

C&F  
996

Form 990-PF

Department of the Treasury  
Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2019

## Return of Private Foundation

OMB No 1545-0052

► Do not enter social security numbers on this form as it may be made public.  
► Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation

## THE PAROS FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

2217 5TH STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

BERKELEY, CA 94710

G Check all that apply:  Initial return  Initial return of a former public charity  
 Final return  Amended return  
 Address change  Name change

H Check type of organization:  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

I Fair market value of all assets at end of year **256,606.** (Part I, column (d) must be on cash basis.)

(from Part II, col. (c), line 16)  Other (specify) \_\_\_\_\_J Accounting method:  Cash  Accrual

► \$ 256,606. (Part I, column (d) must be on cash basis.)

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	1,143,031.		N/A	
Revenue	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	118.	118.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	56.	0.		STATEMENT 2
	12 Total. Add lines 1 through 11	1,143,205.	118.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	150,000.	0.		150,000.
	14 Other employee salaries and wages	85,000.	0.		85,000.
	15 Pension plans, employee benefits	52,676.	0.		52,676.
	16a Legal fees				
	b Accounting fees	2,090.	220.		0.
	c Other professional fees				
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	38,798.	0.		38,798.
	22 Printing and publications				
	23 Other expenses	74,793.	0.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	418,952.	220.		326,474.
	25 Contributions, gifts, grants paid	739,804.			739,804.
	26 Total expenses and disbursements. Add lines 24 and 25	1,158,756.	220.		1,066,278.
	27 Subtract line 26 from line 12.	-15,551.			
	a Excess of revenue over expenses and disbursements				
	b Net investment income (if negative, enter -0-)		0.		
	c Adjusted net income (if negative, enter -0-)			N/A	

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

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2018.04030 THE PAROS FOUNDATION

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Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing		226,761.	228,836.	228,836.
	2 Savings and temporary cash investments				
	3 Accounts receivable ► 7,445.		7,973.	7,445.	7,445.
	Less, allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less: allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable ►				
	Less: allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges		27,712.	14,261.	14,261.
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds				
	11 Investments - land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other				
	14 Land, buildings, and equipment: basis ► 36,451.		7,621.	6,064.	6,064.
	Less accumulated depreciation STMT 6 ► 30,387.				
	15 Other assets (describe ► )				
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		270,067.	256,606.	256,606.
	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ► ACCRUED EXPENSES )		1,900.	3,990.	
	23 Total liabilities (add lines 17 through 22)		1,900.	3,990.	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds		0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds		268,167.	252,616.	
	30 Total net assets or fund balances		268,167.	252,616.	
	31 Total liabilities and net assets/fund balances		270,067.	256,606.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1 268,167.
2 Enter amount from Part I, line 27a	2 -15,551.
3 Other increases not included in line 2 (itemize) ►	3 0.
4 Add lines 1, 2, and 3	4 252,616.
5 Decreases not included in line 2 (itemize) ►	5 0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6 252,616.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b	NONE				
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g))		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8			3		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes  No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	806,394.	69,362.	11.625876
2016	1,035,881.	107,781.	9.610980
2015	845,554.	137,224.	6.161852
2014	444,054.	68,485.	6.483960
2013	377,225.	94,822.	3.978243

2 Total of line 1, column (d)

2 37.860911

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years

3 7.572182

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

4 100,495.

5 Multiply line 4 by line 3

5 760,966.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6 0.

7 Add lines 5 and 6

7 760,966.

8 Enter qualifying distributions from Part XII, line 4

8 1,066,278.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**1a Exempt operating foundations described in section 4940(d)(2), check here ►  and enter "N/A" on line 1.

Date of ruling or determination letter. \_\_\_\_\_ (attach copy of letter if necessary-see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ►  and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments:

a 2018 estimated tax payments and 2017 overpayment credited to 2018

b Exempt foreign organizations - tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

1	0.
2	0.
3	0.
4	0.
5	0.
6a	0.
6b	0.
6c	0.
6d	0.
7	0.
8	0.
9	0.
10	
11	

Refunded ►

11 Enter the amount of line 10 to be: Credited to 2019 estimated tax ►

►

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**Part VII-A** Statements Regarding Activities (continued)

	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	<input type="checkbox"/> 11	<input checked="" type="checkbox"/> X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> X
14 The books are in care of ► <b>MARY AHRENS</b> Located at ► <b>C/O THE RODA GROUP, 2217 5TH ST., BERKELEY, CA</b>	Telephone no. ► (510) 649-1900	ZIP+4 ► 94710
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax exempt interest received or accrued during the year	► 15	N/A
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> X

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required

	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> X Yes	<input type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		
Organizations relying on a current notice regarding disaster assistance, check here	►	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?		
1b		<input checked="" type="checkbox"/> X
1c		<input checked="" type="checkbox"/> X
2 Taxes on failure to distribute income (section 1042) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
If "Yes," list the years ► _____, _____, _____, _____, _____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 1042(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 1042(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		
c If the provisions of section 1042(a)(2) are being applied to any of the years listed in 2a, list the years here.		
2b		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.)		
3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?		
4b		<input checked="" type="checkbox"/> X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  
 Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  
 Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  
 Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions  
 Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  
 Yes  No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

Organizations relying on a current notice regarding disaster assistance, check here ► 

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? SEE STATEMENT 8

 Yes  No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

 Yes  No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.

 Yes  No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

N/A

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes  No

8 Is the foundation 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?

 Yes  No**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ROGER A. STRAUCH 2217 5TH ST. BERKELEY, CA 94710	PRESIDENT 1.00	0.	0.	0.
PARSEH ABAJIAN 2217 5TH ST. BERKELEY, CA 94710	EXECUTIVE DIRECTOR 40.00	150,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ► 0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

---

**Total number of others receiving over \$50,000 for professional services**

▶

0

## Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

## Expenses

1 TO SUPPORT NOR LUYCE AND ITS CHARITABLE ACTIVITIES	8,502.
2 TO SUPPORT THE MANANA YOUTH EDUCATIONAL CULTURAL CENTER AND ITS CHARITABLE ACTIVITIES	27,000.
3 TO SUPPORT THE PAROS PROJECT AND ITS CHARITABLE ACTIVITIES	675,789.
4 TO SUPPORT GHOGHANJ AND ITS CHARITABLE ACTIVITIES	24,013.

## Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

**Amount**

Describe the two largest program-related investments made by the foundation during the last year. Lines 1 and 2.	
1	N/A
2	
3	All other program-related investments. See instructions.
Total. Add lines 1 through 3	0.

**Total.** Add lines 1 through 3

For

{

**Part X Minimum Investment Return** (All domestic foundations must complete this part Foreign foundations, see instructions)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	95,961.
c Fair market value of all other assets	1c	6,064.
d Total (add lines 1a, b, and c)	1d	102,025.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	102,025.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,530.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	100,495.
6 Minimum investment return. Enter 5% of line 5	6	5,025.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ►  and do not complete this part)

1 Minimum investment return from Part X, line 6	1	5,025.
2a Tax on investment income for 2018 from Part VI, line 5	2a	
b Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	5,025.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	5,025.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,025.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,066,278.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,066,278.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,066,278.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** **Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				5,025.
2 Undistributed income, if any, as of the end of 2018			0.	
a Enter amount for 2017 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013	372,484.			
b From 2014	440,630.			
c From 2015	838,693.			
d From 2016	1,030,492.			
e From 2017	802,926.			
f Total of lines 3a through e	3,485,225.			
4 Qualifying distributions for 2018 from Part XII, line 4: ► \$ 1,066,278.			0.	
a Applied to 2017, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2018 distributable amount				5,025.
e Remaining amount distributed out of corpus	1,061,253.			0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:	4,546,478.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5			0.	
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	372,484.			
10 Analysis of line 9.	4,173,994.			
a Excess from 2014	440,630.			
b Excess from 2015	838,693.			
c Excess from 2016	1,030,492.			
d Excess from 2017	802,926.			
e Excess from 2018	1,061,253.			



## Part XV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
GHOGHANJ MOSKOVYAN 38 APT 2 YEREVAN, ARMENIA	NONE	FOREIGN CHARITABLE ORG	CHARITABLE CONTRIBUTION	24,013.
MANANA BAGHRAMYAN AVE. 2, APT. 25 YEREVAN, ARMENIA	NONE	FOREIGN CHARITABLE ORG	CHARITABLE CONTRIBUTION	27,000.
NOR LUYCE 238 GHORGHANYAN STREET GYUMRI, SHIRAK, ARMENIA 3104	NONE	FOREIGN CHARITABLE ORG	CHARITABLE CONTRIBUTION	8,503.
THE MET 1000 FIFTH AVE NEW YORK, NY 10028	NONE	501(C)	GENERAL SUPPORT	4,500.
THE PAROS 100 PROJECT FIRST BLIND ALLEY, BUILDING 24/2, APT 23 YEREVAN, ARMENIA	NONE	FOREIGN CHARITABLE ORG	CHARITABLE CONTRIBUTION	675,788.
<b>Total</b>				► 3a 739,804.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				► 3b 0.

**Part XVI-A**

## Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514	(e) Related or exempt function income
		(a) Business code	(b) Amount	(c) Exclu- sion code	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities				14	118.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income				14	56.
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			0.	174.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	174.
(See worksheet in line 13 instructions to verify calculations.)					

**Part XVI-B**

## **Relationship of Activities to the Accomplishment of Exempt Purposes**



**Schedule B**

(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Name of the organization

Employer identification number

**THE PAROS FOUNDATION****20-5094630**

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. See instructions for determining a contributor's total contributions

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEAN-MARIE L ATAMIAN 1326 MADISON AVE #71 NEW YORK, NY 10128	\$ 43,540.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	STRAUCH KULHANJIAN FAMILY 2217 5TH ST. BERKELEY, CA 94710	\$ 62,560.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	THE MOSSE FOUNDATION 2217 5TH ST. BERKELEY, CA 94710	\$ 324,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4	UNITED ARMENIAN CHARITIES 41 ELIZABETH ST NEW YORK, NY 10013	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5	AJEMIAN FOUNDATION 101 W. BIG BEAVER RD. TROY, MI 48084	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
6	WILLIAM & LAURA CONROW PO BOX 1363 ROSS, CA 94957	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<u>KNIGHTS OF VARTAN</u>  <u>2361 BARBADOS DR</u>  <u>SAN RAMON, CA 94582</u>	\$ <u>15,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
8	<u>RAFFI KASSARJIAN</u>  <u>24 COTTONWOOD DR</u>  <u>SAN RAFAEL, CA 94901</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
9	<u>VAASKAN CARYAN</u>  <u>3550 PARAISO WAY</u>  <u>LA CRESCENTA, CA 91214</u>	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
10	<u>ADRIENNE V TASHIJIAN</u>  <u>15 W. CHARDON RD</u>  <u>WINCHESTER, MA 01890</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
11	<u>ARMAN BERNARDI</u>  <u>5305 HARTER LANE</u>  <u>LA CANADA, CA 91011</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
12	<u>CULTURAL SOCIETY OF ARMENIANS</u>  <u>22001 NORTHWESTERN HWY</u>  <u>SOUTHFIELD, MI 48237</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	DIRON JEBEJIAN 25 HOBART STREET BRONXVILLE, NY 10708	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
14	LUCY ARTINIAN 1400 FAYMONT AVE. MANHATTAN BEACH, CA 90266	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
15	MICHAEL & PATRICIA STARZAR 91 FALCON HILLS DRIVE HIGHLANDS RANCH, CO 80126	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
16	ORGANIZATION OF HUMANITARIAN SERVICES FOR ARMENIA P.O. BOX 660849 ARCADIA, CA 91066	\$ 30,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
17	GEORGE APELIAN DDS, INC 30300 AGOURA RD. STE. 230 AGOURA HILLS, CA 91301	\$ 9,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
18	ROBERT CHARLES HOERSCH 1400 FAYMONT AVE. MANHATTAN BEACH, CA 90266	\$ 10,028.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	CHERCHIAN FAMILY FOUNDATION 3100 NAGAWICKA RD HARTLAND, WI 53026	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	KELLY BADISHKANIAN 350 ALBANY ST. PH1 NEW YORK, NY 10280	\$ 16,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
21	JOHN MIRAK FOUNDATION 438 MASSACHUSETTS AVE STE. 127 ARLINGTON, MA 02474	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
22	DONNA WONG 2209 CURTIS AVE. #5 REDONDO BEACH, CA 90278	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
23	GEORGE & FLORA DUNAIANS 3375 E. LOMBARDY RD PASADENA, CA 91107	\$ 8,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
24	GERALD PAPAZIAN 701 VIA PALOMINO PALOS VERDES ESTATES, CA 90274	\$ 5,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	KENNETH & CYNTHIA NORIAN 260 S. PECK DRIVE BEVERLY HILLS, CA 90212	\$ 10,243.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
26	HOURY & PETER ABAJIAN 2705 ELLISON DRIVE BEVERLY HILLS, CA 90210	\$ 6,728.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
27	HOWARD & CATHERINE ESSEGIAN 116 DOYLE ST. SANTA CRUZ, CA 95062	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
28	CHRISTINE AVAKOFF 1315 SEACREST DR. CORONA DEL MAR, CA 92625	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
29	FACEBOOK 1601 WILLOW RD MENLO PARK, CA 94025	\$ 6,106.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	HASMIG SEROPIAN 299 WEST OAKWOOD BLVD REDWOOD CITY, CA 94061	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	JEANETTE BORAS 30772 STEEPLECHASE DR. SAN JUAN CAPISTRANO, CA 92675	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
32	MICHELLE CHACKERIAN 5824 CLOVER DRIVE OAKLAND, CA 94618	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
33	LINDA HAIG 332 S. REEVES DR. BEVERLY HILLS, CA 90212	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
34	LESTER HISCOE 200 E. 74TH APT. 18C NEW YORK, NY 10021	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
35	PAUL NADJARIAN 2757 N. QUEBEC ST. ARLINGTON, VA 22207	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
36	REBECCA LAINOVIC 125 EAST 72ND ST. NEW YORK, NY 10021	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	<u>SARINE CHITILIAN SAHATJIAN</u> <u>15506 DEL GADO DR.</u> <u>SHERMAN OAKS, CA 91403</u>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	<u>SONA GALLATIN</u> <u>451 ARBORWOOD ST.</u> <u>FILEMORE, CA 90014</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
39	<u>CONSTANTINOPLE ARMENIAN RELIEF SOCIETY, INC.</u> <u>P.O. BOX 769 TIME SQUARE STATION</u> <u>NEW YORK, NY 10108</u>	\$ <u>5,900.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
40	<u>VAHE DOMBALAJIAN</u> <u>1520 BUCKINGHAM GLEN CIRCLE</u> <u>GLENVIEW, IL 60026</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
41	<u>NATALIE BORAS</u> <u>30772 STEEPLECHASE DR.</u> <u>SAN JUAN CAPISTRANO, CA 92675</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
42	<u>TANIA GUMUSGERDEN</u> <u>1358 FALCON GLEN</u> <u>ESCONDIDO, CA 92029</u>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PAROS FOUNDATION

20-5094630

**Part II Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____

823453 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Name of organization

**Employer identification number**

## THE PAROS FOUNDATION

20-5094630

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ► \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

THE PAROS FOUNDATION

20-5094630

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
DIVIDEND INCOME	118.	0.	118.	118.	
TO PART I, LINE 4	118.	0.	118.	118.	

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
OTHER INCOME	56.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	56.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	2,090.	220.		0.
TO FORM 990-PF, PG 1, LN 16B	2,090.	220.		0.

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	14,768.	0.		0.
TAXES OTHER	181.	0.		0.
TO FORM 990-PF, PG 1, LN 18	14,949.	0.		0.

FORM 990-PF	OTHER EXPENSES	STATEMENT	5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
POSTAGE	1,130.	0.		0.
SUPPLIES	8,405.	0.		0.
INTERNET	2,614.	0.		0.
TELEPHONE	2,206.	0.		0.
BANK FEES	6,521.	0.		0.
SERVICE PROJECT EXPENSES	27,118.	0.		0.
FUNDRAISING FEES & EXPENSES	24,764.	0.		0.
INSURANCE EXPENSE	700.	0.		0.
AMORTIZATION	1,335.	0.		0.
TO FORM 990-PF, PG 1, LN 23	74,793.	0.		0.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER	1,313.	1,313.	0.
DESK	300.	300.	0.
ORGANIZATION COSTS	5,544.	4,594.	950.
ORGANIZATION COSTS	279.	234.	45.
COMPUTER	1,544.	1,544.	0.
ORGANIZATION COSTS	520.	405.	115.
ORGANIZATION COSTS	3,963.	3,036.	927.
ORGANIZATION COSTS	2,642.	2,009.	633.
ORGANIZATION COSTS	648.	487.	161.
ORGANIZATION COSTS	2,951.	2,200.	751.
ORGANIZATION COSTS	2,924.	2,177.	747.
ORGANIZATION COSTS	542.	399.	143.
LAPTOP	773.	772.	1.
MACBOOK	2,200.	2,200.	0.
APPLE COMPUTER	1,470.	1,470.	0.
AXIS CAMERA	1,047.	1,047.	0.
MACBOOK	3,291.	3,291.	0.
IPAD	583.	583.	0.
PROJECTOR	706.	706.	0.
COMPUTER	1,702.	1,620.	82.
TOTAL TO FM 990-PF, PART II, LN 14	34,942.	30,387.	4,555.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS  
PART VII-A, LINE 10

STATEMENT 7

## NAME OF CONTRIBUTOR

## ADDRESS

THE MOSSE FOUNDATION

2217 5TH ST.  
BERKELEY, CA 94710

ROGER STRAUCH &amp; JULIE KULHANJIAN

2217 5TH ST.  
BERKELEY, CA 94710ORGANIZATION OF HUMANITARIAN  
SERVICES FOR ARMENIAP.O. BOX 6604849  
ARCADIA, CA 91066

UNITED ARMENIAN CHARITIES

41 ELIZABETH ST.  
NEW YORK, NY 10013

JEAN-MARIE ATAMIAN

1326 MADISON AVE. #71  
NEW YORK, NY 10128

ORO GRANDE JEWELRY

608 S. HILL STREET, ROOM 200  
LOS ANGELES, CA 90014

THE PAROS FOUNDATION

20-5094630

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT  
PART VII-B, LINE 5C

STATEMENT 8

GRANTEE'S NAME

MANANA

GRANTEE'S ADDRESS

BAGHRAMYAN AVE 2 APT 25  
YEREVAN, ARMENIA

GRANT AMOUNT	DATE OF GRANT	AMOUNT EXPENDED
27,000.	06/30/18	

PURPOSE OF GRANT

TO SUPPORT CHARITABLE PURPOSE

THE PAROS FOUNDATION

20-5094630

GRANTEE'S NAME

GHOGHANJ

GRANTEE'S ADDRESS

MOSKOVYAN 38 APT 2  
YEREVAN, ARMENIA

GRANT AMOUNT	DATE OF GRANT	AMOUNT EXPENDED
24,013.	06/30/18	

PURPOSE OF GRANT

TO SUPPORT CHARITABLE PURPOSE

12551029 783820 2217.07

29  
2018.04030 THE PAROS FOUNDATION

STATEMENT(S) 8  
2217\_071

THE PAROS FOUNDATION

20-5094630

GRANTEE'S NAME

THE PAROS 100 PROJECT

GRANTEE'S ADDRESS

FIRST BLIND ALLEY, BLDG 24/2 APT 23  
YEREVAN, ARMENIA

GRANT AMOUNT	DATE OF GRANT	AMOUNT EXPENDED
675,788.	06/30/18	

PURPOSE OF GRANT

TO SUPPORT CHARITABLE PURPOSE

12551029 783820 2217.07

30  
2018.04030 THE PAROS FOUNDATION

STATEMENT(S) 8  
2217\_071

## GRANTEE'S NAME

NOR LUYCE

## GRANTEE'S ADDRESS

238 GHORGHANYAN STREET  
GYUMRI, SHIRAK, ARMENIA

GRANT AMOUNT	DATE OF GRANT	AMOUNT EXPENDED
8,503.	06/30/18	

## PURPOSE OF GRANT

TO SUPPORT CHARITABLE PURPOSE

THE PAROS FOUNDATION

20-5094630

FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 9

NAME OF MANAGER

ROGER A. STRAUCH  
PARSEH ABAJIAN

12551029 783820 2217.07

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2018.04030 THE PAROS FOUNDATION

STATEMENT(S) 9  
2217\_071