Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052 2018

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

		muar year 2016 or tax year beginning	<u> </u>	2010, and			, 20
N	ame of fo	pundation			A Employ	er identification numb	er
Ţ	Colı	nt-American Foundatıon			23-7	056392	
		nd street (or P O box number if mail is not delivered to street address)		Room/suite	B Telepho	ne number (see instruc	tions)
	5824	Steeplechase Drive			1616)707-4240	
		n, state or province, country, and ZIP or foreign postal code					
	-	* * * * * * * * * * * * * * * * * * * *			Cirexemp	tion application is pend	Jing, check here ►
_		TX 75093		.b.lb.a4			
C	i Ched		n of a former pu	iblic charit	y D 1. Foreig	ın organizations, check	here ► [
		☐ Final return ☐ Amended			2. Foreig	ın organizations meetin	g the 85% test,
_		Address change Name cha				here and attach comp	
H		ck type of organization: 🛛 Section 501(c)(3) exempt p				foundation status was 507(b)(1)(A), check here	
	Sect	ion 4947(a)(1) nonexempt charitable trust Other ta				501 (5)(1)(1 y; 51150H 11616	٠ ا
1	Faır	market value of all assets at J Accounting method	d. 🗌 Cash 🗵	Accrual	E If the for	indation is in a 60-mon	th termination
	end	of year (from Part II, col. (c), Other (specify)	•			ction 507(b)(1)(B), chec	
	line 1	(Part I, column (d) must be 75, 398. (Part I, column (d) must be	e on cash basis)				
	Part I		Τ''			Ţ	(d) Disbursements
_		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue an expenses per	. [(D) 146	et investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books		income	ıncome	purposes (cash basis only)
. –	14		39,73			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 12 - 45 - 45 - 12 - 12 - 12 - 12 - 12 - 12 - 12 - 1
ĺ	2	Contributions, gifts, grants, etc., received (attach schedule)	39,73	3 - 2 - 460 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			(1907) 100 - 480 (1907) 140 (1907) 1947 - 1957 (1907) 140 (1907)
4		Check ► ☐ if the foundation is not required to attach Sch. B	3823428 <u>- 1227 125 . 11</u>	2 33、5 · 140 ·		Partie Line March Co	32 32, 32 V 34
<u>-``</u>	3	Interest on savings and temporary cash investments		7.	17.		36 76 36 3 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7	4	Dividends and interest from securities	-	_			37,77,77,77
9	5a						
=	b	Net rental income or (loss)			A Charles		BEIVED
_ ;	ឋ 6a	Net gain or (loss) from sale of assets not on line 10		4	arak da d		San
	[h	Gross sales price for all assets on linc 6a 13, 393.	An up an annual til star State of State of	Property (Philippen)			CALA CONTO SE
Ì	7	Capital gain net income (from Part IV, line 2)	\$ 85.25 K		0.		U. I. I. COID
Ĺ	8	Net short-term capital gain					學、學、學、學、學
, 	9	Income modifications				l OG	DENGIA
7	10a	1 .	100		e de la		THE STATE OF THE S
3	Ь			300 3.30	4-/4 V	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
Ŋ	c	Gross profit or (loss) (attach schedule)	15 mag D.C.) 18500 HOLE 15	Ecologia.		WILL COMMEN AND I MALL OFFI	10.00
	. 11	Other income (attach schedule)		244 £ 3-31930 1	7 C. FINESCE WINECKC		N. Bastania
	12	Total. Add lines 1 through 11	39,75	2	17.		37 929 15 115 30
_	13	Compensation of officers, directors, trustees, etc.	35,73				2014 F. J. C. (1977) - 1974 -
000000	2 14	Other employee salaries and wages				<u> </u>	
Š	15	Pension plans, employee benefits					
Š	16a	Legal fees (attach schedule)					
Ų	11 .	T 10h 0h-	1 63	_			1 622
		-	1,63	3.			1,633.
Onerating and Administrative	, c	Other professional fees (attach schedule)	 				
Ì	17	Interest					
	18	Taxes (attach schedule) (see instructions)					CARREL AND STREET, LAND CO.
Ē	19	Depreciation (attach schedule) and depletion	<u></u>				
Ž	20	Occupancy					
7	21	Travel, conferences, and meetings	1,50	0.			
5	22	Printing and publications					
5	ກ 23	Other expenses (attach schedule) See .Stmt	19	9.	,		
	24	Total operating and administrative expenses.					
5	?	Àdd linés 13 through 23	3,33	2.			1,633.
ž	25	Contributions, gifts, grants paid		1126			
Ç	26	Total expenses and disbursements. Add lines 24 and 25	3,33	2.			1,633.
_	27	Subtract line 26 from line 12:	, , , , , , , , , , , , , , , , , , , ,		表演员		TO A CHARLES
	а	Excess of revenue over expenses and disbursements	36,42		所发现		
	b	Net investment income (if negative, enter -0-) .	707.12		17.	200	
	C	Adjusted net income (if negative, enter -0-)		To the second		W. P. SON. A. CONT. F. COMME. SP. CONTY. WINE	
F		work Reduction Act Notice, see instructions.	b east = 3.55 \(\text{\$\exitit{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\t	at No 11289	- 1474 F - 202 - 10 - 11 - 1	Fo	rm 990-PF (2018)

For Paperwork Reduction Act Notice, see instructions. BAA

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Form **990-PF** (2018)

Pa	art II	Balance Sheets Attached schedules and amounts in the description column		End o	of year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
,	1	Cash—non-interest-bearing	8,131.	4,284.	4,284.
	2 ·	Savings and temporary cash investments	30,847.	71,114.	71,114.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	7.1		
		Less: allowance for doubtful accounts ▶			
,	5	Grants receivable	_		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	and the	通道 动弹	
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ř	10a	Investments—U.S. and state government obligations (attach schedule)		`	
	b	Investments—corporate stock (attach schedule)			
	С	Investments – corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment. basis ▶	18 18 18 18 18 18 18 18 18 18 18 18 18 1		
		Less. accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			·
	14	Land, buildings, and equipment: basis ▶	FI 30 1		er tel
	l	Less ⁻ accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers-see the			•
		ınstructions. Also, see page 1, item I)	38,978.	75,398.	75,398.
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
tie	19	Deferred revenue		'	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u> ē	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			Edition de
	23	Total liabilities (add lines 17 through 22)			
Ś		Foundations that follow SFAS 117, check here ▶ □			4.4
S		and complete lines 24 through 26, and lines 30 and 31.			
lan	24	Unrestricted			
Ba	25	Temporarily restricted			
፱	26	Permanently restricted			427-74
ַ בַּ		Foundations that do not follow SFAS 117, check here ▶ 🗵			
<u> </u>		and complete lines 27 through 31.	20 070	75 200	
S	27	Capital stock, trust principal, or current funds:	38,978.	75,398.	2.0
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund			100 Feb.
isi Isi	29	Retained earnings, accumulated income, endowment, or other funds	20.070	75 200	24-12
긎	30	Total net assets or fund balances (see instructions)	38,978.	75,398.	TO SECURE OF SECURE
ž	31	Total liabilities and net assets/fund balances (see	20 070	7.5 200	
Do.	rt III	Anglysis of Changes in Net Assets or Fund Polances	38,978.	75,398.	26.2 4/5
		Analysis of Changes in Net Assets or Fund Balances	mp (a) line 00 /	t garag with	
1		I net assets or fund balances at beginning of year—Part II, colu of-year figure reported on prior year's return)			38,978.
9					36,420.
_					
3				4	75,398.
4		lines 1, 2, and 3			15,396.
5 6	Decr	eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II. column (b) lu	ne 30 6	75 200
	i Ulai	The assets of fully balances at end of year (line 4 millius line 3)—1	aren, column (b), lil	000.	75,398.

Part	IV Capital Gains and	Losses for Tax on Investment	Income			<u> </u>
	(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					(d) Date sold (mo , day, yr)
1a	Publicly traded sec	uritles				
<u> b</u>						
<u>C</u>	-					
<u>d</u>						 -
<u> </u>	-				#N O =	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g))
a	13,393.			13,393.		0.
<u>b</u>						
d						
<u>e</u>		* ***				
	Complete only for assets show	ring gain in column (h) and owned by th	e foundation	on 12/31/69	(I) Gains (Co	I (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but no	t less than -0-) or rom col (h))
<u> </u>						0.
b						
С						
<u>d</u>						
<u>е</u>						
2	Capital gain net income or	(net capital loss) { If gain, also If (loss), enti-			2	0.
3	If gain, also enter in Part I,	or (loss) as defined in sections 122 line 8, column (c). See instruction	ns. If (loss)	, enter -0- ın }		
Part		r Section 4940(e) for Reduced			Income	
	·	ate foundations subject to the section				
Was t	s," the foundation doesn't qu	ection 4942 tax on the distributable alify under section 4940(e). Do not	complete th	his part.		☐ Yes ⊠ No
		int in each column for each year, se	ee the instru	ictions before ma	akıng any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) f noncharitable-use as		(d) tribution ratio divided by col_(c))
	2017	1,120.		30,6	49.	0.036543
	2016	13,014.		23,1		0.562987
	2015	1,017.		23,9		0.042494
	2014	18,155.		29,4		0.617349
	2013	37,970.		35,6	24.	1.065854
2	Total of line 1, column (d)				. 2	2 225227
3	, ,	or the 5-year base period—divide t				2.325227
3		Indation has been in existence if les				0.465045
4	Enter the net value of nonch	naritable-use assets for 2018 from	Part X, line	5	. 4	45,496.
5	Multiply line 4 by line 3 .				. 5	21,158.
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	0.
7	Add lines 5 and 6		• •		. 7	21,158.
8		s from Part XII, line 4				1,633.
	If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box in Par	t VI, line 1b	, and complete t	nat part using a 1	% tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	<u>uctio</u>	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1. Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
С	here ► □ and enter 1% of Part I, line 27b						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.				
3	Add lines 1 and 2		0.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0.				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	19 / 19 / 40	0.	V 200 0004			
6	Credits/Payments:						
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a						
b	Exempt foreign organizations—tax withheld at source 6b			5)			
c d	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d	12 - 12 A	. O	الثندة الأسع			
8	Enter any penalty for underpayment of estimated tax. Check here						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0.				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		0.				
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11			<u> </u>			
	VII-A Statements Regarding Activities	75.35.8	V	N.			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		×			
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	£.00, \$		1			
C	Did the foundation file Form 1120-POL for this year?	1c		X X X X X X X X X X X X X X X X X X X			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			学,を ** 公长**			
е	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	4	1				
	on foundation managers. ► \$ 0.	30.00	· 蒙· 安				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		×			
	If "Yes," attach a detailed description of the activities.	4	18/4	.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		×			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		×			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b_	<u> </u>				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	0.0000	X			
_	If "Yes," attach the statement required by General Instruction T.		0.00				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 						
	conflict with the state law remain in the governing instrument?	6	X	iiiiiiiiii			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	×				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶		भारत्वर प्रकृतिका स्थापनी स्थापनीय				
C .	See Statement		X.A.				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1	<u> </u>	<u> </u>			
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"			\mathcal{I}			
	complete Part XIV	9	L				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	×				

_ F ai	Statements Regarding Activities (continued)			
,			Yes	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	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	<u> ^</u>
	Website address ▶ www.ecolintusa.org			
14	The books are in care of ► Luanne Samuel Telephone no. ► (646)	707-	4240)
45	Located at ▶ 5824 Steeplechase Drive Plano TX ZIP+4 ▶ 75093			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	27 2 2 Biocenio	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Par	the foreign country ► tVII-B Statements Regarding Activities for Which Form 4720 May Be Required	1. S. S. S.	79° 83	1,808.3
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	TO ALL	Yes	No
1a		273	to copy i	# 1 #57 F
-	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes 🗵 No			1.00
1	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	The state of	4
	disqualified person?		19736	An esta
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🗵 No	· 李 · · · · · · · · · · · · · · · · · ·	A STATE OF	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	\$ 14.5 \$ 14.5	200 a	
	(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)?			100
		4		1
	(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	** ***********************************	學學	
	termination of government service, if terminating within 90 days.)		東京	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in		. A. A	
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b	0.535 3884	35 88 × 400
С	Organizations relying on a current notice regarding disaster assistance, check here			
	were not corrected before the first day of the tax year beginning in 2018?	1c	127.20	×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	400	~ \$'.@% ``~ \$'.@%'	京歌歌 第二次第
а	operating foundation defined in section 4942(j)(3) or 4942(j)(5)). At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
а	6e, Part XIII) for tax year(s) beginning before 2018?	4.80		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	機會		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	2.00		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1		
	all years listed, answer "No" and attach statement—see instructions.)	2b	n cod 166	382 28. £1 4
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	, a,	机桑松 烷值法	4.7
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	H-MALL.		
	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			東學
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1	223	र्जन सम्ब
4-	foundation had excess business holdings in 2018.)	3b		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		×
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	<u> Maria Carina</u>	×

D	

Pan	VIII: Statements Regarding Activities	2 101 A	VIIICII I OIIII	7120	IVIAY DE I	regun	su (contin	iueu)			
-5a	During the year, did the foundation pay or incur	any am	ount to:						繁光	Yes	No
•	(1) Carry on propaganda, or otherwise attempt to	to influe	ence legislation	on (sec	tion 4945(e))? .	☐ Yes	X No		*	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, stu	idy, or a	other similar	purpos	es?		☐ Yes	⊠ No			
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions							⊠ No			allow A
	·										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										
b	If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current no							scribed	5b		
	Organizations relying on a current notice regardi	ng disa	ister assistan	ce, che	eck here			▶□			\$ 11.78 x
С	If the answer is "Yes" to question 5a(4), does to	the four	ndation clain	n exem	ption from	the tax					
	because it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No			
	If "Yes," attach the statement required by Regula	ations s	section 53.49	45-5(d).				4 5%		
6a	Did the foundation, during the year, receive any	funds,	directly or in	directly	, to pay pr	emiums	;		1		
	on a personal benefit contract?						☐ Yes	⊠ No	\$ 100 m	2.	7. Y.C
b	Did the foundation, during the year, pay premiur	ns, dıre	ctly or indire	ctly, on	a persona	l benefi	t contract	?.	6b		×
	If "Yes" to 6b, file Form 8870.								300		76. 1 14 10 10 10 10 10 10 10 10 10 10 10 10 10 1
7a	At any time during the tax year, was the foundation	a party	to a prohibited	tax sh	elter transa	ction?	☐ Yes	⊠ No	V	300	
b	If "Yes," did the foundation receive any proceed	s or hav	ve any net ind	come a	ttrıbutable	to the t	ransactio	ո? .	7b		
8	Is the foundation subject to the section 4960 ta									\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	remuneration or excess parachute payment(s) di										1
Part	VIII Information About Officers, Direct	tors, 1	Γrustees, F∈	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors	_									
1	List all officers, directors, trustees, and found	lation		د: محالة لم	compone	ation 5	See instri	ictions	,		
	List all officers, directors, trastees, and round	anoni	nanayers ar	ia tneii	Compens	<u> </u>	JOC IIION C	iction is	•		
<u></u> -	(a) Name and address	(b) Title	e, and average rs per week ed to position	(c) Co (lf r	mpensation not paid, iter -0-)	(d) empk	Contributions byee benefit erred compe	s to plans	(e) Expe	nse acc	
	(a) Name and address	(b) Title hou devote	e, and average rs per week	(c) Co (lf r	mpensation not paid,	(d) empk	Contribution	s to plans	(e) Expe		
Luai	(a) Name and address	(b) Title hou devote Pres	e, and average rs per week ed to position	(c) Co (lf r	mpensation not paid,	(d) empk	Contribution	s to plans	(e) Expe		
Lua:	(a) Name and address nne Samuel Steeplechase Drive Plano TX 75093	(b) Title hou devote Pres	e, and average rs per week ed to position ident	(c) Co (lf r	mpensation not paid, iter -0-)	(d) empk	Contribution	s to plans ensation	(e) Expe		ces
Luai 5824 Ela:	(a) Name and address nne Samuel Steeplechase Drive Plano TX 75093 ne McClure	(b) Title hou devote Pres: Trus	e, and average rs per week ed to position ident	(c) Co (lf r	mpensation not paid, iter -0-)	(d) empk	Contribution	s to plans ensation	(e) Expe		O.
Luai 5824 Elai 1241	(a) Name and address nne_Samuel Steeplechase Drive Plano TX 75093 ne_McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228	(b) Title hou devote Pres:	e, and average rs per week ed to position ident 1.00 tee 1.00	(c) Co (lf r	mpensation not paid, iter -0-)	(d) empk	Contribution	s to plans ensation	(e) Expe		ces
Luai 5824 Ela: 1241 Marc	(a) Name and address nne Samuel Steeplechase Drive Plano TX 75093 ne McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 cia Crabtree	(b) Title hou devote Pres: Trus	e, and average rs per week ed to position ident 1.00 tee 1.00	(c) Co (lf r	mpensation not paid, iter -0-)	(d) empk	Contribution	s to plans ensation	(e) Expe		0. 0.
Luar 5824 Ela 1241 Marc 864	(a) Name and address nne_Samuel Steeplechase Drive Plano TX 75093 ne_McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228	(b) Title hou devote Pres:	e, and average rs per week ed to position ident 1.00 tee 1.00	(c) Co (lf r	mpensation not paid, iter -0-)	(d) empk	Contribution	s to plans ensation 0.	(e) Expe		O.
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address nne Samuel Steeplechase Drive Plano TX 75093 ne McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 cia Crabtree Point Road Hancock ME 04640 Statement	(b) Title hou devote Pres. Trus	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00	(c) Co (lf r er	one paid, teer -0-) 0. 0.	(d) emplo and def	Contribution yee benefit erred compe	s to plans ensation 0.	(e) Experother a	allowan	0. 0.
Luar 5824 Ela 1241 Marc 864	(a) Name and address nne Samuel Steeplechase Drive Plano TX 75093 ne McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 cia Crabtree Point Road Hancock ME 04640	(b) Title hou devote Pres. Trus	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00	(c) Co (lf r er	one paid, teer -0-) 0. 0.	(d) emplo and def	Contribution yee benefit erred compe	s to plans ensation 0.	(e) Experother a	allowan	0. 0.
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address nne Samuel Steeplechase Drive Plano TX 75093 ne McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 cia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00	(c) Co (lf r er	one paid, teer -0-) 0. 0.	(d) emplo and def	Contribution yee benefit erred compe	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Truss Truss	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per version ident	(c) Co (lf r er	0. 0. 0. uded on li	(d) emplo and def	See instri	o. O. O. uction:	(e) Experother a	one, e	0. 0. 0. enter
Luar 5824 Ela: 1241 Marc 864 See	(a) Name and address Inne Samuel Steeplechase Drive Plano TX 75093 Ine McClure Gulf Of Mexico Dr #504 Longboat Key FL 34228 Isia Crabtree Point Road Hancock ME 04640 Statement Compensation of five highest-paid employee "NONE."	(b) Title hou devote Press Trust Trust	e, and average rs per week ed to position ident 1.00 tee 1.00 tee 1.00 er than those hours per v devoted to pi	se incl	npensation not paid, iter -0-) 0. 0. 0. uded on li	(d) emple and def	see instr (d) Contributemployee plans and compens	o. O. O. uctions tions to benefit deferred sation	(e) Experother a	one, e	0. 0. 0. enter

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	mployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
		
	•	
Total numb	per of others receiving over \$50,000 for professional services	0
Part IX-A		10
	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	of
	ons and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		.
	,	
2		
. —		
3		-
4		-
		•
		-
Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe th	ne two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		-
		-
All other or	ogram-related investments. See instructions	
3	ogram rouged information decimalitations	
		-
		-
Total. Add	lines 1 through 3	•
		Form 990-PF (2018)

• •

Part	see instructions.)	ign tound	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		•
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	46,189.
C	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	46,189.
е	Reduction claimed for blockage or other factors reported on lines 1a and	,	
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	46,189.
4	Cash deemed held for charitable activities. Enter $11/2\%$ of line 3 (for greater amount, see		
	ınstructions)	4	693.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	45,496.
6	Minimum investment return. Enter 5% of line 5	6	2,275.
Part :	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundatio	ns
1	Mınımum ınvestment return from Part X, line 6	1	2,275.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)]	
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,275.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,275.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2,275.
Part	XII Qualifying Distributions (see instructions)	<u></u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1,633.
b	Program-related investments—total from Part IX-B	1b	
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	1,633.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	-	1,055.
·	Enter 1% of Part I, line 27b. See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,633.
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.		
BAA	PEV 02/04/49 PPO	Fo	rm 990-PF (2018)

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				2,275.
2	Undistributed income, if any, as of the end of 2018.				
а	Enter amount for 2017 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2018:				
a	From 2013				
Ь	From 2014	-			
C C	From 2015	-	(()		
d e	From 2016				
f	Total of lines 3a through e	71,276.		, 19	7. W 7 7 WW
4	Qualifying distributions for 2018 from Part XII, line 4. ▶ \$ 1,633.				
а	Applied to 2017, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				1100 (0.00000.20
d	Applied to 2018 distributable amount				
е	Remaining amount distributed out of corpus	1,633.			
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	2,275.			2,275.
6	Enter the net total of each column as	2,273.			2,213.
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	70,634.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed	1			
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
е	Undistributed income for 2017. Subtract line				ĺ
	4a from line 2a Taxable amount-see			_	
_	instructions			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				1
1	to satisfy requirements imposed by section				į
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)		<u></u>		
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	35,695.			
9	Excess distributions carryover to 2019.	0.4.000	arappailituuduuduure sa sastau		
40	Subtract lines 7 and 8 from line 6a	34,939.			
10	Analysis of line 9: Excess from 2014				
	Excess from 2014	Mar (watani) i	SWWW." JAK	, A ''Y	v3853* */
C	Excess from 2016				
d	Excess from 2017		1.7 WWW	, ,,,,,	· · · · · · · · · · · · · · · · · · ·
	Excess from 2018 1,633.	w. 70.00.7		·	

_	4	^
Page	ŀ	u

						
Part	XIV Private Operating Founda	itions (see instru	ictions and Part	VII-A, question	9)	N/A
Įа	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective fo			· · · · · · · · · ·	L	
þ	Check box to indicate whether the four		operating founda		ection 4942(j)	(3) or 🗌 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	each year listed					
b	85% of line 2a				,	
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities				<u> </u>	
е	Qualifying distributions made directly				T	
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					L
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test-enter:	/				
	(1) Value of all assets			1		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed			Ì		ı
С	"Support" alternative test—enter:	<u></u>	· · · · · · · · · · · · · · · · · · ·			
·			i			
	(1) Total support other than gross investment income (interest,	`				
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)			 		 .
	(3) Largest amount of support from an exempt organization					
	· •					
Part	(4) Gross investment income XV Supplementary Information	n (Camplata th	io nort only if t	ha faundation t	and \$5 000 or m	L
Part			-	ne roundation i	iau \$5,000 or mi	ore iii assets at
	any time during the year-		15.)			
1	Information Regarding Foundation			/ of the total cont	المحديد مصعوف بمائين	h tha farmalation
а	List any managers of the foundation v					by the foundation
	before the close of any tax year (but o	my ir triey have co	minibatea more in	ian 45,000). (See s	section 507 (a)(2).)	
	None	100/		1		
a	List any managers of the foundation					rge portion of the
	ownership of a partnership or other er	ility) of which the	ioundation has a	10% or greater int	erest.	
	None					
2	Information Regarding Contribution					
	Check here ► 🗵 If the foundation					
	unsolicited requests for funds. If the fo		gifts, grants, etc.,	to individuals or c	organizations under	other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	mber or email add	iress of the perso	n to whom applica	ations should be ac	ddressed:
b	The form in which applications should	be submitted and	l information and	materials they sho	ould include	
С	Any submission deadlines.					
d	Any restrictions or limitations on aw	ards, such as by	geographical ar	eas, charitable fi	elds, kinds of inst	itutions, or other
	factors:					•

Part XV Supplementary Information (continued)								
_3	Grants and Contributions Paid During t	he Year or Approve	ed for Fu	ture Payment				
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount			
_	Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION				
а	Paid during the year							
	•							
			,					
				·				
	Total	<u> </u>	· · ·	▶ 3a				
b	Approved for future payment							
•		,						
	Total			▶ 3b				

Pa	rt XV	I-A Analysis of Income-Producing Ac	tivities				
Ente	er gros	ss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	(e)
·			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1	Prog	gram service revenue.					(See instructions.)
	а_					_	
	b _						
	C _						
	d _		ļ <u>.</u>				
	e _				 		
	T -				 		
^		Fees and contracts from government agencies			 		
2		nbership dues and assessments	<u> </u>	· 	11	17	
3		est on savings and temporary cash investments dends and interest from securities			14	17.	
4		rental income or (loss) from real estate:					
5		Debt-financed property					
		Not debt-financed property			 		
6		rental income or (loss) from personal property		<u> </u>	 		
6 7		er investment income					
8		or (loss) from sales of assets other than inventory			18	0.	
9		income or (loss) from special events			10		
10		ss profit or (loss) from sales of inventory			·		
11					 		
••	b						
	c -						
	ď				 	-	
	е –	· · · · · · · · · · · · · · · · · · ·		_	 	 -	
	_				 		
12	Subt	total. Add columns (b), (d), and (e)				17.	
		total. Add columns (b), (d), and (e) II. Add line 12. columns (b), (d), and (e)					17.
13	Tota						17.
13 (See	Tota work	II. Add line 12, columns (b), (d), and (e)	s.)	· • • • •			17.
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work rt XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tota work it XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	

		Organizati	ons							
1	ın se orgai	ection 501(c) (c nizations?	directly or indirectly e	501(c)(3) organization	ons) or in sec	tion 527, re			Yes	No
а			porting foundation to			n oi.		4 - /4\		
	• •							1a(1)		×
_		ther assets .						1a(2)	ļ	_×_
b		r transactions:								
			a noncharitable exer	•				1b(1)	_	×
			ets from a noncharita					1b(2)	, 	×
			, equipment, or other					1b(3)		×
	(4) R	eimbursement a	rrangements					1b(4)		_ ×
	(5) L	oans or loan gua	rantees					1b(5)		×
	(6) P	erformance of se	ervices or membershi	p or fundraising solid	citations			1b(6)		×
C	Shari	ng of facilities, e	quipment, mailing list	ts, other assets, or p	aid employees		<i></i>	1c		×
d (a) Line	value value	of the goods, o	of the above is "Yes ther assets, or servic on or sharing arrange (c) Name of noncha	es given by the repo	orting foundation (d) the value	n. If the found of the goods,	dation received i	ess than services	fair m	arke ved.
	-									
						·				
										
_										
	-+	·								
	-+	·······					·			
	-+-					· ·	_			
										
						<u> </u>				
		- 								
	descr	ribed in section 5	ectly or indirectly aff 501(c) (other than sec s following schedule.						es 🗵	No
		(a) Name of organ		(b) Type of orga	anization		(c) Description of rel	ationship		
							<u> </u>			
Sign Here	corre	r perapies of perjury, I ct, aird complete Declar declaration of the period of the per	declare that I have examined aration of preparer (other than stee	this return, including accompany taxpayer) is based on all information of the state	panying schedules ar ormation of which pre Presider Title	parer has any know	wledge May t	wledge and he IRS discu ne preparer s structions	iss this i	return elow?
		Print/Type preparer		Preparer's signature)	0 - 0	Date _	1 0 5	PTIN		
Paid		• • • •		beach for	(26)	17/m	Check X self-employe	f	1000	=
Prepa			Wilson III, CPA	CON TIT CON		: 170				
Use C)nly ∣	Firm's name		11son III, CPA			Firm's EIN ► 25-			
		Firm's address		D STREET STE.	618 PA 1522	l	Phone no (412	1471-6		(0010)
BAA			PITTSBURGH		PA 1522	۷_		Form 99	U-77	(2018)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Employer identification number

<u>Ecolint-American Fo</u>	oundation	23-7056392				
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 four	ndation				
☐ 527 political organization						
Form 990-PF	∑ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion				
501(c)(3) taxable private foundation						
	covered by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule ar	nd a Special Rule. See				
General Rule						
or more (in money or	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 331/3% 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.						
contributor, during the literary, or educations	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that it year, total contributions of more than \$1,000 exclusively for religious all purposes, or for the prevention of cruelty to children or animals. Constead of the contributor name and address), II, and III.	, charitable, scientific,				
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
Ecolint-American Foundation

Employer identification number 23-7056392

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

	(1.)		(4)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Christopher Geiger 47 Cross Street Topsfield MA 01083	\$5,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Paul Korngiebel 146 Brattle street Cambridge MA 02138	\$ 13,393.	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Jeffrey Martz Rue Pedro-Meylan, 10 Apt 91 1208 Geneva, SZ	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

Ecolint-American Foundation

Employer identification number

23-7056392

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) 55 shares of Anthem stock **\$** 13,393. 12/20/2018 (a) No. (c) (d) (b) FMV (or estimate) from Date received Description of noncash property given Part I (See instructions.) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** (See instructions.) Part I (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions) (c) FMV (or estimate) (a) No. (d) from Date received Description of noncash property given (See instructions.) Part I

Dago	Δ
Page	4

	Form 990, 990-EZ, or 990-PF) (2018)			Page 4		
Name of org	ganization			Employer identification number		
	-American Foundation			23-7056392		
Part III	(10) that total more than \$1,000 fo	r the year from any o ations completing Part	one contributor. It III, enter the tota	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and I of exclusively religious, charitable, etc., ee instructions.) > \$		
	Use duplicate copies of Part III if ad	ditional space is need	led			
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held		
		(e) Transfe	er of gift			
-	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee		
(a) \$1:						
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held		
	(e) Transfer of gift					
L	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held		
] -		•••••				
			·			
	(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee		
-	·					
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
-						
F		(e) Transfe	er of gift			
	Transferee's name, address, a		-	ship of transferor to transferee		
-	·		***************************************			

Ecolint-American Foundation

Form 990-PF: Return of Private Foundation

Continuation Statement Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

0 0 0 · 0 ö other allowances Expense account, 0 0 0. . 。 employee benefit plans and deferred Contributions to compensation . 0. 0 0 . 0 Compensation devoted to position Title, and average hours per week Trustee 1.00 Trustee 1.00 Trustee Trustee 1.00 1.00 Name and address 23, Avenue de Beau-Sejour Corona Del Mar, CA 92625 San Francisco, CA 94102 Theodore F. Killheffer Wilmington, DE 19806 304 Fernleaf Avenue Geneva, Switzerland 2204 Gilpin Avenue 471 Hickory Street Benjamin Zotto Mary Roosevelt Jeremy Lack

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Bank fees	174.			
Filing fees	25.			
Total	199			

Form 990-PF: Return of Private Foundation

Reporting state

Continuation Statement

Reporting state				
TX				
NY				

Legal and Professional Fees

2018

Name	Employer Identification No
Ecolint-American Foundation	23-7056392

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
					-
	,				
al to Form 990	-PF, Part I, Line 16a				

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Joseph DC Wilson III C?A	Preparation of Form 990P3	1,633.			1,633.
Total to Form 990-	PF, Part I, Line 16b	1,633.			1,633.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-	PF, Part I, Line 16c				

Additional Information

2018

Name Ecolint-American Foundation	Identification Number 23-7056392
Part VII-A, Question 10	
Substantial contributor:	
Paul Korngiebel 146 Brattle Street Cambridge, MA 02138	
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