Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 2017

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/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2017 cale	ndar year, or tax year beginning Janaury 1, 2017, and endir	19 Dece	meber 31	, 20 17									
В	Check if	applicable	C Name of organization Foundation for a Better Puerto Rico Inc		D Employ	er identification number									
	Address	change	Doing business as			66-0817772									
	Name ch	ange	Number and street (or P O box if mail is not delivered to street address) Room/su	ute	E Telepho	ne number									
	Initial reti	urn	PO Box 938			787-705-0082									
	Final retur	n/terminated	City or town, state or province, country, and ZIP or foreign postal code			· · · · · · · · · · · · · · · · · · ·									
	Amended	d return	Culebra, PR 00775		G Gross r	eceipts \$ 419,477 31									
	Applicati	on pending	F Name and address of principal officer Dennis Hickey Rivera	H(a) is this a	group return for	subordinates ² ☐ Yes									
			PO Box 938 Culebra, PR 00775	H(b) Are a	all subordinate	s included? Yes No									
1	Tax-exer	npt status	✓ 501(c)(3)) it.	'No," attach	a list (see instructions)									
J	Website:	:► ww	w betterpuertorico org	H(c) Grou	ıp exemptior	number ►									
K	Form of o	organization	✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of forma	tion 201	4 M State	of legal domicile PR									
P	art l	Summ	ary												
	1	Briefly de	escribe the organization's mission or most significant activities Suppo	rt commun	ity progran	ns and promote the									
õ		the devel	opment and economic growth of Puerto Rico												
Governance															
ver	2	Check th	is box ▶ ☐ if the organization discontinued its operations or disposed	of more tha	an 25% of	its net assets									
Ĝ	3	Number (of voting members of the governing body (Part VI, line 1a)	•	3	5									
•ŏ			of independent voting members of the governing body (Part VI, line 1b)		4	. 5									
ij	5	Total nun	nber of individuals employed in calendar year 2017 (Part V, line 2a)		. 5	0									
Activities &	6	Total nur	nber of volunteers (estimate if necessary) .		6	0									
ĕ	1		elated business revenue from Part VIII, column (C), line 12		7a	0									
	b	Net unrel	ated business taxable income from Form 990—Jupe 34	<u>.</u>	. 7b	0									
	_		TALOLIVED	Year	Current Year										
Revenue			tions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g) NOV 2 1 2018	45,193 00	419,395 26										
		-	service revenue (Part VIII, line 2g) 8 NOV 2 1 2018												
æ,			nt income (Part VIII, column (A), lines 3 4, and 7d)		54 84	82 05									
	11	Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c 9c 16g and 11e) enue – add lines 8 through 11 (must equal Part VIII, solumn (A), line 12)												
					45,247 84										
	1		nd similar amounts paid (Part IX, column (A), lines 1–3)		56,894 77	237,406 83									
			paid to or for members (Part IX, column (A), line 4)												
ses	1		other compensation, employee benefits (Part IX, column (A), lines 5–10)												
Expenses			onal fundraising fees (Part IX, column (A), line 11e)												
찣			draising expenses (Part IX, column (D), line 25)	<u> </u>											
			penses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,760 23										
			penses. Add lines 13–17 (must equal Part IX, column (A), line 25)	.	60,655 00										
	T	nevenue	less expenses Subtract line 16 from line 12	Beginning of ((15,407 16) Current Year	174,083 04 End of Year									
Net Assets or Fund Balances	20	Total acc	ets (Part X, line 16)	Degining of											
Asse	21		ulities (Part X, line 16)	<u>-</u>	17,189 08										
E's	22		ts or fund balances Subtract line 21 from line 20		3,500 00 13,689 08										
	art II		ture Block		13,003 00	187,772 12									
			ry, I declare that I have examined this return, including accompanying schedules and state	ments and to	the hest of	my knowledge, and helief, it is									
			lete Declaration of preparer (other than officer) is based on all information of which prepare			my miowicago and boner, it is									
		I N	. /	1	11-	15-ZUIF									
Sig	jn	Sign	ature of office		Date										
He															
		Туре	e or print name and title			702 H H H T T T T T T T T T T T T T T T T									
Do	.: A	Print/Ty	pe preparer's name Preparer's signature D	ate	Charle	PTIN									
Pa		Milton A	A Colon	11-15-20	Check self-em										
	epare e Onl	'	TV()		rm's EIN ▶	66-0836126									
US		у ——	ddress ► 33 Calle Resolucion Ste 701-A San Juan, PR 00920		hone no	787-705-0082									
Ma	y the IR		s this return with the preparer shown above? (see instructions)			V Yes No									
				No 11282Y		Form 990 (2017)									

Form 99			Page 2
Part			_
1	Check if Schedule O contains a response or note to any line in this Part III	• • •	
·	The purpose of the Corporation is to support people and programs that build a stronger Puerto Rico. The range of supported would include but not be limited to education, health, the environment, economic development, disaster and response and community partnerships. A special emphasis would be on activities in Culebra, Puerto Rico.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	e 🗌 Yes	☑ No
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?		☑ No
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program service expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all the total expenses, and revenue, if any, for each program service reported		
4a	(Code:	rained as c such as ho as going to generators he Founda services ome financi	lisaster allable use fires take for the tion is
4b	(Code) (Expenses \$ 15,580 including grants of \$ 15,580) (Revenue \$	15,58	····
	The Foundation supported and collaborated with existing organizations that are doing philanthropic or community a stronger Culebra and Puerto Rico. During the year the Foundation supported the following charitable entities. (a FM, a community based radio station staffed by volunteers, was launched in 2013 to give the people of Culebra an outlet for their voices to be heard. (b) The Culebra Foundation, a 20-year-old wonderful organization dedicated to represervation of the history of Culebra and its people. (c) Friends of Culebra Animals, a volunteer group that ensurreatment of animals on our island. A team of vets who came to the island once a month to provide veterinary service welfare. (d) Proyecto Sieribia is an initiative that promotes education regarding ecological principles for planting project is in charge of maintaining a community orchard that encompasses all the green spaces of SEVA, the old of Children are taught about compost, maintenance of seed banks, and different ecological planting techniques. The hen house which collects firesh eggs. (e) Project LAUNCH's mission is to promote the welfare and healthy development and their families up to eight years of age. The project strives to ensure that newborns and their families.	programs Radio Vied Vieques a esearch an es the huma ces to anir and growin school of C project als ment of ne	to build gues 90 1 real d ane nal g The ulebra b built a
-10	basic social, familial, and community necessities from a from a human's rights perspective	14.66	<u> </u>
4c	(Code:) (Expenses \$ 10.600 including grants of \$ 10,600) (Revenue \$ The Foundation supports programs and efforts to ensure that every child has access to a quality education and the the resources they need to provide such an education. During the year the Foundation supported the following ed (a) Abbie's School, a home school cooperative with 30 children in Culebra. The Foundation provided scholarships who would otherwise not be able to attend. We also provided an electric whiteboard and related equipment to provided students a tool for teaching and learning, as well as providing the experience of working with this type of tech School is the public school for Culebra with 150 children from Kindergarten to 12th grade. The Foundation has supportant for graduating students. The Foundation has also been supporting the recovery and resiliency of the students and supplies were provided or an art program for the students developed by the University of PR. The teach program to build emotional intelligence, positive thinking and resilience provided by a well-known psychiatrist. The being expanded to the parents of the students. (c) Asociación Educativas, a daycare center, caring for 30 children	ucational e to students ride teacher nology (b) oported the dents and to ers particip e program	ners have ntities s who s and Ecologic awards eachers eated in a

8,825 00) (Revenue \$

237,406 83

43,164 04)

4d Other program services (Describe in Schedule O) (Expenses \$ 8,825 00 including grants of \$
 4e Total program service expenses ► 2

ABODI

	Observation of Description of Colonial		<u>'</u>	rage C
Part	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	ves ✓	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	V	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	_	1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> .	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		√
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			1.
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		√
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e	_	.√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII .	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a	Did the organization maintain an office, employees, or agents outside of the United States? .	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		†
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			Ė
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			ĺ
	disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			1
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	i	✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	1	1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV .	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.	33		/
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	_34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		V
b	if "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b	L	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			1.
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		1,
00	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 192 Note . All Form 990 filers are required to complete Schedule O.			ļ

Form **990** (2017)

orm 99	0 (2017)			F	age 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable .	-	이		
С	Did the organization comply with backup withholding rules for reportable payments to reportable gaming (gambling) winnings to prize winners?	vendors and	1c	<u> </u>	£20
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1			NAMES OF
	Statements, filed for the calendar year ending with or within the year covered by this return 2	a		2	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax	returns?	2b	CASCRIATAR	MANAPAS
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruc	tions)	ar y		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Sche		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or o	•			
	over, a financial account in a foreign country (such as a bank account, securities account, or c	ther financial	1 1		,
L	account)?		4a	Rin Cies	V Roman
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finan	A			
	(FBAR)	ciai Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		5a		✓_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tr	ansaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	and did tha	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, organization solicit any contributions that were not tax deductible as charitable contributions?	and did the	6-		,
b	If "Yes," did the organization include with every solicitation an express statement that such co	ntributions or	6a		
_	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	•	Witt	No. 7 Page	機関
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	tly for goods	e Elice		
	and services provided to the payor?		7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for	which it was			,
	required to file Form 8282?		7c	GS 191	13556.17
d e	If "Yes," indicate the number of Forms 8282 filed during the year		7e	34 7 24.7	
f	Did the organization, during the year, pay premiums, directly or indirectly, no pay premiums of a personal benefit of		7f		<u>/</u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 889		7g		\
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a f	•	7h		<u>, </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund main	tained by the			* 500 v
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.			200	27
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		<u> </u>
_b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person	7	9b	3~23%±	रुख स्त्र
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	اما			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter	, ,,			
а	Gross income from members or shareholders	a		3	
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them.)	b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	orm 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12	!b			1 1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		3000	\$7. 78 .	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	£42.040°	S. 20. 0. 2 ml
b	Note. See the instructions for additional information the organization must report on Schedule C Enter the amount of reserves the organization is required to maintain by the states in which	•			70
J	the organization is licensed to issue qualified health plans	ıh İ			
С	Enter the amount of reserves on hand	_			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	· - 1	14a	(* 7.12.2)	<u> </u>
h	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Sch	odule O	14b		<u> </u>

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Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change.			struct	ions
	Check if Schedule O contains a response or note to any line in this Part VI	· · · · ·	<u> </u>		. 🗸
Secti	on A. Governing Body and Management			1	1
4 -		ا م	_ (38653)	Yes	No Populari
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5 :		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar		State of C		
	committee, explain in Schedule O				
h	·	1b		對於	
ь 2	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business in				
_	any other officer, director, trustee, or key employee?	· · · · · ·	2	. 33 ± 3414	1
3	Did the organization delegate control over management duties customarily performed by or	under the direct	-		+
_	supervision of officers, directors, or trustees, or key employees to a management company or other		3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4	ļ	7
5	Did the organization become aware during the year of a significant diversion of the organization		5		1
6	Did the organization have members or stockholders?		6		1
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint		<u> </u>	
	one or more members of the governing body?		7a		1
b	Are any governance decisions of the organization reserved to (or subject to approva	I by) members,			
	stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions un	dertaken during	3.5	1. No.	1912 L 3
	the year by the following				100
а	The governing body? .	•	8a		✓
b	Each committee with authority to act on behalf of the governing body?		8b		✓
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be seen any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be seen as a second section of the section and the second section of the section and the second section of the section of th				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9	L,	✓
Secti	ion B. Policies (This Section B requests information about policies not required by th	e Internal Reve	nue C		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	ļ	✓
b	If "Yes," did the organization have written policies and procedures governing the activities o affiliates, and branches to ensure their operations are consistent with the organization's exemple.		40.		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo		10b	_	
11a		-	11a	174.75	12° 10
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Parthern	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b	-	1
C	Did the organization regularly and consistently monitor and enforce compliance with the		120		
•	describe in Schedule O how this was done	policy. II res,	12c		1
13	Did the organization have a written whistleblower policy?		13	-	1
14	Did the organization have a written document retention and destruction policy?		14		7
15	Did the process for determining compensation of the following persons include a review	and approval by	(M)	NO.	100.50
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			
а	The organization's CEO, Executive Director, or top management official		15a		✓
b	Other officers or key employees of the organization	•	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		35238		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim	ılar arrangement		1	مديد
	with a taxable entity during the year?		16a		✓
b	· · · · · · · · · · · · · · · · · · ·				
	participation in joint venture arrangements under applicable federal tax law, and take steps	to safeguard the			
	organization's exempt status with respect to such arrangements?		16b	<u> </u>	L
	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed Puerto Rico	and 000 T (Saction	n F04	(0)/2)-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply	110 990-1 (56CIIC	11 OU I	(८)(७)8	only)
		hadula (1)			
19	Own website Another's website Upon request Other (explain in Sc Describe in Schedule O whether (and if so, how) the organization made its governing docume		torest	nolic	u ann
19	financial statements available to the public during the tax year	arta, comilici of ili	101621	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization	on's hooks and r	acorda	: -	
	Theresa Bischoff PO Box 938 Culebra, PR 00775 Tel (917) 887-4800	on a books and n	Joorus	,. -	
	THE COST DISCHOLL TO DOX 330 COLEDIA, FR 00773 TEL (317) 007-4000				

Daga	•
Page	•

_			
Form	990	1201	71

Part VII	Compensation of Officers, Directors,	Trustees, Key Er	mployees, Highest	Compensated I	Employees,	and
	Independent Contractors					

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons.

✓ Check this box if neither the organization nor	any relate	d orga	anız	atıo	n c	ompe	nsa	ted any curren	t officer, directo	r, or trustee
(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos eck s pe	more rson	than one that the that the that the that the that the that the the that the the that the that the the the the the the the the the th	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Dennis Hickey Rivera	2	1						o	0	0
President (2) Tonio Burgos	1	•								0
Vice-president		✓						0	0	
(3) Theresa Bischoff	2							•		
Secretary and Treasurer		✓					<u> </u>	0	0	
(4) Betsy Gotbaum	11	,	İ							
Board Director		✓	┢		_	-	-	0	.0	0
(5) Keyla Torres	11	1	İ							
Board Director (6)		•						C	0	0
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees		nd H C)	lighes	st C	ompensated E	mployees (co	ontinu 	ed)	
	(A) Name and title	(B) Average hours per week (list any hours for related	box, i	ot ch unles er and	eck s pe	rson	than on the street or trust empty the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street or the street	an	(D) Reportable compensation from the organization	(E) Reportable compensation related organization (W-2/1099-MI)	from	(F) Estimated amount of other compensation from the	ก
		organizations below dotted line)		Instrtutional trustee	7	Key employee	Highest compensated employee	er .	(W-2/1099-MISC)			organizatior and related organization	
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Sub-total .			L	•	L	L	>	C		0		C
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio	n A				•	>	0		0		C
2	Total number of individuals (including bur reportable compensation from the organi		d to th	ose	list	ted	above	e) w	·			of	
3	Did the organization list any former of	ficer, direc	tor, c	or tr	uste	ee,	key 6	emp		nest compen	sated	Yes	No
4	employee on line 1a? If "Yes," complete of any individual listed on line 1a, is the									annation fro	m tha	3	✓
•	organization and related organizations individual												√
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indi	vidual		<u>·</u>
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear												ax
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compensation	
None									-				
													
2	Total number of independent contracts	ore (include	an b	ıt n	O†	limit	ed +		nee listed sh	ove) who			
~	Total number of independent contractor	ns (includii	ny DL	at M	υl	m#HI	cu ((·ιr	iuse iisted ad	UVE) WIIO			

received more than \$100,000 of compensation from the organization ▶

Part VIII		Statement of Revenue									
		Check if Schedule O	contains a res	ponse or note to	o any line in this	Part VIII .		🗆			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
\$ \$	1a	Federated campaigns	1a	From Electronical consistents about	TO SEE MARKET	NATURAL SERVICE	11.54				
Grants	b	Membership dues	1b				(a. 25)				
S, G	C	Fundraising events .	1c		(* 3. Yu.)	1. 70%					
Giffts, ilar An	d	Related organizations	s 1d		4.7						
S, (е	Government grants (con	tributions) 1e								
tion S. S.	f	All other contributions, g									
the Bu		and similar amounts not inc	luded above 1f	419,395 26							
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include	ded in lines 1a-1f \$			+ 11/2		Marie Fine Committee			
	ħ	Total. Add lines 1a-1	f	. ▶	419,395 26		1916 6	37.55.228° 90.5504			
<u>J</u>				Business Code							
eve	2a		·								
e T	b										
Σ	C										
Se	d										
ran	e	All other program con									
Program Service Revenue	f g	All other program ser Total. Add lines 2a-2					 	l Ventonia de la comunicación de la comunicación de la comunicación de la comunicación de la comunicación de la c			
	3	Investment income				27、G420MS-12-65ABA-140MS-482ABA-12-64	CAMPERSON AND SOME WARREST	AND THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF T			
		and other similar amo		•	82 05						
	4	Income from investmen	•	ond proceeds ▶	02.03		1				
	5	Royalties		•							
		•	(ı) Real	(II) Personal	* 30.00	Service Control	0.4500 no.2525	* 0.41 (0.42 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44 (0.44			
	6a	Gross rents									
	b	Less: rental expenses									
	С	Rental income or (loss)			All the car also	an and a	11/10 - 12/2007 (A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	i wa composition			
	d	Net rental income or	<u> </u>	•		<u> </u>					
	7a	Gross amount from sales of	(i) Securities	(ii) Other			Militaria de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composição de la composi				
		assets other than inventory	<u>-</u>					100,000,000,000,000,000,000,000,000,000			
	b	Less cost or other basis									
		and sales expenses									
	C	Gain or (loss)	L		Marie and and and and and and and and and and			ame down on processing Asia (and			
	d	Net gain or (loss)			THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE P	WWW	Mandor vi. iinkor				
e	8a	Gross income from fu	ındraising				10.00				
_	04	events (not including \$	sharaising	1							
è		of contributions reporte	ed on line 1c)			the control	4	12			
ē		See Part IV, line 18	· a	1		70	31.5				
Other Rever	b	Less direct expenses	s . b)							
•	С	Net income or (loss) f	from fundraising	events . >		and all leaves in					
	9a	5	aming activities		16 K 18 TV						
		See Part IV, line 19	\cdots				14 T	Later Committee			
	b	Less direct expenses				- 11 2 2 2 2 2 3 3		Same and the same and the same and the same and the same and the same and the same and the same and the same a			
	С	Net income or (loss) f		ivities							
	10a							2.50			
		returns and allowance	_				4.4				
	b	Less cost of goods s		· L							
	СС	Net income or (loss) f			3584977700000000000	MARINEST MARKET PARTY		01.32.04(*36.42.5.24.291.21**			
	44-	iviiscellaneous P	neverlue	Business Code			15 / 12 / 12 / 12 / 12 / 12 / 12 / 12 /				
	11a				 						
	b				+		-				
	d	All other revenue		-	1		 -:				
	e	Total. Add lines 11a-	-11d		 		100	A			
	12	Total revenue Secu				School Art Children Control	Personal Control of State Control	DAY MARKAGANA TANDAR MENANTA TAN			

	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must con				olumn (A)
	Check if Schedule O contains a respon				<u></u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	237,406 83			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22			3470 10 m 10 m	
3	Grants and other assistance to foreign	_			
	organizations, foreign governments, and foreign			4.7	
	individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
3	trustees, and key employees .				
6	Compensation not included above, to disqualified		1		
•	persons (as defined under section 4958(f)(1)) and		ļ '		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		- 112 12		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
a	Management			_	
b	Legal				
C	Accounting	5,275 00			
d e	Lobbying Professional fundraising services See Part IV, line 17		RYTTA PERANT		
f	Investment management fees		JOHN AND SHEET WHEN THE	And a read that the reserve	
g	Other (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion .				
13	Office expenses				
14	Information technology				
15	Royalties .				
16	Occupancy				
17 18	Travel .				
10	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
- 20	Interest				
21	Payments to affiliates				,
22	Depreciation, depletion, and amortization .				
23	Insurance .			^	
24	Other expenses. Itemize expenses not covered		A CHARLES	75 (5 A) P	
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	Bank Charges	2,712 44		<u> </u>	
b					
c d			-		
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	245,394 27			
26	Joint costs. Complete this line only if the				<u> </u>
	organization reported in column (B) joint costs from a combined educational campaign and				
۲	fundraising solicitation Check here				
ł	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets			Check if Schedule O contains a response or note to any line in this Pa	art X		🗍
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27 Unrestricted net assets	es	_==,	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
28 Temporarily restricted net assets	JE.	27		17 189 08	27	187 772 12
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30 Capital stock or trust principal, or current funds	or Fun		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
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34 Total liabilities and net assets/fund balances 17,189 08 34 202,507 71		34	Total liabilities and net assets/fund balances	17,189 08	34	

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	0 (2017)			Page 12
Part	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	, , , ,	<u></u>	<u>· · Ц</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>19,477 31</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		45,394 27
3.	Revenue less expenses Subtract line 2 from line 1	3		74,083 04
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>17,189 08</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		-3,500 00
9	Other changes in net assets or fund balances (explain in Schedule O) .	9		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	. 1	87,772 12
art	XII Financial Statements and Reporting			
1	Check if Schedule O contains a response or note to any line in this Part XII	cplain in		es No
2a	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis		Za	res No
2a	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," exchedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both.	piled or		es No
2a b	Accounting method used to prepare the Form 990.	ed on a	2a	es No
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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

2018

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	J	for a Dawn Dawn Complete				:	co oo	
Par		for a Better Puerto Rico Inc Reason for Public Char	rity Status (All	organizations must	comple	te this p	66-08 art) See instruction	
				_				
1 2 3 4	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
5	☐ Ar	n organization operated for tection 170(b)(1)(A)(iv). (Comp	the benefit of a	college or university	owned o	r operate	d by a government	al unit described in
6 7								n the general public
8	\square A	community trust described in	n section 170(b)	(1)(A)(vi). (Complete F	Part II)			
9	☐ Ar or ur	n agricultural research organi university or a non-land-gra niversity	zation described nt college of agri	d in section 170(b)(1)(iculture (see instruction	(A)(ix) opens) Ente	r the nam	ne, city, and state of	the college or
10	re su	n organization that normally r ceipts from activities related ipport from gross investment cquired by the organization a	to its exempt fuil income and uni	nctions—subject to co related business taxal	ertain exc ole incom	eptions, e (less se	and (2) no more that ection 511 tax) from	n 331/3% of its
11	☐ Ar	n organization organized and	operated exclus	sively to test for public	safety. S	See sect i	on 509(a)(4).	
12	of	n organization organized and one or more publicly suppo neck the box in lines 12a thro	rted organization	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). See	e section 509(a)(3).
а		Type I. A supporting organ the supported organization supporting organization Y	(s) the power to	regularly appoint or e	lect a ma	jority of t	- · · · ·	
b		Type II. A supporting organization(s) You must	the supporting o	rganization vested in	the same			
С		Type III functionally integ its supported organization(ally integrated with,
đ		Type III non-functionally integrated that is not functionally integrequirement (see instructionally integrated in the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contracti	grated The orga	nization generally mus	st satisfy	a distribu	ition requirement an	-
е		Check this box if the organ functionally integrated, or 1						e II, Type III
f		er the number of supported o						
<u>g</u>	Pro	vide the following information	about the supp	ported organization(s)	ı		T	
	(i) Nar	ne of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)	•							
(D)								
(E)	-							
Tota	1		MARIA MARIA MARI	AND IN CALL PROPERTY.	647, MAC 43	With Mark		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Part II

Section	on A. Public Support	٠.			•		
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) ,Total
1	Gifts, grants, contributions, and		·			•	- /
	membership fees rećeived (Do not	~	,		l		•,
•	include any "unusual grants") .	18,480 00	71,810 00	45,193 00	419,395 26		554,878 26
- 2	Tax revenues levied for the				ν -		
	organization's benefit and either paid			, ,		4	· .
	to or expended on, its behalf		1	,		•	
3	The value of services or facilities			•			,
•	furnished by a governmental unit to the						• •
	organization without charge	,	•				
4	Total. Add lines 1 through 3	18,480 00	71,810 00	· 45,193 00	419,395 26		554,878 26
- 5	The portion of total contributions by						
	each person (other than a		100				,
	governmental unit or publicly	14.5				19564562143	,
	supported organization) included on		46	18.7			,
	line 1 that exceeds 2% of the amount	2022	10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 July 10 Jul		F # 152 F75		
	shown on line 11, column (f)	这种作品 。第	118 S. 11 S. 10	and the base			
۰ 6	Public support. Subtract line 5 from line 4	THURS W	Misight 28	W. 372 272	The Case of		554,878 26
Secti	on B. Total Support	1 7	,			- \	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	18,480 00	71,810 00	45,193 00	419,395 26	•	554,878 26
8	Gross income from interest, dividends,		•			,	
	payments received on securities loans,		•			-	•
	rents, royalties, and income from	-				,	
	similar sources	· 14 30	20 35	54 84	82 05	ر	171 54
. 9	Net income from unrelated business	_		٠.,٠	•	p.	
٠.	activities, whether or not the business	•	,				, Mg
,	is regularly carried on						
10	Other income. Do not include gain or				٠. ا	•	٠ 1
	loss from the sale of capital assets	, • "		•			
	(Explain in Part VI) .						
11 ·	Total support. Add lines 7 through 10	经等多。在他	A SECTION A	ara Pantasa J	学出来到 88348	THE REAL PROPERTY.	555 049 80
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	ı, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he			<u> </u>			▶ 🗸
Secti	on C. Computation of Public Suppo					, ,	
14	Public support percentage for 2018 (line		-	1, column (f))		14	<u></u>
15	Public support percentage from 2017 Sc					15	<u> %</u>
16a	331/3% support test-2018. If the organ				nd line 14 is 30	31/3% or more,	check this
	box and stop here. The organization qua			_			- ▶ ⊔
b	331/3% support test—2017. If the organ					is 331/3% or m	ore, check
	this box and stop here. The organization	•			•		. •
17 <u>a</u>	10%-facts-and-circumstances test-2						
-	10% or more, and if the organization m						
	Part VI how the organization meets the	"tacts-and-circ	umstances" te	est The organi	zation qualifies	s as a publicly	
	organization	•		-	•	•	• ▶ □
b	10%-facts-and-circumstances test-2						
٠	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization i	meets the "fac	ts-and-circum	stances" test	the organizati	on qualifies as	a publicly
	supported organization		:		~.		. ▶ 🗀
18	Private foundation. If the organization d	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see
	instructions . , , ,	·				·	. •

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	ie x (r 0im 990 0i 990-LZ) 2010						Page J
Part	Support Schedule for Organization (Complete only if you checked the				nization failor	t to avalify up	dor Post II
	If the organization fails to qualify						der Part II.
Coati		under the te	sts listed bei	ow, please co	ompiete Part	11.)	_/
	on A. Public Support	(-) 0014	(6) 0045	(-) 0016	(4) 0047	1-> 0010	(6 T-+-
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018/	(f) Total
1	Gifts, grants, contributions, and membership fees					/	
2	received. (Do not include any "unusual grants") Gross receipts from admissions, merchandise					/	
_	sold or services performed, or facilities		V.				
	furnished in any activity that is related to the				/		
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf			. /			
5	The value of services or facilities		1		`		
	furnished by a governmental unit to the	,				Į.	
	organization without charge .						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3		/	1			
	received from disqualified persons						
b	Amounts included on lines 2 and 3	ſ					
	received from other than disqualified		/				
	persons that exceed the greater of \$5,000		/				
	or 1% of the amount on line 13 for the year		/				
_	Add lines 7a and 7b		STAND STANDS STOCKED	A STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STA	to CPFT. to 3. VARId to to 3.TNA/X	ALL IF ME CHECKES I	
8	Public support. (Subtract line 7c from						
<u> </u>	line 6.)	1888 1887 1888 1888 1888 1888 1888 1888			144.5	AULINE SE	
	on B. Total Support			γ	1	1	
	dar year (or fiscal year beginning in)	(a) ∕2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,	/]		
	payments received on securities loans, rents,	./				1	
	royalties, and income from similar sources						
ь	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975				ļ		
	Add lines 10a and 10b		ļ				
11	Net income from unrelated business						
	activities not included in line 10b, whether						
4.5	or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI)					[
40						·	
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years of the Form 990 is for the	ha arganizatio	n'e firet secon	d third fourth	or fifth tax v	l l	n F01/o)(2)
14	organization, check this box and stop he	_	ii s iiist, secon	ia, triira, tourti	i, or militiax y	ear as a sectio	11 30 1(c)(3)
Sect	ion C. Computation of Public Suppo				<u>-</u>	·	
	Public support percentage for 2018 (line			12 solumn (f)		45	
15			•	rs, column (i))		15	<u>%</u>
16 Secti	Public support percentage from 2017 Scion D. Computation of Investment In			· · · · · · · · · · · · · · · · · · ·	•	1 10]	<u> </u>
17	Investment income percentage for 2018			by line 12 col-	ımn (fl)	17	%
17 18	Investment income percentage for 2018 Investment income percentage from 201					18	
18 19a	381/3% support tests—2018. If the organ				 nd line 15 is s		
139	17 is not more than 331/3%, check this box						
./	331/3% support tests—2017. If the organi		-				_
٦	line 18 is not more than 331/3%, check this						
/20	Private foundation. If the organization d		•		· · · · · · · · ·	- · ·	=

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4950(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- C Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		<u>, </u>	
	·	Yes	No
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Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		Ga.	1007
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
<u>c</u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
) ->>>/ 255%	Yes	No
. 1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	3		
	controlled the organization's activities of the organization had more than one supported organization,	7,00		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	2.33	数数	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	300		SEP I
_	organization operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
•	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	340,124644	*********
Section	on C. Type II Supporting Organizations			·
	• .		Yes	No
1 1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		L
Section	on D. All Type III Supporting Organizations			
		1915-714	Yes	No
Ι, ,	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			X X X
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	144		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	100	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	24,47%		4201
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	E		
.•	the organization maintained a close and continuous working relationship with the supported organization(s).	2	A11216-112	-NoAF1E
3 -	By reason of the relationship described in (2), did the organization's supported organizations have a	78	193	
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s)
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	,		
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in:		_
2	Activities Test Answer (a) and (b) below.	X 854. 824.	Yes	NO
, a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1	D.W.	
`	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		12	
	that these activities constituted substantially all of its activities	2a	3744	ii Saa
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	40.00	1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	38		
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		- CONTRACTOR
3	Parent of Supported Organizations Answer (a) and (b) below.	AGS	47.0	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
•	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		- 1	

instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional rt V Type III Non-Function Part V Type III Non-Function Part V Type I	gan	izations	- age (
Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.	g tru	st on Nov 20, 1970 (explai	
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2	RESERVED TO A PROPERTY OF THE PROPERTY OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRANT OF THE WARRA	Maria 47 (47) 40 46 47 (47) 4 (48)
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		·
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		-
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount	10		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2	TERL LARGE TADAR	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly in	tegrated Type III supporting	g organization (see

1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount Section E – Distribution Allocations (see instructions) 1 Distributable amount for 2018 from Section C, line 6 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions 3 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014 c From 2015 d From 2016 e From 2016 f From 2016 g Applied to underdistributions of prior years h Applied to underdistributions of prior years h Applied to 2018 distributable amount c Remaining underdistributions of prior years b Applied to 2018 distributable amount c Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g, 3n, and 3 from 3f. 9 Distributions for 2018 distributable amount c Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2019. Add lines 3j and 4c. 8 Breakdown of line 7	
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Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

	lation for a Better Puerto Rico Inc		66-0817772
Pai	Organizations Maintaining Donor Adv		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	neld in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		☐ Yes ☐ No
Par	t II Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the		•
•	Preservation of land for public use (e.g., recrea		of a historically important land area
	Protection of natural habitat	_	of a certified historic structure
		Freservation c	a certified historic structure
•	Preservation of open space	old a qualified conceniation contribute	on in the form of a concentation
2	Complete lines 2a through 2d if the organization he easement on the last day of the tax year	eld a qualified conservation contributi	Held at the End of the Tax Year
а	Total number of conservation easements	•	2a
b	Total acreage restricted by conservation easemen		2b
C	Number of conservation easements on a certified		. 2c
d	Number of conservation easements included in	(c) acquired after 7/25/06, and not	
	historic structure listed in the National Register .	• •	· 2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or ter	minated by the organization during the
	tax year ►		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		spection, handling of
	violations, and enforcement of the conservation ea	sements it holds?	· · · · · 🗌 Yes 🗍 No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcir	ng conservation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspectir	ng, handling of violations, and enforcing	conservation easements during the year
	▶ \$		•
8	Does each conservation easement reported on line	2(d) above satisfy the requirements o	f section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· Yes 🗌 No
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	
	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme		
Par	t III Organizations Maintaining Collection		r Other Similar Assets.
	Complete if the organization answered		
12	If the organization elected, as permitted under SF		
·u	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the		
_			
Ь	If the organization elected, as permitted under S		
	works of art, historical treasures, or other similar		ducation, or research in furtherance of
	public service, provide the following amounts relat	_	.
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
_	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art	, nistoricai treasures, or other simila	ir assets for financial gain, provide the
	following amounts required to be reported under S	· · · · · · · · · · · · · · · · · · ·	items
а	Revenue included on Form 990, Part VIII, line 1 .		▶ \$
b	Assets included in Form 990, Part X		▶ \$

Part	Organizations Maintaining	Collections of	Art, Hist	orical T	reasures, o	r Oth	er Similar As	sets (cont	inued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and ot	her recor	ds, chec	k any of the f	ollowi	ng that are a s	gnıfıcant u	se of its
а	☐ Public exhibition		d	Loan	or exchange	progra	ams		
b	☐ Scholarly research		e l	☐ Other	•				
С	☐ Preservation for future generations	3							
4	Provide a description of the organizat XIII	tion's collections a	and expla	in how t	ney further the	e orga	ınızatıon's exem	npt purpose	ın Part
5	During the year, did the organization assets to be sold to raise funds rather							_	□ No
Part									
	Complete if the organization 990, Part X, line 21.								orm
	Is the organization an agent, trustee, included on Form 990, Part X?		•			ns or o	other assets no	t 🗌 Yes	□ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able		Ar	mount	
С	Beginning balance .				•	1c			
d	Additions during the year .					1d			
е	Distributions during the year .					1e			
f	Ending balance					1f			
2a	Did the organization include an amoun	nt on Form 990, Pa	art X, line	21, for e	scrow or cust	odial	account liability	⁷ 🗌 Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII Check here	e if the ex	planatio	n has been pr	ovided	d on Part XIII		
Par									
	Complete if the organization								
		(a) Current year	(b) Prid	r year	(c) Two years b	ack (d) Three years back	(e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance .								
2	Provide the estimated percentage of t	he current year en	d balanc	e (line 1g	, column (a)) h	neld as	s [.]		
а	Board designated or quasi-endowmer	nt 🕨	%						
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and	2c should equal 1	00%						
3a	Are there endowment funds not in the	e possession of th	e organi	zation tha	at are held an	d adm	ninistered for th		
	organization by							Y	es No
	(i) unrelated organizations .							3a(ı)	
	(ii) related organizations.							3a(ii)	
b	If "Yes" on line 3a(ii), are the related o							3b	
4	Describe in Part XIII the intended uses		n's endo	wment fo	unds		·		
Par									
	Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, line 1	1a. S	ee Form 990,	Part X, lin	<u>e 10</u>
	Description of property	(a) Cost or ot (investm			or other basis ther)		ccumulated preciation	(d) Book v	alue
1a	Land .						,		
þ	Buildings								
С	Leasehold improvements .								
d	Equipment								
e	Other								
Total.	Add lines 1a through 1e (Column (d) n	nust equal Form 9:	90. Part)	C. column	(B), line 10c)	•		

Part VII	Investments—Other Securities				
	Complete if the organization answ	wered "Yes" on For	m 990, Part IV, lir	ne 11b See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	•	(b) Book value		nod of valuation -of-year market value
(1) Financial	derivatives .				
	neld equity interests .	-			
(3) Other					
(A)	***************************************				
(B)					· · · · · · · · · · · · · · · · · · ·
(C)	·				
(D)					
(E)					
(F)					
(G) (H)		·			
	h) must a sulffer 000 Part V and (R) (m 10) h		-		
Part VIII	b) must equal Form 990, Part X, col (B) line 12) ► Investments—Program Related	4		West Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the C	HARRIST HE VALUE AND MAKE STATE HAR HAVE
rait viii	Complete if the organization answer		m 990 Part IV lir	ne 11c See Form	990 Part Y line 13
	(a) Description of investment	wered tes officer	(b) Book value	1"	hod of valuation
	(a) Description of investment		(b) Book value		of-year market value
(1)					
(2)		·			
(3)					
(4)					
(5)					,
(6)					-
_(7)					
(8)					
(9)	b) must equal Form 990, Part X, col. (B) line 13.)			Server Street Committee Control of Control	onespecial December 2008 and an extraction of the contraction of the c
Part IX	Other Assets.			加斯斯 斯斯	AF CAN DE BASE
raitix	Complete if the organization answ	wered "Yes" on For	rm 990. Part IV. lir	ne 11d. See Form	990 Part X line 15
	****) Description	000, 1 0, 1 1, 1, 1, 1	10 7 7 0 . 0 0 0 7 0 1111	(b) Book value
(1)					
(2)					
(3)				<u>.</u>	
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	and (b) and a supl Form 000. Book V. a.	ol (D) line 15 \			
Part X	mn (b) muşt equal Form 990, Part X, co Other Liabilities.	or (B) line (5.) .		▶	
raitx	Complete if the organization ansi	wered "Ves" on Fo	rm 990 Part IV Ju	ne 11e or 11f Sec	Form 990 Part X
	line 25.	Wordd 100 Oil i Oi	111 000,1 are 10, 111	10 110 01 111. 000	7 1 01111 000, 1 dit X,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ncome taxes			Na Palace	
(2)					
(3)			150 pt 154 pt		
(4)					
(5)				ter en spe	
(6)					
(7)					
(8)					
(9)					
ı otal. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶		734 March 2018		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Part	XI Reconciliation of Revenue per Audited Financial State	ements With Rev	enue per Return.	
	Complete if the organization answered "Yes" on Form 99	0, Part IV, line 12	a	
1	Total revenue, gains, and other support per audited financial statemer	nts	1	419,477 31
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains (losses) on investments .	2a		
b	Donated services and use of facilities .	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	419,477 31
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
_	Add lines 4a and 4b	luna 10 l	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, I		5	419,477 31
Part				
	Complete if the organization answered "Yes" on Form 99	ou, Part IV, line 128	1 . 1	
1	Total expenses and losses per audited financial statements	•	1	245,394 27
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	10-1	i l	
a	Donated services and use of facilities .	2a		
b	Prior year adjustments	2b 2c		
c C	Other losses	2d		
d e	Other (Describe in Part XIII.)	_ 2u	2e	
3	Subtract line 2e from line 1		. 3	245 204 27
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	. i .		245,394 27
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
			4c	
	Add lines 4a and 4b	•	4c	245 394 27
c 5 Part	Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I) XIII Supplemental Information.	, line 18)	5	245,394 27
5 Part Provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I,	, line 18) .	5	
5 Part Provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	, line 18) .	5	
5 Part Provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	, line 18) .	5	
5 Part Provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	, line 18) .	5	
5 Part Provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	, line 18) .	5	

ichedule D (Form	n 990) 2018	Page 5
Part XIII	Supplemental Information (continued)	
•••		
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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

► Attach to Form 990.

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

Φ	
(SA)	•

OMB No 1545-0047

Open to Public Inspection **Employer Identification number**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, **№** Community Partnership (h) Purpose of grant Educational Program or assistance ☐ Yes 66-0817772 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of noncash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 10,600 00 6,300 00 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance 501(c)3 501(c)3 66-0646583 (b) EIN Foundation for a Better Puerto Rico Inc 1 (a) Name and address of organization (1) Abbies School PO Box 456 Culebra, PR 00775 PO Box 331 Culebra, PR 00775 (2) Fundacion de Culebra or government Part Part II ල € 2 8 Ð (12) 9 ε 6

Schedule I (Form 990) (2018)

Cat No 50055P

Schedule I (Form 990) (2018)

Schedule I (Form 990) (2018) (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance N က 4 Ŋ 9

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Name of the organization	Employer identification number		
Foundation for a Better Puerto Rico Inc	66-0817772		
Part VI, line 11b			
Form 990 is sent by e-mail to each one of the Board Directors and then the Directors review it at a requ	ılar board meeting		
	nar soura mocting		
Part VI, line 19			
The entity keeps all governing documents, conflict of interest policy, and financial statements available	e to the public during the tax year at		
the Corporate Office on regular business hours			
Part VI, line 12c			
All major transactions and or execution of contracts has to be approve by a majority of the Board of D	rectors members. In each transaction		
prior to voting, each Director has to disclose any possible conflict within the transaction			
	2000		
	•		
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