, article by of the changes ng the year? the year?	s		4	3 la	N/A	, <sub>р.</sub>
3 4a b	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformation by the foundation have unrelated business gross income of \$1,000 or make the filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction of "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through	governii rmed cop nore duri n during	ng instrument, article by of the changes ng the year? the year?	s		4	3 la	N/A	, <sub>р.</sub>
3 4a b 5	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal Did the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction if "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or	governii rmed cop nore duri n during n 4945) s	ng instrument, article by of the changes ng the year? the year? satisfied either			4	3 la	N/A	, <sub>р.</sub>
3 4a b 5	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal Did the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or	governii rmed cop nore duri n during n 4945) s	ng instrument, article by of the changes ng the year? the year? satisfied either		nat	4 4	3 la lb l		, <sub>р.</sub>
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3 4a b 5	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal to the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	governii rmed cop nore during n during n 4945) s o that no complete	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction	ons th	nat	4 4	3 la lb l		У р. Х Х
3 4a b 5	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal distribution of the foundation have unrelated business gross income of \$1,000 or make it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction if "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is register.	governii rmed cop nore during n during n 4945) s o that no complete	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction	ons th	nat	4 4	3 la lb l	X	У р. Х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal Did the foundation have unrelated business gross income of \$1,000 or mill "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction if "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT.	governii rmed cop nore during n 4945) s that no complete ered Sec	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction Part II, col. (c), and Page instructions	ons th		4 4	3 la lb l	X	х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal of the foundation have unrelated business gross income of \$1,000 or make the filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction if "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT.  If the answer is "Yes" to line 7, has the foundation furnished a copy of Foundation in the province of the	governii rmed cop nore during n 4945) s that no complete rred Sec	ng instrument, article by of the changes ng the year? the year? satisfied either mandatory direction Part II, col. (c), and Pate instructions	ons th		4	33 la	X	У р. Х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformal the foundation have unrelated business gross income of \$1,000 or make the foundation have unrelated business gross income of \$1,000 or make the foundation have unrelated business gross income of \$1,000 or make the filled a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction if "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through a By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT  If the answer is "Yes" to line 7, has the foundation furnished a copy of Follow designate) of each state as required by General Instruction G? If "No	governii rmed con nore during n 4945) s o that no complete red Sec rm 990- " attach	ng instrument, article by of the changes ing the year? In the year? Satisfied either In mandatory direction Part II, col. (c), and Part II, col. (c), and Part III, col. (c), and III, c	ons the order of t	 eral	4	3 la lb l	X	У р. Х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformation of the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT  If the answer is "Yes" to line 7, has the foundation furnished a copy of Folior designate) of each state as required by General Instruction G? If "No Is the foundation claiming status as a private operating foundation within	governing of 4945) so that no complete ared Security grant attach the mea	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction Part II, col. (c), and Part II, col. e instructions  PF to the Attorney explanation aning of section 49	ons the XV  General 42(j)(	eral 3)	4	33 la	X	х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformation of the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form (or designate) of each state as required by General Instruction G? If "No Is the foundation claiming status as a private operating foundation within or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017?	governing of 4945) so that no complete ared Security grant attach the mea	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction Part II, col. (c), and Part II, col. e instructions  PF to the Attorney explanation aning of section 49	ons the XV  General 42(j)(	eral 3)	8	33 ka kb	X	х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformation of the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction of "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form (or designate) of each state as required by General Instruction G? If "No is the foundation claiming status as a private operating foundation within or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? Since "Yes," complete Part XIV	governing of 4945) so that no complete ared Security attach the measure of the record of the measure of the mea	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction Part II, col. (c), and Part e instructions  PF to the Attorney explanation aning of section 49 instructions for Part	ons the constant XV ► General 42(j)(in XIV	eral 3) If	8	33 la	X	х Х
3 4a b 5 6	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformation of the foundation have unrelated business gross income of \$1,000 or in If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registed DE, VT  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form (or designate) of each state as required by General Instruction G? If "No Is the foundation claiming status as a private operating foundation within or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017?	governing of 4945) so that no complete ared Security attach the measure of the record of the measure of the mea	ng instrument, article by of the changes ing the year? the year? satisfied either mandatory direction Part II, col. (c), and Part e instructions  PF to the Attorney explanation aning of section 49 instructions for Part	ons the constant XV ► General 42(j)(in XIV	eral 3) If	8	33 ka kb	X	х Х

Part	VII-A	Statements Regarding Activities (continued)					
11		ne during the year, did the foundation, directly or indirectly, own a controlled entity within ing of section 512(b)(13)? If "Yes," attach schedule See instructions	the		11	Yes	No X
12			avalified		<del>- ' ' -</del>		<del>  ^</del>
12		undation make a distribution to a donor advised fund over which the foundation or a dis id advisory privileges? If "Yes," attach statement. See instructions	quaimeu		12		x
13	-	indation comply with the public inspection requirements for its annual returns and exemption app	dication?		13	X	<del>  ^</del>
13		address  www.maliasili.org	nication,		13	_^_	l
14		s are in care of ► Fred Nelson Telephon	e no ▶	(301) 95	6-474	3	
				05452	,,,,,,,		
15	Section 4	947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check the amount of tax-exempt interest received or accrued during the year	nere	15			▶ [
16		ne during calendar year 2017, did the foundation have an interest in or a signature or oth	ner author	rity		Yes	No
	over a ba	nk, securities, or other financial account in a foreign country?			16		Х
	See the ir	nstructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter t	he			* :	r .
		he foreign country					
Part	VII-B	Statements Regarding Activities for Which Form 4720 May Be Require	<u>d</u>		·		
	File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the	e year, did the foundation (either directly or indirectly)					l'.
	(1) Engag	ge in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			٠,٠
		w money from, lend money to, or otherwise extend credit to (or accept it from) a	_		<u></u>	-	-
	-	alified person?	Yes	⊠ No	<u> </u>	,	٠,
		th goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
		ompensation to, or pay or reimburse the expenses of, a disqualified person?	X Yes	∐ No		-	
		fer any income or assets to a disqualified person (or make any of either available for enefit or use of a disqualified person)?	☐ Yes	X No		,	,
	(6) Agree	to pay money or property to a government official? (Exception. Check "No" if the			·		., ^
		ation agreed to make a grant to or to employ the official for a period after			,	•	,
	termin	ation of government service, if terminating within 90 days)	Yes	X No	. `		,
þ		wer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions describe					
	-	ns section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instru	ctions	- □	1b		X
	_	ions relying on a current notice regarding disaster assistance, check here		▶□	٠ -		
С		undation engage in a prior year in any of the acts described in 1a, other than excepted	acts, that				<del></del>
		corrected before the first day of the tax year beginning in 2017?			1c		X .
2		failure to distribute income (section 4942) (does not apply for years the foundation was foundation defined in section 4942(j)(3) or 4942(j)(5))	a private				
а		d of tax year 2017, did the foundation have any undistributed income (lines 6d and					٠,,
-		(III) for tax year(s) beginning before 2017?	Yes	X No	-		٠.
		st the years  20 , 20 , 20 , 20	_	_	ı		:
b		any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section	4942(a)(2	)			
		o incorrect valuation of assets) to the year's undistributed income? (If applying section 4					
	all years I	isted, answer "No" and attach statement—see instructions)			2b	N/A	
С	If the prov	risions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the ye	ars here		4,	· :	
		, 20, 20, 20			•	,	,
3a		undation hold more than a 2% direct or indirect interest in any business enterprise	П.,	(C)			
_	-	e during the year?	_	X No		·	
b		d it have excess business holdings in 2017 as a result of (1) any purchase by the found					
		d persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period appro			,		i
		oner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)		;		,	٠.
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine in had excess business holdings in 2017)	ıı tri <del>e</del>		3b	N/A	
4a		· · · · · · · · · · · · · · · · · · ·	2002		4a	IAIW	Х
ча b		ndation invest during the year any amount in a manner that would jeopardize its charitable purpo ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize			70		^
		purpose that had not been removed from jeopardy before the first day of the tax year beginning i			4b		X

Pari	t VII-B	Statements Regarding Activities	for W	hich Form	4720 f	May Be R	equire	d (contin	nued)			
5a		the year, did the foundation pay or incur any										'
•		rry on propaganda, or otherwise attempt to i		•	•			Yes	X No	)		, [
		uence the outcome of any specific public ele		see section 4	955), o	r to carry or	٦,	П.,				• "
		ectly or indirectly, any voter registration drive						∐ Yes	X No		١.	, e `
		ovide a grant to an individual for travel, study		•	•			∐ Yes	X No	<b>'</b>		; -
		vide a grant to an organization other than a tion 4945(d)(4)(A)? See instructions	charita	able, etc., orga	anizatio	n described	d in	Yes	X No	,  ,		] · . ·
			charitable, scientific, literary, or educational				nal	□ .63	<u> Ш</u>			1.30
		poses, or for the prevention of cruelty to chil					i i a i	Yes	X No	,		1,18
b	If any a	answer is "Yes" to 5a(1)–(5), did any of the ti						describe	d ın			۵
		itions section 53 4945 or in a current notice	· · · · · · · · · · · · · · · · · · ·							5b	N/A	
		zations relying on a current notice regarding	•						▶ [	]  .		
С		nswer is "Yes" to question 5a(4), does the fo			nption f	from the tax	(					,
		e it maintained expenditure responsibility fo	_		<b>~</b> ( -)\			∐ Yes	☐ No	<b>'</b>		
6a		" attach the statement required by Regulation foundation, during the year, receive any fur				nav nremiii	me			-		١, ا
-		ersonal benefit contract?	ido, dii	cony or mano	ony, to	pay promia		☐ Yes	X No	,		
b	Did the	foundation, during the year, pay premiums,	dırectl	y or indirectly	on a p	ersonal ber	nefit cor	ntract?		6b		X
	If "Yes"	to 6b, file Form 8870								, ,		
7a		ime during the tax year, was the foundation a pa						Yes	X No			
		" did the foundation receive any proceeds of							- 1	7b	N/A	L
Part	VIII	Information About Officers, Directors	ors, II	rustees, Fo	undat	ion Mana	gers, ı	Hignly P	aid En	npioye	es,	
1	List all	officers, directors, trustees, and foundat	ion ma	anagers and	their co	omnensatio	n See	instructi	ons			
	vi		(b) Tit	le, and average	(c) Co	mpensation	(d)	Contribution	s to	(e) Expense accou		
		(a) Name and address		hours per week (If not paid, enter -0-)				oyee benefit ferred compe			allowar	
See A	ttached	Statement										
——			00		0	-		-				
				00	o							
						<del></del>						
				00		0						
						_						
	Compo	proction of five highest poid ampleyees (	-4b4	00		0	:	-44:	) If ===			
	"NONE	ensation of five highest-paid employees ( :."	omer t	nan mose m	ciuaea	on line i—	-see m	structions	s). II NO	ne, ent	er	
				(b) Title, and a	verage	<u> </u>		(d) Contrib				
	(a) Name	and address of each employee paid more than $$50,000$		hours per w	eek _	(c) Comper	sation	employee plans and o		(e) Expe	inse ac allowan	
				devoted to po				compens	sation			
	Davie			Portfolio Dire			04 000		0.400			
		arl Street, Denver, CO 80209 eldon-Watrous		Dir of Financ	40 00		81,000		2,430			
		orth, Bomoseen, VT 05732		DII OI FIIIani	30 00		57,600		1,728	-		
				1	00 00		01,000		1,720			
					00		0					
					00		0					
					00		0					
Total	number	of other employees paid over \$50,000		1	00	1	0	I		_		3
									<del>-</del>			

Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional sen	vices. See instructions. If none, enter "N	ONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Elizabeth Singleton		<del></del> -
279 29th Street, San Francisco, CA 94131	Senior Advisor - COO	83,114
Nienga Kahira		
PO Box 354-10400, Nanyuki, Kenya	Portfolio Manager	51,000
		Ì
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevan	t statistical information such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, research papers produc	ed, etc	LAPENSES
1 Supporting long-term, locally driven, and collaborative approaches that	at achieve the sustainable use and	
conservation of natural resources and ecosystem services in Africa, w	hile generating opportunities for both	
social and economic development and enterprise		819,006
2		
***************************************		
3		
4	·	
Part IX-B Summary of Program-Related Investments (see		
Describe the two largest program-related investments made by the foundation during the tax y  1 None	ear on lines 1 and 2	Amount
i none		· <b>-</b>
		· <del>-</del>
2	· · · · · · · · · · · · · · · · · · ·	
All other program-related investments. See instructions		
3		
		·-
		· <del>-</del>
Total. Add lines 1 through 3		0

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundati	ons,
	see instructions )		
-1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	٥	
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances .	1b	0
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
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	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		•
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations, check here and do not complete this part.)	tions	
1	Minimum investment return from Part X, line 6	1	···
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)  2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
<b>'7</b>	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		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	819,006
b	Program-related investments—total from Part IX-B	1b	0.10,000
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	<del></del> -
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	819,006
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	819,006
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh		
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Income	(see instructions	5)		<del></del> -	
	Distributable amount for 0047 from	- Dad VI	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
4	Distributable amount for 2017 from	n Paπ XI,		rears prior to 2010	2010	2017
•	line 7		;			
2	Undistributed income, if any, as of the	e end of 2017	i		0	
a b	Enter amount for 2016 only Total for prior years 20 ,	20 20			0	<u> </u>
3	Excess distributions carryover, if a	20, 20				
а	From 2012	250,911				
b	From 2013	416,495				
C	From 2014	416,024	• ,			
d	From 2015	556,521				
e	From 2016	607,561				
f	Total of lines 3a through e	557,557	2,247,512			
4	Qualifying distributions for 2017 fr	om Part XII,		· · · · · · · · · · · · · · · · · · ·		
	line 4 ▶ \$ 819,006					
а	Applied to 2016, but not more than	n line 2a				
b	Applied to undistributed income of	prior years				
	(Election required—see instruction	ns)				
С	Treated as distributions out of corp	ous (Election				
	required—see instructions)					<u></u>
d	Applied to 2017 distributable amount					
е	Remaining amount distributed out	٠ ,	819,006			
5	Excess distributions carryover app					
	(If an amount appears in column (	•				
	amount must be shown in column	` ' '				
6	Enter the net total of each colun indicated below:	nn as				
а	Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	3,066,518			
b	Prior years' undistributed income		3,000,310			
_	line 4b from line 2b	Oubtract		0		
С	Enter the amount of prior years' ur	ndistributed				
	income for which a notice of defici					
	been issued, or on which the secti	•				'
	tax has been previously assessed	, ,				
d	Subtract line 6c from line 6b Taxa	ble				
	amount—see instructions	į				
е	Undistributed income for 2016 Su	btract line				
	4a from line 2a Taxable amount—	see				
	instructions				0	
f	Undistributed income for 2017 Su	*				
	4d and 5 from line 1 This amount	must be				_
_	distributed in 2018					0
7	Amounts treated as distributions o	•				
	to satisfy requirements imposed by 170(b)(1)(F) or 4942(g)(3) (Election					
	required—see instructions)	ii iilay be				
8	Excess distributions carryover from	n 2012 not				
	applied on line 5 or line 7 (see inst		250,911			
9	Excess distributions carryover t	· · · · · · · · · · · · · · · · · · ·	200,011			
-	Subtract lines 7 and 8 from line 6a		2,815,607			ļ
10	Analysis of line 9	ļ	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Excess from 2013	416,495			,	
b	Excess from 2014	416,024				
С	Excess from 2015	556,521				1
d	Excess from 2016	607,561		Ì		
е	Excess from 2017	819,006				

Part	Maliasili Initiatives, Inc  Maliasili Initiatives, Inc  More Private Operating Foundat		ictions and Part	VII-A guestion 9)		83146 Page 10
1a	If the foundation has received a ruling of					
	foundation, and the ruling is effective fo		•	ate operating ▶		
b	Check box to indicate whether the foundation		•	cribed in section	4942()	(3) or 4942(j)(5
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	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	(4) 2311	(0) 2010	(0, 22.10	(2) 2311	
ь	85% of line 2a		+			
_	****		<del> </del>	<del>                                     </del>		1
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly					1
	for active conduct of exempt activities					i
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					<b>,</b>
	(1) Value of all assets					1
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				·	
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed		/			(
С	"Support" alternative test—enter				<u> </u>	T
	<ul> <li>(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> <li>(2) Support from general public and 5 or more exempt organizations as provided in</li> </ul>					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					(
art	XV Supplementary Information	(Complete th	is part only if th	ne foundation had	\$5,000 or mo	re in assets at
	any time during the year—				•	
1	Information Regarding Foundation M					
а	List any managers of the foundation wh	_	d more than 2% of	the total contributions	s received by the	foundation
	before the close of any tax year (but only					
	List any managers of the foundation wh	0 0WB 10% or mo	re of the stock of a	cornoration (or an er	nually large porti	on of the
•	ownership of a partnership or other enti-				quality lange portion	or the
2	Information Regarding Contribution,	Grant Gift Loan	Scholarshin etc	Programs:		
-	Check here ► X if the foundation on unsolicited requests for funds. If the foundation of the foundati	ly makes contribu	tions to preselecte	d charitable organiza	tions and does nations under other	ot accept er
	conditions, complete items 2a, b, c, and			-		
а	The name, address, and telephone num	ber or email addr	ess of the person	to whom applications	should be addre	ssed
	The form in which applications should b	e submitted and ii	nformation and ma	terials they should in	clude	
~	The form in thinest applications silvata b	o oublinated and h	morniation and ma	nonale troy should like	J. 440	

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

Form **990-PF** (2017)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year Mwambao Coastal Community Network PC 40,000 N/A Support for community conservation of Coastal Tanzania PO Box 3810 Zanzıbar Tanzanıa PC Mpingo Conservation & Development Initiative N/A Support for community forest 75,000 conservation in Southern Tanzania PO Box 49 Kilwa Masoko Tanzania Ujamaa Community Resource Team N/A PC Support for community natural 45,000 resource management in Northern PO Box 15111 Tanzania Arusha Tanzania Total 160,000 3a Approved for future payment Total 0

Pa	rt <sup>^</sup> X	VI-A Analysis of Income-Producing Ac	ctivities				
		oss amounts unless otherwise indicated	1	usiness income	Excluded by sect	ion 512, 513, or 514	, ,
•	•						(e) Related or exempt
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
1	Pro	gram service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
	а	Service provision					81,647
	b						
	C						
	d						
	е						
	f						
	g	Fees and contracts from government agencies					
2	Me	mbership dues and assessments					
3	Inte	rest on savings and temporary cash investments			14	125	
4	Dıv	idends and interest from securities					
5	Net	rental income or (loss) from real estate			Service Service		
	а	Debt-financed property	<u></u>				
	b	Not debt-financed property					
6	Net	rental income or (loss) from personal property					
7	Oth	er investment income					
8	Gaı	n or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events					
10		oss profit or (loss) from sales of inventory					
11	Oth	er revenue a					
	b						
	С						
	ď						
	е						
		ototal Add columns (b), (d), and (e)		0	. 4	125	81,647
13		al. Add line 12, columns (b), (d), and (e)				13	81,772
		ksheet in line 13 instructions to verify calculations			<u>.</u>	· · · · ·	
		<b>Relationship of Activities to the A</b>					
Lin	e No ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur	ne is reported in c	column (e) of Part	XVI-A contributed	importantly to the	-mc \
			•	<u> </u>		• •	ons )
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
				<del></del>		<del></del>	
			<del></del>		<del></del>		<del> </del>
			<u>.</u>		<del></del>	<u>-</u> .	
						-	
		<del></del>		<u> </u>			
		<del></del>					
	_						
		<u> </u>					
		<u> </u>		-			-
				-	<del>-</del>		
						-	
						<del></del>	

Preparer Use Only

Form 99	0-PF	(2017) Maliasili	Initiatives, Inc					27-3183	146	Pa	ge <b>13</b>
Part	ΧVI			fers to and Transa	ctions	and Re	lationships Wit	h Noncharita	ıble		
			ganizations		_						
1		-	•	ngage in any of the follo	_	-	-	escribed		Yes	No
			er than section 501(c)	(3) organizations) or in	section	n 527, rela	ating to political				l
	_	anizations?						İ			l
а			porting foundation to	a noncharitable exempt	organi	zation of		l.			
		Cash						7	1a(1)		Х
		Other assets						ļ.	1a(2)		X
b		er transactions						Į.		<u> </u>	
			o a noncharitable exer					<del>-</del>	1b(1)		X
				ole exempt organization	1			-	1b(2)		X
			s, equipment, or other	assets				, , , , , , , , , , , , , , , , , , ,	1b(3)		X
		Reimbursement a	_					-	1b(4)	-	X
		Loans or loan gua		6	4				1b(5)		X
_				p or fundraising solicita				}	1b(6)		X
C				s, other assets, or paid				 	1c		X
d				plete the following sched							
	valu	ie oi the goods, oth ie in anv transactio	ier asseis, or services g in or sharing arrangeme	iven by the reporting foul nt, show in column <b>(d)</b> th	nouspine e value	of the goo	idalion received les: ids_other assets_or	services receive	ι d		
(a) Line		(b) Amount involved	<del>,                                     </del>	haritable exempt organization			cription of transfers, tran			an an an	
(a) Line	110	(b) Amount moored	(c) Name of Hone	nantable exempt organization		(u) Des	cription of transfers, trai	isactions, and sham	ing arrain	gemen	
								·			
			<u> </u>								-
			<u></u>								
			<u> </u>					· · ·			
2a				ted with, or related to, o tion 501(c)(3)) or in sec			exempt organizatio		Yes [	XI N	
_			• • •		AIOH 32	, ,		Ч	ics [	<u>∠</u> ] IN	U
<u> </u>	11 1	(a) Name of orga	e following schedule	(b) Type of organ	aration	Ī	(c) Do	scription of relations	hin		
		(a) Name of Orga	IIIZAUOII	(b) type of organ	nzation		(6) De	SCHOLOTT OF TELEBROTIS	anib.		
	-										
											_
	Und	der penalties of perjury, I de	clare that I have examined this re	turn, including accompanying sched	ules and st	atements, and	to the best of my knowledge	and belief, it is true,			
Şign	соп	rect, and complete Declara	tion of preparer (other than taxpa	yer) is based on all information of wl	hich prepare	er has any kno	wledge	May the IRS	discuss t	hıs retui	m
Here		M	yru		Exe	cutive Di	ector	with the prep	arer shov	vn belov	w?
• نت	Sı	gnature of officer or tru	ustee	Date	Title			See instruction	ons [X	Yes	Nc
D-:-	•	Print/Type preparer	r's name	Preparer's signature	1		Date	Check I if P	TIN		
Paid		Kırk Wisehart		Kirk Wisehart	$\mathcal{A}$		10/22/2018		00533	3236	

Wisehart Wimette Associates PLC
159 River Road, Essex Junction, VT 05452

26-4046110

(802) 879-1055

Firm's EIN ▶

### 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** 

Maliasili Initiatives, Inc			27-3183146		
Organization type (check	one)		<del>_</del>		
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter numb	ber) organization			
	4947(a)(1) nonexempt charr	itable trust <b>not</b> treated as a private foun	dation		
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private fou	undation			
	4947(a)(1) nonexempt charr	itable trust treated as a private foundation	on		
	501(c)(3) taxable private fou	undation			
			•		
Check if your organization	s covered by the General Rule or a Sp	pecial Rule.			
<b>Note:</b> Only a section 501(dinstructions	(7), (8), or (10) organization can check	boxes for both the General Rule and a	Special Rule See		
General Rule					
	or property) from any one contributor. C	nat received, during the year, contributions  Complete Parts I and II See instructions			
Special Rules					
regulations under s 13, 16a, or 16b, ar	ections 509(a)(1) and 170(b)(1)(A)(vi), d that received from any one contribute	orm 990 or 990-EZ that met the 33 1/3 of that checked Schedule A (Form 990 or or, during the year, total contributions of , line 1h, or (ii) Form 990-EZ, line 1 Con	990-EZ), Part II, line 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 totale during the year for General Rule app	he year, contributions exclusively for red more than \$1,000. If this box is check an exclusively religious, charitable, etc	(10) filing Form 990 or 990-EZ that recelligious, charitable, etc., purposes, but reked, enter here the total contributions the purpose Don't complete any of the payed nonexclusively religious, charitable	no such nat were received arts unless the		
Caution: An organization t	at isn't covered by the General Rule ar	nd/or the Special Rules doesn't file Sch	edule 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

Maliasili Initiatives, Inc

Employer identification number 27-3183146

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is i	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Linden Trust for Conservation  156 West 56th Street  New York  NY  10019  Foreign State or Province  Foreign Country	\$ 5,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Dorobo Fund for Tanzania 4335 Pheasant Ridge Drive Blaine MN 55449 Foreign State or Province Foreign Country	\$ 40,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Flora Family Foundation 2121 Sand Hill Road  Menlo Park CA 94025  Foreign State or Province  Foreign Country	\$ 85,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	The Nature Conservancy 4245 North Hailfax Dr Arlington VA 22203 Foreign State or Province Foreign Country	<b>\$</b> 69,173	Person X Payroll  Noncash (Complete Part II for noncash contributions)
. (a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Mulago Foundation  2435 Polk  San Francisco CA 94109  Foreign State or Province  Foreign Country	\$50,000	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Well Grounded Impact Hub Islington 27 Dingley Pl London Foreign State or Province EC1V 8BR Foreign Country United Kingdom	\$ 12,435	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization Employer identification number
Maliasili Initiatives, Inc 27-3183146

Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Sally Family Foundation  201 Vineyard Lane  Cary NC 27513  Foreign State or Province  Foreign Country	\$ 15,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Band Foundation  1723 Hoban Rd NW  Washington DC 20007  Foreign State or Province  Foreign Country	\$ . 70,000	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	International Land Coalition Via Paolo di Dono 44 Rome Foreign State or Province 00142 Foreign Country Italy	\$ 142,851	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Robert Nelson 7715 Rocton Ave Chevy Chase MD 20815 Foreign State or Province Foreign Country	\$ 10,000	Person X Payroll
(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 Employer identification number
Maliasili Initiatives, Inc 27-3183146

Part II	Noncash Property (see instructions). Use duplicate of	copies of Part II if additional spa	ice is needed.
(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
		\$	
(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	tiatives, Inc  Exclusively religious, charitable, etc., cont (10) that total more than \$1,000 for the year		
	the following line entry For organizations com contributions of \$1,000 or less for the year (E Use duplicate copies of Part III if additional sp	pleting Part III, enter the total o inter this information once See	f exclusively religious, charitable, etc,
(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 Relati	onship 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 Relati	onship 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 Relati	onship of transferor to transferee
(2) 11	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 Relati	onship of transferor to transferee
	For Prov Country		

Part I, Line 11 (990-PF) - Other Income

		81,647	0	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	Other Income	3,582	0	
2	Service Provision	78,065	0	

Part I, Line 16a (990-PF) - Legal Fees

		3,210	0	0	0
					Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	Legal fees	3,210	0	0	0

Part I, Line 16b (990-PF) - Accounting Fees

		7,525	0	0	0
					Disbursements
ŀ		Revenue and			for Charitable
1		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	Accounting Fees	7,525	0	0	0

Part I, Line 16c (990-PF) - Other Professional Fees

		281,615	0	0	276,045
				_	Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	Technical support services-external	23,530	0	0	23,530
2	NTRI Technical/policy support consultnats	18,685	0	0	18,685
3	Partner technical support consultants	800	0	0	800
4	Other fees	6,000	0	0	6,000
5	Subcontractors	232,600	0	0	227,030

Part I, Line 18 (990-PF) - Taxes

	21,095	0	0	11,960
- "	Revenue			Disbursements
	and Expenses	Net Investment	Adjusted	for Charitable
Description	per Books	Income	Net Income	Purposes
1 Payroll taxes	21,095	0	0	11,960

### Part I, Line 19 (990-PF) - Depreciation and Depletion

Maliasili Initiatives, Inc

						/30	0	0	
					Beginning	Revenue	Net	Adjusted	
	Date	Method of		Cost or	Accumulated	and Expenses	Investment	Net .	
Description	- Acquired	- Computation	Asset Life	Other Basis	Depreciation	per Books	Income	Income	
1 Macbook Pro and Case	1/3/2015	SL	3	2,190	1,460	730	0		

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

		119,936	125	0	57,506
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
1	Insurance	5,548	0		0
2	Bank fees	8,959	125		0
3	Board meetings	19,431	0		19,431
4	Office expense	26,601	Ō	•	1,698
5	Networking	48,184	Ō		34,831
6	Permits and fees	4,256	0		658
7	Miscellaneous	6,169	0		100
8	Professional development	788	0		788

## Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

Maliasili Initiatives, Inc

	2,190	1,460	2,190	730	0	
		Accumulated	Accumulated			
	Cost or	Depreciation	Depreciation	Book Value	Book Value	FMV
Asset Description	Other Basis	Beg of Year	End of Year	Beg of Year	End of Year	End of Year
Equipment	2,190	1,460	2,190	730	0	

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Other Disqualified Persons	
Trustees,	
Directors,	
Officers,	
- Loans from	
(990-PF)	
Line 20	
Part II,	

Maliasili Initiatives, Inc

•	<del></del>		-
	Fair Marke	Considerati	
		Consideration Description	None
		Purpose of Loan	Onerating capital
	Interest	Rate	%
		Repayment Terms	Payable in full
	Maturity	Date	1/12/2018
	Date of	Note	12/22/2017
		Secunty Provided	Insecured
000,07	Balance Due	End of Year	75,000
0	Batance Due	Beg of Year	0
13,000		Onginal Amount	75,000
		Title	Treasurer
		Name of Lender	1 Scott M O'Connell

### Part VII-A, Line 10 (990-PF) - Substantial Contributors

	•	
	Foreign Country	
	Zip Code	10019
	State	ž
	City	New York
	Street	9 West 57th Street, Ste 5000
Check "X"	If Business	×
	Name	1 Conifer Management, LLC
1		

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

<u>•</u>				0	<del>                                      </del>	T0	<u> </u>	0
	Expense	Account						
21,458		Benefits	21,458	0	0	0	0	0
209,114		Compensation		83,114	0	0	0	0
	Avg Hrs	Per Week	40 00	30 00	100	100	1 00	
		Title	Executive	000	President, BOD	Treasurer, BOD	Director	Director
		Foreign Country					,	
		Zip Code	VT 05489	94131	97031	10019-2701	20002	94103
		State	5	క	8	¥	පු	5
		Crty	Underhill	San Francisco	Hood River	New York	Washington	San Francisco
		Street	PO Box 293	279 29th Street	PO Box 1630	9 West 57th Street, Suite 5000	10 G Street, NE, Suite 800	380 14th Street, No 508
	Check "X"	if Business						
		Name	Fred Nelson	Eizabeth Singleton	Michael Baratoff	Scott O'Connell	Peter Veit	Mira Inbar
				2	~	4	40	9