Form. **990**°

## **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury

SCANNED AUG 0 5 2019

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

2018	
Open to Public Inspection	

A	For the 2	018 cale	ndar year, or tax year beginning 01/01 , 2018, and ending	06/	30	, 20 18	
В	Check if ap		C Name of organization SeedMoney	- حضو		er identification nu	ımber
$\bar{\Box}$	Address ch		Doing business as			56-2389230	
$\exists$			Number and street (or P O box if mail is not delivered to street address)  Room/suite		E Telepho	ne number	
금	Name char				L releptio		
	Initial return		3 Powderhorn Drive  City or town, state or province, country, and ZIP or foreign postal code			207-956-0606	
님	Final return/	~					
닏	Amended r		Scarborough, ME, 04074	_	G Gross re		49,029
Ш	Application	n pending				subordinates? Tes	_
				,		s included? LYes	∐ No
<u></u>	Tax-exemp	ot status:	✓ 501(c)(3)	"No," attac	halist (s	ee instructions)	
<u>J</u>	Website:	► see	dmoney org	H(c) Group e	exemption	number ▶	
$\overline{}$		ganization	✓ Corporation Trust Association Other ► L Year of formation	2003	M State	of legal domicile	ME
Р	art l	Summ	_ <del></del>				
	1 B	Briefly de	scribe the organization's mission or most significant activities: SeedMon	cy helps d	isadvant	aged and vulner	able
8		ndividua	ls and communities to gain access to healthy foods, environmentally sustaina	ble garder	s and w	holesome forms	of
Governance		Continu	ed on Schedule O, Statement 2)				
Je.	2 0	heck th	is box ▶☐ if the organization discontinued its operations or disposed of m	nore than	25% of	its net assets.	
ó	3 N	lumber (	of voting members of the governing body (Part VI, line 1a)		3		5
	1		of independent voting members of the governing body (Part VI, line 1b)		4		4
es	1		nber of individuals employed in calendar year 2018 (Part V, line 2a)		5		0
Σį	1		nber of volunteers (estimate if necessary)		6		300
Activities &	1		elated business revenue from Part VIII, column (C), line 12	• • •	7a	-	0
•	1		ated business taxable income from Form 990-T, line 38		7b		0
		et unite	ated business taxable income from 1 offin 550 1, line 55	Prior Yea		Current Ye	
	8 0	`ontribut	tions and grants (Part VIII, line 1h)		344,526		49,029
Revenue	1		service revenue (Part VIII, line 2g)		0		
Ver	1	_	· · · · · · · · · · · · · · · · · · ·		-		0
æ	1		nt income (Part VIII, column (A), lines 3, 4, and 7d)		42		0
	1		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		789		0
	<del></del>		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		345,357		49,029
			nd similar amounts paid (Part IX, column (A), lines 1–3)		241,780		239,601
	4		paid to or for members (Part IX, column (A), line 4)		0		0
ës	1		other compensation, employee benefits (Part IX, column (A), lines 5–10)		73,896		36,980
Expenses	4		onal fundraising fees (Part IX, column (A), line 11e)		1,164		0
Š	1		draising expenses (Part IX, column (D), line 25) ►6,333				
ш			penses (Part IX, column (A), lines 11a-114d, 11f-24e)		17,163		5,664
	18 ⊤	otal exp	enses. Add lines 13–17 (must equal Flart IX, Column (A) Mine 25)		334,003		282,245
		Revenue	less expenses. Subtract line 18 from ine 12		11,354		233,216
Net Assets or Fund Balances			[6] MC( 10 E010   1	nning of Cun	rent Year	End of Yea	ar
sets	20 T	otal ass	ets (Part X, line 16)		298,145		94,430
A Page	21 T	otal liab	ulition (Port V. line 26)		244,640		30,000
		let asse	ts or fund balances. Subtract line 21 from line 26 DEN, UT	···	53,505		64,430
Pa	art II	Signat	ture Block				
			ry, I declare that I have examined this return, including accompanying schedules and statemen			ny knowledge and	belief, it is
tru	e, correct, a	and compl	Declaration of preparer (other than officer) is based on all information of which preparer has	any knowle	dge.		
			1/1/ m		5/1	0/2019	
Sig	yn 📗	Sign	ature of Officer	Date	•		
He	re 📗	Rog	ger Doiron, President				
		Туре	or print name and title				
Pa	id.	Print/Ty	pe preparer's name Preparer's signature Date		Check	T of PTIN	
	eparer				self-emp		
	eparer se Only	Firm's n	ame ►	Firm'	s EIN ▶		<del> </del>
US	e Unity		ddress ▶	Phon			
Ma	y the IRS		s this return with the preparer shown above? (see instructions)			🗌 Yes	☐ No
			ction Act Notice, see the separate instructions. Cat No 1	1282Y		Form 9	90 (2018)

Part						•
			<del></del>	any line in this Par	t III	🗆
1	Briefly describe the org					
					in access to healthy foods, v al and technical support to a	
					their communities. Our partr	
	hanks, schools, homele					
2	Did the organization un prior Form 990 or 990-		cant program serv	ices during the year	r which were not listed on t	thc · □Yes ☑No
	If "Yes," describe these		Schedule O.			163 6140
3	Did the organization			ant changes in ho	w it conducts, any progra	am
	services?					· Yes PNo
4	If "Yes," describe these	-		nte for each of its t	hree largest program servi	coe as measured by
7		I(c)(3) and 501(c)(4)	organizations are	required to report t	the amount of grants and a	
4a	(Code: ) (Ex	penses \$	22,464 including gr	ants of \$	) (Revenue \$	4,086 )
	Education and outreach	n. Through our webs	ite, emails, social ne	tworking platforms,	online videos, conferences,	
					ocial benefits of food garder	ns. Key
	achievements, our face	book page had over	60,000 fans and our	YouTube channel h	ad over 1 7 million views.	
					,	
					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
						•••••
4h	(Codo: \/Ev	nences \$ 2	47 110 including of	ante of \$	\ (Revenue \$	44 942 \
4b		penses \$ 2		rants of \$	) (Revenue \$	44,943 ) unding for their
4b	Grants and crowdfundi	ng program <sup>.</sup> In 2017,	, we helped over 300	partner projects gro	w \$217,000 worth of crowdf	unding for their
4b	Grants and crowdfunding work, up from \$195,000	ng program: In 2017, in 2016 and \$154,00	, we helped over 300 0 in 2015. By doing	partner projects gro so, we helped them o	) (Revenue \$ ow \$217,000 worth of crowdfor grow bigger, more productive tter opportunities for learning	unding for their e gardens that
4b	Grants and crowdfunding work, up from \$195,000 were better able to help	ng program: In 2017, in 2016 and \$154,00 people in need in th	, we helped over 300 0 in 2015. By doing leir communities to	) partner projects gro so, we helped them o enjoy betterfood, bet	ow \$217,000 worth of crowdfo grow bigger, more productive	unding for their e gardens that g and recreation
4b	Grants and crowdfunding work, up from \$195,000 were better able to help	ng program: In 2017, in 2016 and \$154,00 people in need in th	, we helped over 300 0 in 2015. By doing leir communities to	) partner projects gro so, we helped them o enjoy betterfood, bet	ow \$217,000 worth of crowdfo grow bigger, more productive tter opportunities for learning	unding for their e gardens that g and recreation
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4c	Grants and crowdfunding work, up from \$195,000 were better able to help and a greener, better quof food	ng program: In 2017, in 2016 and \$154,00 people in need in th uality of life. We estir	we helped over 300 0 in 2015. By doing ieir communities to mate that those gard  including gr	partner projects gro so, we helped them o enjoy betterfood, bet len projects reached	ow \$217,000 worth of crowdfo grow bigger, more productive tter opportunities for learning 90,000 people, helping them	unding for their e gardens that g and recreation
4c	Grants and crowdfunding work, up from \$195,000 were better able to help and a greener, better quof food  (Code: (Example 2) (E	ng program: In 2017, in 2016 and \$154,00 people in need in th uality of life. We estir	we helped over 300 0 in 2015. By doing ieir communities to mate that those gard  including gr	partner projects gro so, we helped them o enjoy betterfood, bet len projects reached	ow \$217,000 worth of crowdfo grow bigger, more productive tter opportunities for learning 90,000 people, helping them	unding for their e gardens that g and recreation

Form 99	30 (2018) •	A	10,	Bage 3
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	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
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		~
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		~
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
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		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
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		_
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		_
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		_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	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	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			

	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	v
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.		
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	V
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	~
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	V
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	
f	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	11f	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~
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	~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	
14a	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	~
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	~
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	~
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	-
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	~
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	~
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	4
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 1? If "Yes," complete Schedule I, Parts I and II	21	~

Part	Checklist of Required Schedules (continued)			
00	Did the assessment as we get specificate \$5,000 of greate or other appropriate for democitic individuals on	ſ	Yes	No
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		~
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		<b>&gt;</b>
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			· /
h	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		
b C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
Ū	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		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 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		V
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 disqualified persons? If "Yes," complete Schedule L, Part II	26		٧
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 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
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):		<del></del>	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		•
	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		<u> </u>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
30	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		~
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		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable 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, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38_	~	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Check if Schedule O contains a response of note to any line in this Fart v	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	reportable garning (garnoling) wirnings to prize williers!		n 990	(2018)

Form **990** (2018)

Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)		•							
Part	Statements negarding Other Ins Filings and Tax Compliance (Continued)		Yes	No						
0-	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		165	NO						
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			,						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	- <b>-</b>							
J	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2.5								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	0.5								
44	a financial account in a foreign country (such as a bank account, secunties account, or other financial account)?	4a		1						
b	If "Yes," enter the name of the foreign country:	1.5								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? ·	5c								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the									
- Ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		•						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or									
_	gifts were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).		-							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	l <u>.</u>								
_	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?	7с								
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
h	If the organization received a contribution of cars, boals, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			<b> </b>						
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>						
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ						
10	Section 501(c)(7) organizations. Enter:									
a	Initiation fees and capital contributions included on Part VIII, line 12									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]									
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders									
а		1		ļ						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	124		l						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>						
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which	ļ								
	the organization is licensed to issue qualified health plans									
С	Enter the amount of reserves on hand	1								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		•						
	If "Yes," see instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		V						
	If "Yes " complete Form 4720. Schedule O									

Part		• -			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
C4:	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u>· · · </u>	<u></u>	<u></u>
Secu	on A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 5	· - · · ·	165	110
ıa	If there are material differences in voting rights among members of the governing body, or	14			
	if the governing body delegated broad authority to an executive committee or similar	-			
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business	relationship with			
	any other officer, director, trustee, or key employee?		2		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 oth		3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		_
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		V
6	Did the organization have members or stockholders?		6		-
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a		/
	· · · · · · · · · · · · · · · · · · ·		- / a		<u> </u>
D	Are any governance decisions of the organization reserved to (or subject to approve stockholders, or persons other than the governing body?		7ь		/
8	Did the organization contemporaneously document the meetings held or written actions ur				1
Ū	the year by the following:				
а	The governing body?		8a	~	
b	Each committee with authority to act on behalf of the governing body?		Вb	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann				
<del></del>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		
Secti	on B. Policies (This Section B requests information about policies not required by the	ie internai Heven	ue Co	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	165	V
b	If "Yes," did the organization have written policies and procedures governing the activities of	of such chanters	100		<u> </u>
	affiliates, and branches to ensure their operations are consistent with the organization's exen		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef		11a	<b>'</b>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		~
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could gr		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the	policy? If "Yes,"			
	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13 14		<u> </u>
14	Did the process for determining compensation of the following persons include a review		14		<u> </u>
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation	on and decision?			
а	The organization's CEO, Exocutive Director, or top management official		15a		V
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).	i.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim	ilar arrangement			
	with a taxable entity during the year?		16a		V
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps		16h		
Sact:	organization's exempt status with respect to such arrangements?		16b		L
<u> 3ecu</u> 17	Let the states with which a copy of this Form 900 is required to be filed ME				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable	e). 990. and 990-1			
.0	(3)s only) available for public inspection. Indicate how you made these available. Check all the		,500		-01(0)
	✓ Own website ✓ Another's website ✓ Upon request ☐ Other (explain in So				
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume	ents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.	•			
20	State the name, address, and telephone number of the person who possesses the organization	on's books and re	cords	<b>&gt;</b>	
	Roger Doiron (207)956-0606				

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Page	

Form 990 (2018) '

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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 calcular 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 employees."
- 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 related organization compensated any current officer, director, or trustee.

Officer, time box in righting, time enganization in	i uny rolato			((	C)			Ι		,
(A)	(B)	İ		Pos	ition			(D)	(E)	(F)
Name and Title						re than one n is both a		Reportable	Reportable	Estimated
	Average hours per	office				tor/trustee)		compensation	compensation from	amount of
	week (list any hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Jan Maes	2 00									
Board Member	Ţ	1		~			İ	o	0	0
Laura Willett	2 00									
Board Member		]		~				0	0	0
Eric Helmuth	2.00									
Board Member		<u> </u>		~				0	0	
Kyle Neugebauer	2 00	]								
Board Member			ļ	~	<u>l</u>		<u> </u>	. 0	0	
Roger Doiron	50 00				1					
Founding Director	ļ	ļ	ļ	~	"	~		36,000	0	0
		ļ						1	<u> </u>	:
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
						C) sition							
	(A)	(B)			neck	more	e than o		(D)	(E)	.	(F)	al .
	Name and tritle	Average ' hours per week (list any	office		dad	lirect	is both or/trust	tee)	Reportable compensation from	Reportable compensation from related	1	stimate mount o other	
		hours for	Individual trustee or director	Instit	Officer	ey	Highest compensated employee	Form	the	organizations		npensa	
		related organizations	recto	Institutional trustee	Φ	employee	est c	ler	organization (W-2/1099-MISC)	(W-2/1099-MISC)	or	from the ganızatı	on ,
		below dotted line)	ı tr	ם		oyee	dimo		, ,		1	nd relate ganızatıc	
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			1										
			<u> </u>				<u> </u>						•
1b	Sub-total							<b>•</b>	36,000		)		0
, d	Total (add lines 1b and 1c)			•	•	•	•		24,000				
· d	Total (add lines 1b and 1c)							e) w	the received m	<b>.</b>	0  100 of		0
2	reportable compensation from the organ			1030	, 1131		above	., <b>•</b> •	0	010 (11411 \$100,0	00 01		
				-								Yes	s No
3	Did the organization list any former of							emp	oloyee, or high	est compensa			_
	employee on line 1a? If "Yes," complete							•			. 3		~
4	For any individual listed on line 1a, is the organization and related organizations	e sum of re	portal	ble i 150	COU	npei	nsatic f "Vo	on a	and other comp	ensation from	ine Ich		
	individual	· greater tir							· · · · ·		. 4	,	- V
5	Did any person listed on line 1a receive									ation or individ			
<del></del>	for services rendered to the organization	n? If "Yes," o	compl	ete	Sch	nedi	ıle J 1	for s	such person	<u> </u>	. 5		<u> </u>
	on B. Independent Contractors			-1									-
1	Complete this table for your five highest compensation from the organization. Reyear.	compensat port compe	ea ind nsatio	on fo	ena or th	ne c	alend	lar y	year ending wit	h or within the	organiza	oi ition's	tax
	(A) Name and business ad	dress							(B) Description of s	ervices		C) ensation	)
None								T					
								<u> </u>					
								-					
	Total number of independent contract	ors (includi	na hi	ıt n	ot !	limi	ed to	) th	nose listed ab	ove) who			;
_	received more than \$100,000 of compen	•	-					- 11	030 1/3(04 45)	,			

Part	VIII	Statement of Reve	enue			, ==#	•	
		Check if Schedule C	contains a res	onse or note to	any line in this	Part VIII	<u>.</u> <u></u>	🗆
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	· · · · · · · · · · · · · · · · · · ·	0		- · · · · · · · · · · · · · · · · ·		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	<del></del>	0		•	1	
ts, (	С	Fundraising events .	*******	0			i	
Gif	d	Related organizations		0				
ns, Sim	е	Government grants (cor		0			1	
er S	f	All other contributions, g					1	
들		and similar amounts not inc	<u> </u>	49,029			ł	
d on	g	Noncash contributions includ		0				
	h	Total. Add lines 1a-1	f	<u> </u>	49,029			
J.				Business Code			<b></b>	
eve	2a							٦.
e E	b							
Ž.	C					· · · · · · · · · · · · · · · · · · ·	<u>'</u>	
Š	đ							
듄	e	All ather programs as						. +
Program Service Reverue	f	All other program ser <b>Total.</b> Add lines 2a-2		•	0			
	<u>g</u> 3	Investment income			U			
	•	and other similar amo						-
	4	Income from investmen	•					
	5							
		rioyamoo i i i i	(i) Real	(ii) Personal		·····		······································
•	6a	Gross rents						
	b	Less. rental expenses	-					
	C	Rental income or (loss)	0	0				
	d	Net rental income or	(loss)	>				
	7a	Gross amount from sales of	(i) Securities	(II) Other				
	_	assets other than inventory			-			
	b	Less: cost or other basis						
	•	and sales expenses .		-			ŀ	
	С	Gain or (loss)	0	0				
	d	Net gain or (loss)		<b>&gt;</b>				
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18	0 ed on line 1c).	•				
Ę	b	Less: direct expenses	s <b>b</b>					
0	С	Net income or (loss) f	rom fundraising	events . ►				;
	9a	Gross income from ga						_
		See Part IV, line 19 .						
		Less: direct expenses						
		Net income or (loss) f		vities ▶			ļ	
	10a	Gross sales of in		:				
		returns and allowance						
		Less: cost of goods s						
	C	Net income or (loss) f						
	4.	Miscellaneous F	Revenue	Business Code				
	11a						ļ · · · · · · · · · · · · · · · · · · ·	
	b	•					ļ	
	C	All alla			·		-	· -
	d	All other revenue .				<u> </u>	<del> </del> -	
	e	Total. Add lines 11a-	·110	🟲	0			

	90 (2018)			<u></u>	Page 10
	Statement of Functional Expenses			, ) , ,	
Section	on 501(c)(3) and 501(c)(4) organizations must con				
Do no	Check if Schedule O contains a respon of include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	<u> </u>
8b, 9t	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
^	and domestic governments. See Part IV, line 21	229,221	229,221		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,380	10,380		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees		0.4.000	4 000	, , ,
6-	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	36,000	24,000	6,000	6,000
7	Other salaries and wages				ı
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	* ·			,
9	Other employee benefits	980	882	49	49
10	Payroll taxes		•		
11	Fees for services (non-employees):				
а	Management				
b	Legal				<del></del>
C	Accounting	5		5	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17 Investment management fees				
f 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	252	226	13	<u> </u>
14	Information technology	4,094	3,684	205	205
15	Royalties	•	٠,		
16	Occupancy				
17	Travel	240	216	12	12
18	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 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.)				
а		1,073	965	54	54
a b		1,0/3	705	54	54
C					
ď		·			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	282,245	269,574	6,338	6,333
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet		1, ,	
		Check if Schedule O contains a response or note to any line in this Pa			<u> </u>
•		,	<b>(A)</b> Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	298,145	1	94,430
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	i	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
ţ	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	·	6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	• •	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	•	11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	298,145	16	94,430
	17	Accounts payable and accrued expenses	244,640	17	,
	18	Grants payable		18.	
•	19	Deferred revenue		19	30,000
	20	Tax-exempt bond liabilities		20	•
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	• •
S	22	Loans and other payables to current and former officers, directors,			
ij		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L	1	22	
Ë	23,	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	Total liabilities. Add lines 17 through 25	244,640	26	30,000
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and			
ě		complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets	53,505	27	64,430
Bal	28	Temporarily restricted net assets	0	28	0
ğ	29	Permanently restricted net assets	0	29	0
Ĕ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
Net Assets or Fund Balances		complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
šše	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
ě	33	Total net assets or fund balances	53,505	33	64,430
	34	Total liabilities and net assets/fund balances	298,145	34	94,430

Page	1	12
raye		

						,
Part	XI Reconciliation of Net Assets		+			
	Check if Schedule O contains a response or note to any line in this Part XI					V
1	Total revenue (must equal Part VIII, column (A), line 12)	1			49	,029
2	Total expenses (must equal Part IX, column (A), line 25)	2			282	,245
3	Revenue less expenses. Subtract line 2 from line 1	3			-233	,216
1	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			53	,505
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6			•	0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			244	,141
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			64	,430
Part	XII Financial Statements and Reporting	•				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		<u>., .</u>		Ý
	_ • .	•	٠ _	Y	es	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		_	İ		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın	ın		ł	
	Schedule O.		_	_ _	_	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	· .	. 2	a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled (	or		- 1	
	reviewed on a separate basis, consolidated basis, or both:		1			
	Separate basis Consolidated basis Both consolidated and separate basis		-		-	
b	Were the organization's financial statements audited by an independent accountant?		· -	b	_	~
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a			
	separate basis, consolidated basis, or both:	,				
	Separate basis Consolidated basis Both consolidated and separate basis			- -	-	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o					
	of the audit, review, or compilation of its financial statements and selection of an independent account			c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	ın			
	Schedule O.		.		-	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth		_		.,
	the Single Audit Act and OMB Circular A-133?			а	$\dashv$	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo such a country or such a such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such as such			ь		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	นนแร.		Form 9	200	(0040)
				-om s	,JU (	(2018)

# 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.

OMB No. 1545-0047

Open to Public Inspection

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

SeedMoney 56-2389230 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . . . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (vi) Amount of (v) Amount of monetary (described on lines 1-10 isted in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

Part							
	(Complete only if you checked th						alify under
<u> </u>	Part III. If the organization fails to	quality unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on\A. Public Support		# N 004 5	4.3.0040	(1) 0047	4-2-0040	/0.T-1-1
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not		· .				•
	include any "unusual grants.")		,	,	1		
_	<b>\</b>	· · · · · · · · · · · · · · · · · · ·					
2	Tax revenues levied for the organization's benefit and either paid	i			1		
	to or expended on its behalf	•		ŀ	}		
_	The value of services or facilities						
3	furnished by a governmental unit to the					İ	
	organization without charge						
4	Total. Add lines 1 through 3						
	<b>1</b> .					7	
5	The portion of total contributions by each person (other than a					;	i
	each person (other than a governmental unit or publicly						
	supported organization) included on				/		
	line 1 that exceeds 2% of the amount				/		
	shown on line 11, column (f)				<b>/</b>		
6	Public support. Subtract line 5 from line 4						
Secti	on B. Total Support	\					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,		/		-	Ι.	
	rents, royalties, and income from						
_	similar sources						
9	Net income from unrelated business		X				
	activities, whether or not the business is regularly carried on		/ /				
10	Other income. Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI.)		`				
11	Total support. Add lines 7 through 10	/					
12	Gross receipts from related activities, etc	see instruction	ons)			12	
13	First five years. If the Form 990 is for the			d, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he	re					▶ □
Secti	on C. Computation of Public Şüppoı						
14	Public support percentage for 2018 (line 6			1, column (f))	· <b>/</b> ; · ·	14	%_
15	Public support percentage from 2017 Sch					15	<u>%</u>
16a	331/3% support test—2018. If the organi				na line 14 is 3	31/3% or more,	cneck this
	box and stop here. The organization qua 331/3% support test 2017. If the organi			_			ore shock
b	this box and <b>stop here</b> . The organization					35 73 70 01 11	iore, crieck
47-	<i>,</i>	-		•		60 or 16h an	d line 1/ us
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me						
	Part VI now the organization meets the "						
	organization						▶ □
b	10%-facts-and-circumstances test—20	017 If the ora	anızatıon did r	not check a bo	ox on line 13	16a, 16b, or 1	ے اa. and line
U	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization r						
	supported organization						<b>&gt;</b> 🗆
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	a, or 1/b, chec	k this box and	see
	instructions						🕨 🔲

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			,			
Calen	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	' (f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	151,413	310,566	352,638	345,357	49,010	1,208,984
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,933	620	2,020			4,573
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 furnished by a governmental unit to the organization without charge						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	153,346	311,186	354,658	345,357	49,010	1,213,557
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		·	•	•	•	
с 8	Add lines 7a and 7b  Public support. (Subtract line 7c from				•		4 242 557
Secti	on B. Total Support						1,213,557
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	153,346	311,186	354,658	345,357	49,010	1,213,557
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	133,340	69	62	42	19	_ 192
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					۹,	
C	Add lines 10a and 10b	0	69	62	42	19	192
11	Net income from unrelated business activities not included in line 10b, whether 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.)		,				•
13	Total support. (Add lines 9, 10c, 11, and 12.)	153,346	311,255	354,720	345,399	49,029	1,213,749
14	First five years. If the Form 990 is for the organization, check this box and stop he	ne organization	's first, secon			ear as a sectio	
Secti	on C. Computation of Public Suppor	t Percentage	9				
15	Public support percentage for 2018 (line 8	B, column (f), d	ivided by line	13, column (f))			99.98 %
16	Public support percentage from 2017 Sch	nedule A, Part I	II, line 15 .	<u> </u>	<u></u>	16	99.98 %
	on D. Computation of Investment In					· · · · · ·	
17	Investment income percentage for 2018 (			-		17	0.02 %
18	Investment income percentage from 2017						0 02 %
19a	331/3% support tests—2018. If the organ						
	17 is not more than 33½%, check this box						
. b	331/3% support tests—2017. If the organize line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di		-				

#### Part IV **Supporting Organizations**

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

(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.)

Secu	Section A. All Supporting Organizations													
1	Δra	all	٥f	the	organization's	supported	organizations	listed	hy n	ame	in the	organi	zation's	ac

Yes No 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. 1 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). 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. За 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. 3b 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. 3с 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. 4a 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. 4b 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 4c 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). 5a 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? 5b Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 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. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(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). 7 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). 8 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. 9a 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. 9b 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. 9c 10a 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

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

10a

10b

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	, , , , , , , , , , , , , , , , , , , ,			
Secti	on D-Distributions		ا و عم	Current Year			
1	Amounts paid to supported organizations to accomplish			····			
2	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 purp	oses of supported orga	nizations				
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 whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive				
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount	. \ '''					
	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.						
3	Excess distributions carryover, if any, to 2018						
a	From 2013						
b	From 2014		· · · · · · · · · · · · · · · · · · ·				
С	From 2015						
d	From 2016						
е	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)						
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from						
	Section D, line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, if						
	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part Vi.</b> See instructions.						
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
7	Excess distributions carryover to 2019. Add lines 3 <sub>j</sub> and 4c.						
8	Breakdown of line 7:						
а	Excess from 2014						
b	Excess from 2015						
	Excess from 2016						
	Excess from 2017						
	Excess from 2018						

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 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.

20**18** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Name of the organization **Employer Identification number** 56-2389230 SeedMoney Form 990, Part VI, Section B, Line 11b - The draft 990 form was presented to members of the governing body electronically for review Form 990, Part VI, Section C, Line 19 - We make our annual report (which includes our financial report) available to the public via our Form 990, Part XI, Line 9 - We had \$244,141 in deferred revenue from 2017 that needs to be taken into account. Form 990, Part XII, Line 1 - As of 2018, our board decided to change both our fiscal year end (12/31 --> 6/30) and our accounting method (cash --> accrual)