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

For	calend	dar year 2017 or tax year beginning	, 2017	7, and e	ending		, 20
Nan	ne of fou	undation			A Employe	r identification num	ber
THE	E HAF	RVEY FOUNDATION, INC.			66-02	271454	
		d street (or P.O. box number if mail is not delivered to street address)	Room	/suite		e number (see instru	ctions)
FTI	RST F	FEDERAL BUILDING	507		(787	725-1814	
		n, state or province, country, and ZIP or foreign postal code	1507				nding, check here ►
, IAS	עווד, ו	AN PR 00909			2 oxompt	application to per	g, 555 11510 F
			of a former public	charity	D 1. Foreign	n organizations, chec	k here ▶ 🗍
~ ·	J	Final return Amended	·	y			_
		☐ Address change ☐ Name char				n organizations meeti here and attach com	
H	Chack	type of organization: Section 501(c)(3) exempt p		ai D		foundation status wa	
		n 4947(a)(1) nonexempt charitable trust 🗵 Other tax		k a -#	section 5	07(b)(1)(A), check her	re ▶ 🗌
_		arket value of all assets at J Accounting method					
		f year (from Part II, col. (c),	. E. Ousii E. A.	00.94.		ndation is in a 60-mo ction 507(b)(1)(B), che	
	line 16	· · · · · · · · · · · · · · · · · · ·	on cach bacie)		under co	011011 007 (5)(1)(5), 0110	
	art I		On cash basis.j			I	(d) Disbursements
ГС	irt i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	ın	come	income	purposes (cash basis only)
							(5255265)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ☑ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	24.	ļ	24.		
	4	Dividends and interest from securities	96,980.		96 , 980.		-
	5a	Gross rents		ļ			
	b	Net rental income or (loss)		,			
ue	6a	Net gain or (loss) from sale of assets not on line 10					
evenue	b	Gross sales price for all assets on line 6a	' -				
~	7	Capital gain net income (from Party Tipe 2FD).					
	8	Net short-term capital gain					
	9	Income modifications S MAY 0 2 2018					
,	10a	Gross sales less returns and allowances					
,	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)上 例, U.I.					
))	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	97,004.		97,004.		
benses	13	Compensation of officers, directors, trustees, etc.	7,500.	<u> </u>			7,500.
benses	14	Other employee salaries and wages		<u> </u>			
e e	15	Pension plans, employee benefits					
◡	16a	Legal fees (attach schedule)					
Ш	ь	Accounting fees (attach schedule)	2,279.				2,279.
<u>×</u>	С	Other professional fees (attach schedule)					
ā	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) See . Stmt.	1,028.		···········	•	1,028.
Ξ.	19	Depreciation (attach schedule) and depletion					
퉏	20	Occupancy		1			
Ă	21	Travel, conferences, and meetings	1,370.				1,370.
g	22	Printing and publications			RECE		
Operating and Administrative E)	23	Other expenses (attach schedule) See .St.mt	127.	्र	<u>-</u>		127.
ï.	24	Total operating and administrative expenses.			MAY 0	2 2016 SO-SE	1
ā	- :	Add lines 13 through 23	12,304.	<u> </u>		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	12,304.
De.	25	Contributions, gifts, grants paid	105,000.	 	OOD		105,000.
ō	26	Total expenses and disbursements. Add lines 24 and 25	117,304.	 	OGDE	IV, UI	117,304.
	27	Subtract line 26 from line 12:	127,304.	,			127,7504.
	a a	Excess of revenue over expenses and disbursements	-20,300.	1			
	b	Net investment income (if negative, enter -0-) .	-20,300.		97,004.	 	
	1	Adjusted net income (if negative, enter -0-)		-	J1,004.	0	
_			1.	L			· Form 990-PF (2017)
	•	work Reduction Act Notice, see instructions.	DEM CAMOUS SEC				1 Onli 330-F1 (2017)
BA	A		REV 01/03/18 PRO				

Б.		Attached schedules and amounts in the description column	Beginning of year		Ena o	ਾ year
Рa	rt II	Balance Sheets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Valu	Je	(c) Fair Market Value
	1	Cash—non-interest-bearing				
ı	2	Savings and temporary cash investments	73,655.	53,3	55.	53,355.
	3	Accounts receivable ▶		<u>-</u>		
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges	· = · · · = · ·		\dashv	
As	10a	Investments – U.S. and state government obligations (attach schedule)			\neg	
`	b	Investments—corporate stock (attach schedule)				
	C	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)	2,290,197.	2,610,4	38	2,610,438.
	14			2,010,4	50.	2,010,430.
	•	Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) ►				
	15	Other seeds (described				
	16	Total assets (to be completed by all filers—see the				
	.	instructions. Also, see page 1, item I)	2,363,852.	2 662 7		2 662 702
	17	Accounts payable and accrued expenses	2,303,032.	2,663,7	3 3.	2,663,793.
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			-	
ap	21	Mortgages and other notes payable (attach schedule)				
	22					
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here >				
alances		and complete lines 24 through 26, and lines 30 and 31.				
2	24	Unrestricted				
<u>=</u>	25	Temporarily restricted				
	26	Permanently restricted			-	
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ 🏻			$\neg \neg$	
Ţ		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Š	29	Retained earnings, accumulated income, endowment, or other funds	2,363,852.	2,663,7	93.	
As	30	Total net assets or fund balances (see instructions)	2,363,852.	2,663,7		
et	31	Total liabilities and net assets/fund balances (see	2/303/032.	2/003/		
Z		instructions)	2,363,852.	2,663,7	93	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	2,000,002.	2,000,7	<u> </u>	
		al net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with		
-		-of-year figure reported on prior year's return)			1	2,363,852.
2		er amount from Part I, line 27a			2	-20,300.
3		er increases not included in line 2 (itemize) UNREALIZED GA			3	320,241.
4		l lines 1, 2, and 3			4	2,663,793.
_					5	
6	Tota	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b). lir	ne 30	6	2,663,793.
-						

Part	Part IV Capital Gains and Losses for Tax on Investment Income						
		nd(s) of property sold (for example, real ease, or common stock, 200 shs MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquire (mo., day, yr.)		
1a							
<u>b</u>							
C				-			
<u>d</u>							
<u>е</u>	ı	(6) Degraciation allowed	(=) (0=+)			. (0	
	(e) Gross sales price	price (f) Depreciation allowed (g) Cost or other basis plus expense of sale				Gain or (loss) plus (f) minus (g))	
<u>a</u>							
<u>b</u>							
<u>C</u>		-	-				
d							
е	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Course	(Cal /h) and minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col. (k), bւ	(Col (h) gain minus it not less than -0-) or es (from col (h))	
a							
b							
С							
d				•			
е							
2	Capital gain net income o		also enter in Pa , enter -0- in Pa		2		
3		in or (loss) as defined in sections I, line 8, column (c). See instru					
					3		
Part		der Section 4940(e) for Redu					
Was t		re this part blank. section 4942 tax on the distribu qualify under section 4940(e). Do			base period?	☐ Yes 🗷 No	
1	Enter the appropriate am-	ount in each column for each ye	ar; see the ınstrı	uctions before m	aking any entri	es.	
Cal	(a) Base period years endar year (or tax year beginning ir	(b) Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use a	ssets (col	(d) Distribution ratio (b) divided by col. (c))	
	2016	110,8	79.	-	0.	0.000000	
	2015	113,6		2,183,7		0.052043	
	2014	108,8		2,312,1		0.047083	
	2013	106,3	28.	2,164,3	348.	0.049127	
	2012	95,2	99.	2,022,6	575.	0.047115	
2	Total of line 1, column (d					0.195368	
3		o for the 5-year base period—dividently for the 5-year base period—dividently for the formation has been in existence				0.039074	
4	Enter the net value of nor	ncharitable-use assets for 2017 f	rom Part X, line	5	. 4	0.	
5	Multiply line 4 by line 3				. 5	0.	
	, ,					 	
6		ent income (1% of Part I, line 27b				970.	
7	Add lines 5 and 6				. 7	970.	
8		ons from Part XII, line 4 ater than line 7, check the box in				117, 304. a 1% tax rate. See the	
	Part VI instructions.			-	J		

-arτ	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 494	8−see ι	nstru	ictioi	ns)
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	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	N/		
D	here \triangleright \boxtimes and enter 1% of Part I, line 27b	!	9	70.	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2		ο.	
3	Add lines 1 and 2	3	9	70.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4		0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5	9	70.	
6	Credits/Payments:			-	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) . 6c				
d	Backup withholding erroneously withheld 6d	-			
7	Total credits and payments. Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here 🗵 if Form 2220 is attached	8		23.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	9	93.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid >	10		0.	
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶	11			
	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? instructions for the definition	See the	1b		×
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any republished or distributed by the foundation in connection with the activities.	naterials			
С	Did the foundation file Form 1120-POL for this year?		1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im on foundation managers. ▶ \$	posed			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		2		×
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	rticles of			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3 4a		×
ча b	If "Yes," has it filed a tax return on Form 990-T for this year?		4a 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		
	If "Yes," attach the statement required by General Instruction T.		3		<u>×</u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions with the state law remain in the governing instrument?				
	conflict with the state law remain in the governing instrument?		6		<u> </u>
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	I Part XV	7	_ ×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (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 494		OD	×	
J	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. complete Part XIV.	If "Yes,"			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list		9		<u>×</u> _
	names and addresses				

Fait	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	* 3.	Yes	No
••	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
44	Website address ► N/A			
14	The books are in care of ► MARILYN HITT Located at ► FIRST FEDERAL BLDG, SUITE 507 SAN JUAN PR ZIP+4 ► 00909	/25-	1814	
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
	over a bank, securities, or other financial account in a foreign country?	16		X
	the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			JL
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? □ Yes ☒ No(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🗵 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	*	ئې د دې د واکيل	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations		1.75 ±	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
	were not corrected before the first day of the tax year beginning in 2017?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	,		
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
h	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		,	
U	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		×
¢	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
22	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or		ļļ	
_	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		j H	
	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.)	24		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	+	×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1		î
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	45		V

5a	VIES Statements Regarding Activities	2 IOI A	THE POINT	71201	may be in	edane		nucuj			
Ja	During the year, did the foundation pay or incur	any am	ount to:			-			1.38	Yes	No
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	⊠ No			-
	(2) Influence the outcome of any specific public	c electi	on (see secti	on 495	5); or to ca	arry on,					
	directly or indirectly, any voter registration di	rive?					☐ Yes	⊠ No			
	(3) Provide a grant to an individual for travel, stu	idy, or d	other similar i	ourpose	es?		☐ Yes	⊠ No			
	(4) Provide a grant to an organization other than	n a cha	rıtable, etc.,	organiza	ation desci	nbed in	_				
	section 4945(d)(4)(A)? See instructions						Yes	⊠ No			
	(5) Provide for any purpose other than religious	, charit	able, scientifi	c, litera	ry, or educ	ational					创作。
	purposes, or for the prevention of cruelty to						□Yes	⊠ No			
b											
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions									- NAME .	لكسخة فيق
	Organizations relying on a current notice regarding disaster assistance, check here									1	Jen 1
С	If the answer is "Yes" to question 5a(4), does to	-		-						3.3	5 1
	because it maintained expenditure responsibility						☐ Yes	□No			
	If "Yes," attach the statement required by Regul										
6a	Did the foundation, during the year, receive any					emiums				證	Z
	أخب أنسان المساورة			_			☐Yes	X No			
b	Did the foundation, during the year, pay premiur	ns. dire	ctly or indired	etly, on	a personal	benefit	_	_	6b	· 2 (12 2 4 1)	∴iniiii X
-	If "Yes" to 6b, file Form 8870.		ony or manor	July, 0	a porcoriar	Donom	001111401		367E	300 ·	.
7a	At any time during the tax year, was the foundation	a party t	to a prohibited	I tax she	elter transac	tion?	☐ Yes	X No			
	If "Yes," did the foundation receive any proceed							_	7b		
	VIII Information About Officers, Direct								1	es.	
	and Contractors	-	·			•	0,				
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	ee instru	uctions	· · · · · · · · · · · · · · · · · · ·		
	(a) Name and address		e, and average		npensation		Contribution		(e) Exper	se acc	ount.
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benefit erred compe		other a		
MAR	ILYN HITT	TREA	SURER			-					
FIRS	T FEDERAL BLDG. STE 507 SAN JUAN PR 00909		0.00		1,500.			0.			0.
		SECRI	0.00 ETARY		1,500.			0.			0.
ALF	ONSO MIRANDA	SECRI						0.		3:	
ALF FIRS	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909		ETARY		1,500. 1,500.					3.	0. 36.
ALFO FIRS VINC	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT		ETARY 0.00		1,500.						36.
ALFO FIRS VINC INDI	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT CANA UNIVERSITY Bloomington IN 47405		ETARY 0.00 IDENT					0.		3:	36.
ALFO FIRS VINC INDI	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT		ETARY 0.00 IDENT 0.00		1,500. 1,500.			0.			36.
ALFO FIRS VINC INDI	ONSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement	PRES	O.00 IDENT O.00	se inclu	1,500. 1,500. 3,000.	ne 1—:	see instr	0.	s). If no	1,0	36. 34. 0.
ALFO FIRS VINO INDI See	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT CANA UNIVERSITY Bloomington IN 47405	PRES	O.00 IDENT O.00	se inclu	1,500. 1,500. 3,000.	ne 1—:	see instr	0.	s). If no	1,0	36. 34. 0.
ALFO FIRS VINO INDI See	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employed	PRES	O.00 IDENT O.00 0.00 er than thos	 -	1,500. 1,500. 3,000.	ne 1—:	(d) Contribi	0. 0. cuctions		1,03	36. 34. 0.
ALFO FIRS VINO INDI See	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employed	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000.		(d) Contribi	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See	ONSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE."	PRES	O.00 IDENT O.00 0.00 er than thos	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribi	0. 0. cuctions		1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALFO FIRS VINO INDI See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	PRES	O.00 IDENT O.00 O.00 er than those	verage /eek	1,500. 1,500. 3,000. uded on li		(d) Contribution employee plans and contributions	0. 0. cuctions	(e) Expen	1,0	36. 34. 0. enter
ALF(FIRS VING IND) See 2	DNSO MIRANDA T FEDERAL BLDG. STE 507 SAN JUAN PR 00909 CENT A. MABERT ANA UNIVERSITY Bloomington IN 47405 Statement Compensation of five highest-paid employer "NONE." (a) Name and address of each employee paid more than \$50,00	es (oth	O.00 IDENT O.00 O.00 er than those	verage reek ssition	1,500. 1,500. 3,000. Ided on lii (c) Comper	isation	(d) Contribi employee plans and compens	0. 0. utions to benefit deferred sation	(e) Expen	1,0	36. 34. 0. enter

Par		ion About Officers, Directors, Trustees, Foundation tractors (continued)	on Managers, Highly Paid Em	ployees,
3		independent contractors for professional services. See i	nstructions. If none, enter "NON	E."
	(a) Name a	nd address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NON	E			
Tota	I number of others	eceiving over \$50,000 for professional services		
1014		eceiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	0
Par	t IX-A Summa	ary of Direct Charitable Activities		
	t the foundation's four la	rgest direct charitable activities during the tax year. Include relevant stati	streat information such as the number of	
		rigest direct chantable activities during the tax year. Include relevant statis eficiaries served, conferences convened, research papers produced, etc	stical information such as the number of	Expenses
1	N/A			
•]
				0.
2				<u> </u>
3				
				<u> </u>
4				
		ary of Program-Related Investments (see instruction		
		ogram-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1	N/A		****	
0				0.
2				
AI	other program-related in	vestments See instructions.		
3	Table Program (almod III			
•				
Tota	I. Add lines 1 through	gh 3		0.
				- 000 DE

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn foun	dations,
	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	
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	
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	0.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
•	instructions)	4	0.
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			
1	Minimum investment return from Part X, line 6	1	0.
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	1	
С	Add lines 2a and 2b	2c	970.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
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	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0.
	Qualifying Distributions (see instructions)	· - 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	117,304.
a	Program-related investments—total from Part IX-B	1b	
b	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	ID	0.
2	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	117,304.
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	970.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	116,334.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g wheth	er the foundation

ait	Alli Undistributed income (see instruction	0118)			
1	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2 a	Undistributed income, if any, as of the end of 2017: Enter amount for 2016 only			0.	0.
ь 3	Total for prior years: 20,20				
a	From 2012				
b	From 2013 0.				
c d	From 2014				
e	From 2015				
f	Total of lines 3a through e	335,213.			
4	Qualifying distributions for 2017 from Part XII, line 4: ► \$117, 304.				
a b	Applied to 2016, but not more than line 2a . Applied to undistributed income of prior years (Election required—see instructions)				<u></u>
С	Treated as distributions out of corpus (Election required—see instructions)				****
	Applied to 2017 distributable amount		:		
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2017	117,304.	-		
3	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	452,517.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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		0.		
е	Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f	Undistributed income for 2017. Subtract lines			0.	
	4d and 5 from line 1. This amount must be distributed in 2018				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				
_	applied on line 5 or line 7 (see instructions) .	0.			
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	452,517.			
10	Analysis of line 9:				
a	Excess from 2013 0.				
b	Excess from 2014				
d	Excess from 2015				
<u>e</u>	Excess from 2017				

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	N/A
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					
b	Check box to indicate whether the four		•		ection	3)_or <u>r4942(j)(5)</u>
2a	Enter the lesser of the adjusted net	Tax year		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			,	(4,444)	
b	85% of line 2a					· · · · · · · · · · · · · · · · · · ·
	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					
_	Qualifying distributions made directly					
Ŭ	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	İ				
3	Complete 3a, b, or c for the			 		
•	alternative test relied upon:					
а	"Assets" alternative test—enter:			/		
u	(1) Value of all assets		/			
	(2) Value of assets qualifying under		/			
	section 4942(j)(3)(B)(i)	1				
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:		/			
	(1) Total support other than gross		/			
	investment income (interest,					
	dividends, rents, payments on	/				
	secunties loans (section 512(a)(5)), or royalties)	/				
	(2) Support from general public	/				
	and 5 or more exempt	/				
	organizations as provided in section 4942(j)(3)(B)(iii)	/		•		
	(3) Largest amount of support from	/				
	an exempt organization		ļ			
	(4) Gross investment income	(
Part	XV Supplementary Information	on (Complete th	is part only if the	he foundation h	ad \$5,000 or mo	re in assets at
	any time during the year-	-see instruction	າຣ.)			
1	Information Regarding Foundation				-	
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	an \$5,000). (See s	ection 507(d)(2).)	
b	List any managers of the foundation					ge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater into	erest.	
2	Information Regarding Contribution		• • •			
	Check here ▶ ☐ if the foundation					
	unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in		gitts, grants, etc.,	to individuals or o	rganizations under	other conditions,
				- 4 - 1		
а	The name, address, and telephone no	imber or email add	aress of the perso	n to wnom applica	tions should be ad	dressed:
	See Supplementary Informat	ion Statemer	+			
	The form in which applications should			materials they sho	uld include:	
	The form in which applications should	. So submitted diff		materials tries site	aia ilioidde.	
c	Any submission deadlines:				·	
d	Any restrictions or limitations on av	vards, such as by	y geographical ar	eas, charitable fie	elds, kinds of inst	itutions, or other
	factors:					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any-foundation manager—	Foundation status of	Fullpose of grant of		Amount		
Name and address (home or business)	or substantial contributor	recipient	contribution				
a Paid during the year	· · · · · · · · · · · · · · · · · · ·						
UNIVERSIDAD DEL TURABO		GENERAL	DONATION				
MUSEO CTRO ESTUDIOS HUMANISTICOS		PUBLIC					
Gurabo PR 00778					1,000.		
BLOOMINGTON QUILTERS GUILD		GENERAL	DONATION		_,		
		PUBLIC		1			
BLOOMINGTON IN 47408					500.		
EDUARDO AGUILERA		GENERAL	DONATION				
		PUBLIC					
San Juan PR 00909				ļ	1,000.		
COLEGIO SAN JOSE		GENERAL	DONATION	ļ	_,		
		PUBLIC					
SAN JUAN PR 00919					7,500.		
HOGAR INFANTIL DIVINO NINO JESUS		CHARITABLE	DONATION		,,500.		
100,11 211111111111111111111111111111111		PUBLIC		Ì			
SAN JUAN PR 00919		LODBIC		ŀ	1,000.		
MAGGY HOLDEMAN		GENERAL.	SCHOLARSHIP		1,000.		
TH 1001 HODDINK		PUBLIC	SCHOBARSHII				
SAN JUAN PR 00919		LOPHIC			5,000.		
KAROL OVIEDO		CENEDAT	SCHOLARSHIP		5,000.		
MAROL OVIEDO		PUBLIC	SCHOLARSHIP				
SAN JUAN PR 00919		LOPPIC			5,000.		
OLD KINGS ELEMENTARY SCHOOL		CHARTMARIC	DOMARION		5,000.		
OLD KINGS ELEMENTARY SCHOOL		1	DONATION	1			
PALM COAST FL 32136		PUBLIC	GENERAL FUNDS		4 000		
PR DIVISION UNITED NATIONS ASSOC.		CHADIDADID	DONAGION		4,000.		
PR DIVISION UNITED NATIONS ASSOC.		1	DONATION				
SAN JUAN PR 00919		OKGAN1 ZATION	GENERAL FUNDS		2 200		
					2,000.		
See Statement							
					70 000		
					78,000.		
			{				
Total				За	105,000.		
b Approved for future payment					100,000.		
NONE							
]	}				
		İ					
			ţ				
				}			
		1		1			
		1		j			
Total	<u> </u>	1	1	3L			
1001	• • • • • •	<u> </u>	· · · · · · · · · ·	3b	<u> </u>		

Pa	rt X'	VI-A Analysis of Income-Producing Ac	tivities	 			
		oss amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	
			(a) Business code	(b) ——Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	Pro	gram service revenue:	24011000 0040			Allount	(See instructions.)
	а						
	b						
	С						
	d						
	e						
	Ť						
	-	Fees and contracts from government agencies					0.
2		mbership dues and assessments	<u> </u>		ļ	<u> </u>	
3		erest on savings and temporary cash investments			ļ		
4		idends and interest from securities		*			7. 25
5		t rental income or (loss) from real estate:	- ' '	***	2	1,100	、香菱、土、一
		Debt-financed property			<u> </u>		
^		Not debt-financed property			 		
6		t rental income or (loss) from personal property			 		
7		ner investment income			 		
8		n or (loss) from sales of assets other than inventory			 		0.
9		t income or (loss) from special events		<u> </u>			
10 11					 		
* 1	b				 		
	C		<u> </u>		 		
	d				 		
	e				 		-
12		btotal. Add columns (b), (d), and (e)	57		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		0.
						13	0.
		rksheet in line 13 instructions to verify calculation					
Pa	rt X	VI-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
Lir	e No ▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repr rposes (other tha	orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	mportantly to the ctions.)
${1}$		N/A					
							_
			- · · · · · · · · · · · · · · · · · · ·				
							
					· · · · · · · · · · · · · · · · · · ·		
			<u> </u>				
				· -			
	_						

Part	XVII	Information Organization		sfers to and Transac	tions and R	elationships With Nonc	haritable Exempt
1	in_sec	organization d	irectly or indirectly			other organization describe on=527,—relating—to—polition	
а			-	a noncharitable exemp	-		1a(1) ×
b	Other	transactions:		empt organization			1a(2) X 1b(1) X
	(3) Re	ntal of facilities,	equipment, or other	er assets			1b(3) ×
	(5) Lo	ans or loan gua	rantees	nip or fundraising solicita			1b(4) × 1b(5) × 1b(6) ×
c d	Sharin If the	g of facilities, e	quipment, mailing li	sts, other assets, or paid s," complete the following	employees ng schedule.		1c ×
	value i	n any transaction	on or sharing arrang	jement, show in column	(d) the value o	f the goods, other assets, o	r services received.
(a) Line	no. (b) Amount involved	(c) Name of nonc	haritable exempt organization	(d) Descr	iption of transfers, transactions, and	d sharing arrangements
			<u> </u>				
				<u> </u>		 	
		·					
							
	descri	ibed in section (ection 501(c)(3)) or in sec		re tax-exempt organization	s Yes 🗵 No
		(a) Name of organ	nization	(b) Type of organiz	zation	(c) Description of re	elationship
	_					· · · · · · · · · · · · · · · · · · ·	
							· · · · · · · · · · · · · · · · · · ·
Sigr Here	correct	et, and complete. Dec	laration of preparer (other the	han taxpayer) is based on all inform	nation of which pre	May with	the IRS discuss this return the preparer shown below? instructions. Yes No
	Signa	ature of officer or tru Print/Type prepare		Date Preparer's signature	Title	Date	DTIM
Paid	1	•• • •		rieparei s signature		Date Check X self-employ	if P1IN yed P01424908
	arer	JOSE L ME≀ Firm's name ▶		LP		Firm's EIN ▶ 66	
use	Only	Firm's address	PO BOX 19047				7) 764-6365
DAA			SAN TIIAN PI		00919	9-0476	Form 990-PF (2017)

Form 990-PF: Return of Private Foundation Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

	If recipient is an			
Recipient name and address (home or business)	_individual,_show_any_ relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	 -			
MONROE COUNTY MINISTRIES UNITED BLOOMINGTON, IN 47404		CHARITABL E ORGANIZAT	DONATION GENERAL FUNDS	2,500.
BECOMINGTON, IN 47404		ION		
HABITAT FOR HUMANITY BLOOMINGTON			DONATION GENERAL	2,000.
BLOOMINGTON, IN 47404		E ORGANIZAT ION	FUNDS	
ST. VINCET DE PAUL SOCIETY BLOOMINGTON		CHARITABL	DONATION GENERAL	2,000.
BLOOMINGTON, IN 47408		E ORGANIZAT ON	FUNDS	
AAUW PUERTO RICO		CHARITABL	DONATION GENERAL	1,000.
		E ORGANIZAT	FUNDS	
SAN JUAN, PR 00919		ION		
INDIANA UNIVERSITY FOUNDATION-HARVEY SCHOLARCHIP		CHARITABL	DONATION GENERAL	2,000.
BLOOMINGTON, IN 47405		E ORGANIZAT ION	FUNDS	
INDIANA UNIVERSITY FOUNDATION ADVOCATE OFFICE		CHARITABL	DONATION GENERAL	2,000.
BLOOMINGTON, IN 47405		E ORGANIZAT ION	FUNDS	
NSTRA SRA DE LA PROVIDENCIA			DONATION GENERAL	13,000.
SAN JUAN, PR 00921		E ORGANIZAT ION	FUNDS	·
FUNDACION PEDIATRICA DE DIABETES			DONATION GENERAL	3,500.
SAN JUAN, PR 00909		E ORGANIZAT ION	FUNDS	
SALVATION ARMY		CHARITABL	DONATION GENERAL	2,000.
SAN JUAN, PR 00909		E ORGANIZAT ION	FUNDS	
ROBINSON SCHOOL	 	L	DONATION GENERAL	15,000.
SAN JUAN, PR 00907		LE ORGANIZAT ION	FUNDS	·
BILL'S KITCHEN		CHARITABL	DONATION GENERAL	1,000.
SAN JUAN, PR 00917		E ORGANIZAT ION	FUNDS	
UNION CHURCH OF SAN JUAN			DONATION GENERAL FUNDS	1,000.
SAN JUAN, PR 00913				
SAN JUAN COMMUNITY LIBRARY		CHARITABL E	DONATION GENERAL FUNDS	10,000.
GUAYNABO, PR 00970		ORGANIZAT ION		
ESCAPE		_	DONATION GENERAL	2,500.
SAN JUAN, PR 00908		E ORGANIZAT ION	FUNDS	
HECTOR "TUTO" VIVAS FOUNDATION		CHARITABL		2,500.
PONCE, PR 00733		E ORGANIZAT ION	FUNDS	

78,000.

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
UNION CHURCH HUNTINGTON , IN 46750		CHARITABL E ORGANIZAT ION	DONATION GENERAL FUNDS	5,000.
ASHLEY YANES SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	4,000.
ANAIS GONZALEZ SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	1,500.
MELISSA MARZAN SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	1,000.
SHAYLEEN NORAT SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	1,000.
CLARA LUZ ROJO SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	1,000.
GABRIELLE TIMOFEEVA SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	1,000.
ROBINSON DE JESUS ROMERO SAN JUAN, PR 00909		GENERAL PUBLIC	SCHOLARSHIP	1,500.

Continuation Statement THE HARVEY FOUNDATION, INC.

Form 990-PF: Return of Private Foundation
Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred	Expense account, other allowances	
JOSE A. MIRANDA	TRUSTEE	1,500.	.0	0	
33 RESOLUCION ST. SUITE 801	0.00				
San Juan, PR 00920					
TROY W. FIELDS	TRUSTEE	1,500.	0	0	_
FIRST FEDERAL BLDG. STE 507	0.00				_
SAN JUAN, PR 00909					
		3,000.		· •	

THE HARVEY FOUNDATION, INC.

Continuation Statement Form 990-PF: Return of Private Foundation Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Name and Address Information	Form Information	Submission Information	Restrictions
LEON AVE, FIRST FEDERAL BLDG., STE 507 00909	WRITTEN EXPLANATION OF THE ORGANIZATION NEEDS AND HOW WILL THE FUNDS BE USED TO MEET THE NEED	JANUARY 31	NO RESTRICTIONS. EDUCATIONAL SCHOLARSHIPS, GRANTS & PRESELECTED
/8/-/25-1814			CHAKITABLE ORGANIZATIONS.