Department of the Treasury Internal Revenue Service

# **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.

Open to Public Inspection

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

	Fo	r calen	idar year 2018 or tax year beginning	, and ending						
	_	me of fou				Ī.	A Employer	identification number		
	ТН	IF RIGH	HT TO VISION CHARITABLE TRUST	,						
			street (or PO box number if mail is not delivered to street address)		Room	n/suite		38-7124799		
.~			HINGTON AVENUE SUITE 1010				B Telephone	number (see instruction		
			, state or province, country, and ZIP or foreign postal code		1		•			
		WSON		2120	14			410-842-057	,	
			ntry name Foreign province/state/county		-	al code	0 16			$\overline{}$
	FOI	reign cou	nity frame Foreign province/state/county	roleig	jii post	ai code	C if exempti	ion application is pendin	g, check here	
	_	Chaol	cell that apply							
	G	Check		of a former pu	iplic c	harity	D 1. Foreigi	n organizations, check h	iere .	
			Final return Amended ret				_	n organizations meeting		_
<b>/</b> 0			🛛 Address change 🔲 Name chang					here and attach comput		
$\tilde{c}$	Н	Check	type of organization 💢 Section 501(c)(3) exempt pri	vate foundation	on	Po		foundation status was te 97(b)(1)(A), check here	rminated under	▶ □
⋗		Sectio	n 4947(a)(1) nonexempt charitable trust	able private fo	unda	tion	Section 50	(I)(U)(I)(A), Check here	•	
CANNED	1		arket value of all assets at J Accounting method.			ccrual			•	
m	•		year (from Part II, col (c), Other (specify)		_			idation is in a 60-month tion 507(b)(1)(B), check		▶ □
Ü			(Specify) \$ 105,512 (Part I, column (d) must be	on cash hasis	 : \		under sec	don sor (b)(1)(b), check	. HCIC	Ч,
	Б			I Carroasii basic	,,	I			(d) Disburseme	onto
FEBA		art I	Analysis of Revenue and Expenses (The total of	(a) Revenue		(b) Net	nvestment	(c) Adjusted net	for chantable	
3			amounts in columns (b), (c), and (d) may not necessarily.	expenses pooks	er	ìinc	ome	ıncome	purposes	
<i>7</i> %.	_	, ——	equal the amounts in column (a) (see instructions) )			er or especit manage	t for Note & Nancema	APPORE, Co. CIE. C. C. L. PROVI. L. ST. C. APPORTU	(cash basis or	nly)
A		1	Contributions, gifts, grants, etc , received (attach schedule)	102	2,778	2021704		COLUMN TO THE PARTY OF THE PART		22.50
123		2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B		W ##					
22		3:	Interest on savings and temporary cash investments	*	99		99	•		
		4	Dividends and interest from securities			•				
		5a	Gross rents		•			-		
		b	Net rental income or (loss)						<b>SHAPE THE</b>	
	ə	6a	Net gain or (loss) from sale of assets not on line 10		-792				e de la company	
	Revenue	b.	Gross sales price for all assets on line 6a 100,021							
	Š	7	Capital gain net income (from Part IV, line 2)				47,354			
	2	8	Net short-term capital gain			SHIP YES				
		9 .	Income modifications		41111					
		10a	Gross sales less returns and allowances							
		Ь	Less Cost of goods sold .	PACE SALE (SI)	N. C.	ALC: NO.				
		c	Gross profit or (loss) (attach schedule)		- 107,110,2	MACON IN		1		
		11	Other income (attach schedule)			20221			***********	10000
		12	Total. Add lines 1 through 11	102	2,085		47,453	0		17019213
		13	Compensation of officers, directors, trustees, etc.	-7	.,000			<u> </u>	ANNA SORTIAGO PERGAMERA	- 67 AZ 87 CI
	enses	14	Other employee salaries and wagesRECEIVED							
	ű	15	Pension plans, employee benefits	SC				,		
	_	16a		<del>  6  -</del>	,336		1,336			
	Û	b	Legal fees (attach schedule) $\bigcirc$ NOV 2 1 2019 Accounting fees (attach schedule)	0-82 82	1,000		1,000			
	e e		Other professional fees (attach schedule)	<del>  </del>				·-		
,	Administrative Exp		Interest OGDEN, UT			<del></del>				
	it	17								
,	Ë	18	Taxes (attach schedule) (see instructions)					<u> </u>	1856 SECTION 1851 SAUL	
	Ë	19	Depreciation (attach schedule) and depletion	<b></b>						esteron.
	ğ	20	Occupancy	ļ	740				72	742
		21	Travelinconferences, and meetings		3,742			<del> </del>		142
•	and	22	Printing and publications					*		
• • •	6	23	Other expenses (attach schedule)		25		25	*		<del></del>
	Operating	24	Total operating and administrative expenses.					_		740
	Ţ		Add lines 13 through 23	75	5,103	CHEKANISHMA PENER TI	1,361	O	73,	742
	þe	25	Contributions, gifts, grants paid							<u> </u>
	0	26	Total expenses and disbursements. Add lines 24 and 25.	75	5,103		1,361	0	73,	742
		27	Subfract line 26 from line 12.							
		a	Excess of revenue over expenses and disbursements	26	5,982					
		b	Net investment income (if negative, enter -0-)				46,092			Partie
	ŧ	آ- آ	Adjusted net income (if negative enter -0-)	ESTRUMENTAL STRUCK	MIN.	ELC:		0		

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Page 2

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Endic	or year	
Ρá	art III	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	78,530	105,512	105,512	
	2 '	Savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·		
	3	Accounts receivable				
	•	Less, allowance for doubtful accounts	107.00.000.000.000.000.000.000.000.000.0		Section Control of the Control of th	
	4	Diadese reconsolia N	West of the first buy			
	*	Less allowance for doubtful accounts		100000000000000000000000000000000000000	Process Control of the Control of th	
	_		-			
	5	Grants receivable	<del></del>	<del></del>		
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions) .	Transaverbeure, etcerosoca success, in opera.	Declaration resembles to wall assisted	Markon complementarional designation	
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts			ļ	
Assets	8	Inventories for sale or use				
Š	9	Prepaid expenses and deferred charges				
Ä	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	l c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
	`	Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment. basis		COMMUNICATION OF SERVICE		
	'	Less. accumulated depreciation (attach schedule)	***************************************	Providence and account of a way of a second		
	15	Other assets (describe				
	16	Total assets (to be completed by all filers—see the				
	ן וס	· · · · · · · · · · · · · · · · · · ·	78,530	105,512	105,512	
	4=	ınstructions. Also, see page 1, item l)	70,000	100,512	100,012	
	17	Accounts payable and accrued expenses			STREET, CONT. P. SALES	
S	18	Grants payable			esector propies to the	
ij	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		-		
ë.	21	Mortgages and other notes payable (attach schedule)	,	<del></del>		
_	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)	0	0		
w		Foundations that follow SFAS 117, check here <b>&gt;</b> 🛛				
ë		and complete lines 24 through 26, and lines 30 and 31.				
alances	24	Unrestricted	78,530	105,512		
	25	Temporarily restricted				
=	26	Permanently restricted				
or Fund B		Foundations that do not follow SFAS 117, check here				
Œ		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds				
ĕ	30	Total net assets or fund balances (see instructions)	78,530	105,512		
et	31	Total liabilities and net assets/fund balances (see				
z	• •	instructions)	78,530	105.512		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
		net assets or fund balances at beginning of year—Part II, column (a)	), line 30 (must agree	with		
•		of-year figure reported on prior year's return)	,, 22 (	1	78,530	
2		amount from Part I, line 27a		2	26,982	
_				3		
3		increases not included in line 2 (itemize)		4	105,512	
_		nes 1, 2, and 3		. 5	100,012	
5	Decre	eases not included in line 2 (itemize)	t II. column (b) line 3		105,512	
6	iotal	net assets or fund balances at end of year (line 4 minus line 5)—Par	th, within (b), line 3	10	105,512	

38-7124799 THE RIGHT TO VISION CHARITABLE TRUST Page 3 Form 990-PF (2018) Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold a) List and describe the kind(s) of property sold (for example, real estate, -Purchase (mo , day, yr) , 2-story brick warehouse, or common stock, 200 shs MLC Co ) (mo , day, yr ) D---Donation 12/4/2018 1a 150 SHS CHERVON CORP D 12/4/2018 1200 SHS GENERAL ELECTRICC D 12/4/2018 12/4/2018 D 12/4/2018 12/4/2018 900 SHS IBM CORP c d e (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price ((e) plus (f) minus (g)) plus expense of sale (or allowable) 17.293 17,823 530 а 8,944 1,312 7.632 h 22,429 50.825 73,254 C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) FM V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any 17,293 а 7,632 b 22,429 C d e If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 47,354 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) See instructions If (loss), enter -0- in 47,354 Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Part V (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 ☐ Yes 🕅 No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries (d) (a) (b) (c) Distribution ratio Base period years Adjusted qualifying distributions Net value of nonchantable-use assets (col (b) divided by col (c)) Calendar year (or tax year beginning in) 1.167279 2017 74,002 63,397 25,125 70,209 0 357860 2016 1 629815 46,541 28,556 2015 52,666 0 000000 0 2014 0 000000 0 0 2013 2 3 154954 2 Total of line 1, column (d) . Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by 3 3 0.630991 the number of years the foundation has been in existence if less than 5 years. Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 53,235 4 5 33,591 5 Multiply line 4 by line 3 . 6 461 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 34,052 7 Add lines 5 and 6 .

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Enter qualifying distributions from Part XII, line 4

Part VI instructions

73,742

38-7124799

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions	s)		
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		461	
	here ► 🛛 and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0	
3	Add lines 1 and 2		461	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		404	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		461	1566.50 Prints
6	Credits/Payments 2018 estimated tax payments and 2017 overpayment credited to 2018   6a   6a			
a b	2018 estimated tax payments and 2017 overpayment credited to 2018  Exempt foreign organizations—tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d	E STATE OF THE STA	0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . 9		461	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .		0	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax		0	
Part \	· · · · · · · · · · · · · · · · · · ·	I-magnetaris I	<del></del> .	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a	$\rightarrow$	<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	16		Х
	Instructions for the definition			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c	5188662888	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	MAT.	TI.	
	(1) On the foundation ►\$ (2) On foundation managers. ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers   \$	ii.		27 <b>1</b> 53
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	eamen	X
3	If "Yes," attach a detailed description of the activities  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	**************************************	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	e2.342.ditte. i	X • 443-2
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or  By the language in the governing instrument, or  By the language in the governing instrument on the language in the governing instrument on the language in the governing instrument.			
	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	(C) 4 (C) 4 (C) 4 (C)
7	conflict with the state law remain in the governing instrument?  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	$\frac{\hat{x}}{x}$	
7 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			-
Qa	MD			
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	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If			አ
	"Yes," complete Part XIV	9		_x_ <i>0</i>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		- 1	V
	names and addresses	10		<u> </u>

rail	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	١		
	person had advisory privileges? If "Yes," attach statement See instructions	12	- 1,	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
4.4	Website address N/A  The backs are in care of N TODD ALAN BODIN.  Talesbare as N Todd Alan BODIN.	0570		
14	The books are in care of ► TODD ALAN ROBIN  Located at ► 10636 WILSHIRE BLVD, APT 507 LOS ANGELES CA  Telephone no ► 410-842  ZIP+4 ► 90024	-05/2		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			
10	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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
	name of the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		ħ.	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations 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	1b	Lug Hibrita	X 5417181894
	and the state of t			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			X
2	were not corrected before the first day of the tax year beginning in 2018?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c	ed Haller	
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions )	2b	N/A	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	<b>▶</b> 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?  Yes 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	N/A	0.855828.20
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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		Х

Pan	Statements Regarding Activities	TOT TTIME TO THE	TI LO May DC IN	, <del>q a</del>				
5a	During the year, did the foundation pay or incur an (1) Carry on propaganda, or otherwise attempt to i		(section 4945(e))?		Yes	X No		Yes No
	(2) Influence the outcome of any specific public ele	ection (see section 4			─ Yes	X No		
	directly or indirectly, any voter registration drive  (3) Provide a grant to an individual for travel, study		noses?		Yes	X No	<b>多公城</b>	
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions.	•	•	in .	☐ Yes	⊠ No		
	<ul><li>(5) Provide for any purpose other than religious, cl purposes, or for the prevention of cruelty to chi</li></ul>		terary, or education	nal	Yes	X No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the t		 Jalify under the exc	entions		_		
	Regulations section 53 4945 or in a current notice					<b>.</b>	5b	N/A
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for	oundation claim exer or the grant?	mption from the tax		☐ Yes	► □ No		
6a	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any fur on a personal benefit contract?			ns 	☐ Yes	⊠ No		
b	Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870	directly or indirectly	, on a personal ber	efit con	tract? .		6b	
7a b	At any time during the tax year, was the foundation a palf "Yes," did the foundation receive any proceeds o			e transa	Yes action?	X No	7b	N/A
8	Is the foundation subject to the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration or excess parachute payment(s) during the section 4960 tax or remuneration the section 4960 tax or remuneration the section 4960 tax or remuneration 4960 t	n payment(s) of more ing the year?	e than \$1,000,000 i	n 	☐ Yes	X No		
Part	VIII Information About Officers, Directors	ors, Trustees, Fo	undation Manag	gers, H	lighly P	aid Em	ploye	es,
1	List all officers, directors, trustees, and foundate	tion managers and	their compensation	n. See	instructi	ons.		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	emplo	Contribution yee benefit erred compe	plans		nse account, allowances
	ALAN ROBIN  WILSHIRE BLVD APT 507 LOS ANGELES, CA 9	TRUSTEE 1 00	0					
	SAY R SAFFER	TRUSTEE						
442 R	ANGE RD TOWSON, MD 21204	1.00	0		_			
	Compensation of five highest-paid employees ( "NONE."	other than those in	cluded on line 1—	see ins	tructions	1	ne, ent	er 
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and a hours per videvoted to p	veek (c) Comper	sation	(d) Contrib employee plans and compens	benefit deferred		inse account, allowances
NONE		hours per v	veek (c) Comper	sation	employee plans and	benefit deferred		
NONE		hours per v	veek (c) Comper	nsation	employee plans and	benefit deferred		
NONE		hours per v	veek (c) Comper	sation	employee plans and	benefit deferred		
NONE		hours per v	veek (c) Comper	isation	employee plans and	benefit deferred		
NONE		hours per v	veek (c) Comper	isation	employee plans and	benefit deferred		

and Contractors (continued)	aia Empioyees,
3 Five highest-paid independent contractors for professional services. See instructions. 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	<b>•</b>
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 beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	
3	
·	
Total. Add lines 1 through 3	.▶ 0
<del></del>	Form 990-PF (2018)

<b>Part</b>	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foundation	ons,
	see instructions.)		<u></u>
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	54,046
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	54,046
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	54,046
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	811
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	53,235
6	Minimum investment return. Enter 5% of line 5	6	2,662
Part		ons	
	and certain foreign organizations, check here   and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	2,662
2a	Tax on investment income for 2018 from Part VI, line 5	1	
b	Income tax for 2018 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	461
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,201
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,201
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	2,201
Part	XII Qualifying Distributions (see instructions)	Transport I	
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	73,742
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.,	1 . 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	1878 av. 356 2016 - 356	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	73,742
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	461
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	73,281
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when	ether the four	idation
	qualifies for the section 4940(e) reduction of tax in those years		

38-7124799 Form 990-PF (2018) THE RIGHT TO VISION CHARITABLE TRUST Page 9 Part XIII Undistributed Income (see instructions) (b) (a) 2017 2018 Corpus Years prior to 2017 Distributable amount for 2018 from Part XI, line 7 2,201 2 Undistributed income, if any, as of the end of 2018. a Enter amount for 2017 only . . . 20 , 20 , 20 **b** Total for prior years. Excess distributions carryover, if any, to 2018. From 2013 . b From 2014 . 45,951 c From 2014 22,542 d From 2016 71.898 e From 2017 f Total of lines 3a through e Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 73,742 a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions) . c Treated as distributions out of corpus (Election required-see instructions) . d Applied to 2018 distributable amount . . . e Remaining amount distributed out of corpus . Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a)). . . Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . 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 . . d Subtract line 6c from line 6b Taxable amount—see instructions e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 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) Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . Analysis of line 9 a Excess from 2014.

45,951

22,542

71,898

b Excess from 2014 . .

c Excess from 2016 d Excess from 2017

Excess from 2018

orm 9	90-PF (2018) THE RIGHT TO VISIO	N CHARITABLE T	RUST		38-7124	1799 Page <b>1/0</b>
Part	XIV Private Operating Foundat	ions (see instru	ctions and Part	VII-A. question 9)		N/A
	If the foundation has received a ruling of					
	foundation, and the ruling is effective fo			. •		
b	Check box to indicate whether the foundation			cribed in section	4942(j)(3)	or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed	<b>(-7</b>	.,,	<del> </del>		0
b	85% of line 2a			1		0
c	Qualifying distributions from Part XII,				<del>- /</del> +	
·	line 4 for each year listed .					0
d	Amounts included in line 2c not used directly			<u> </u>		
u	for active conduct of exempt activities					0
е	Qualifying distributions made directly		<u> </u>			
C	for active conduct of exempt activities					
	Subtract line 2d from line 2c			/		0
3	Complete 3a, b, or c for the		<u> </u>			
•	alternative test relied upon.					
а	"Assets" alternative test—enter.			/		
_	(1) Value of all assets		/			0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i) .					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test—enter.					
_	(1) Total support other than gross		<b>/</b>			
	investment income (interest,	/	1	-		
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III)					00
	(3) Largest amount of support from				- "	
	an exempt organization .		<u> </u>			0
	(4) Gross investment income	لم ا				0
Part	XV Supplementary Information	າ (Complete thi	is part only if t	he foundation had	d \$5,000 or more	in assets at
	any time during the year—	see instruction	s.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation wh					undation
	before the close of any tax year (but on	y if they have con	tributed more than	1 \$5,000). (See section	on 507(d)(2) )	
		<del></del>			<del></del>	
b	List any managers of the foundation wh					of the
	ownership of a partnership or other enti-	y) of which the fo	undation has a 10	% or greater interest		
	1.6 Alice December 2 and the Alice	0:54 1 222	Cabalarahin at	December 1		
2	Information Regarding Contribution,		-	_	ntions and doos not	accont
	Check here ► X if the foundation on unsolicited requests for funds. If the foundation of the foundati	iy makes contribu ndation makes dif	tions to preselect te grante etc. to	individuals or organiza	rations and does not	ассері
	conditions, complete items 2a, b, c, and			marriada or organiz		
	The name, address, and telephone num			to whom applications	s should be address	ed:
а	the name, address, and telephone num	iver or email addr	ess of the beison	to whom applications	s should be addiess	-
h	The form in which applications should b	e submitted and in	nformation and ma	aterials they should in	nclude.	
U	The form in which applications should b		normanon and me	Listials they official if		
c	Any submission deadlines		<del> </del>			
-	,					
d	Any restrictions or limitations on awards	, such as by geog	raphical areas, ch	narıtable fields, kınds	of institutions, or oth	ner
	factors					

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Part	Supplementary Information (continued Grants and Contributions Paid During to	ued)	10 =		-
3_		he Year or Approve	ed for Ful	ture Payment	<del></del>
	. 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		
a		or substantial contributor	recipient		
	Total		<u> </u>	<b>&gt;</b> 3a	<del>,                                      </del>
b	Approved for future payment				
	Total .			. <b>&gt;</b> 3k	
	10tai	· · ·			<u> </u>

Pa	Analysis of income-Producing A	ctivities _				
Ente	er gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	
	•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue	243111033 6040		Exclusion code	74110411	(See instructions )
	a	-	<del> </del>			
	b	-				
		- }				
	d	·   <del></del>				
	f	· <del>[  </del>	<del> </del>			
	g Fees and contracts from government agencies	-				
2	Membership dues and assessments	1	· · · ·			
3	Interest on savings and temporary cash investments		<del></del>	14	99	
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:		SHEET HEAD			
	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	-792	. <del></del>
9	Net income or (loss) from special events				<del></del>	
10	Gross profit or (loss) from sales of inventory	ļ				<del></del>
11	Other revenue a	<u> </u>				
	b	<u> </u>				
	c					· <u> </u>
	d					
12	Subtotal Add columns (b), (d), and (e)	FILE SECTION			-693	0
	Total. Add line 12, columns (b), (d), and (e)			Mentanienter Analysista	13	-693
	worksheet in line 13 instructions to verify calculation	e 1				-093
	t XVI-B Relationship of Activities to the		ent of Exempt	Purnoses		
Lin	Explain below how each activity for which incor accomplishment of the foundation's exempt pu	me is reported in co	olumn (e) of Part X	VI-A contributed	importantly to the es). (See instruction	ons )
		<u>·                                     </u>		<del></del>		
			·			
					_	· · · –

		Exempt Org	ganizations											
1	Did	the organization of	directly or indirectly e	engage in a	ny of the fol	lowing w	ith any ot	her organı	zation c	lescrib	ed	\$ 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Yes	No
			er than section 501(c									F (* }	12,51	
	orga	inizations?	·					•						174
а	_		porting foundation to	a nonchari	ıtable exemi	ot organiz	zation of.					· ,	10 1	
_		Cash .	,									1a(1)		X
		Other assets		•	•	•		•				1a(2)		X
				•	•	•					•	IA(Z)		- 20,
b		er transactions										11.44		
			a noncharitable exe	. •		•	•	•	•		•	1b(1)		X
			ets from a noncharita	•	t organizatio	าก	•			•	•	1b(2)		X
			, equipment, or other	r assets		•	•				•	1b(3)		_X_
	(4) F	Reimbursement ai	rrangements .				•				•	1b(4)		_X
	(5) L	_oans or loan gua	rantees				•					1b(5)		Х
	(6) F	Performance of se	ervices or membersh	iip or fundra	aising solicita	ations	•					1b(6)		Χ
С	Sha	ring of facilities, ea	quipment, mailing lis	sts, other as	ssets, or paid	d employ	ees					1c		Х
d			the above is "Yes," cor					hould alwa	vs show	the fair	market			
			er assets, or services									et		
	value	e in any transaction	or sharing arrangeme	ent, show in	column (d) t	he value	of the goo	ds, other a	ssets, or	servic	es receiv	ed.		
(a) Lir	1	(b) Amount involved	(c) Name of non					cnption of tra					nemen	ts
(-/	-	(4)	(e) realise of figure		pt organizatio	+	(0) 500	onphon or tro			0, 0110 0112	ing unui	gomen	
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20	lo th	o foundation direct	the or indicatile office	atad with a	r rolated to	000 01 7	oro tov o	vomnt oro		-				
2a			ctly or indirectly affilia 01(c) (other than sec					xempt org	anızalıc	1115	$\Box$	Yes [	XI N	2
_					)(5))	CIIO11 021	•	•			. Ц	163 [	<u> </u>	,
<u>D</u>	IT "YE		following schedule	<del></del>				_						
		(a) Name of organ	ization	<u> </u>	(b) Type of orga	anization		_	(c) De	escription	of relation	isnip		
		· · · · · · · · · · · · · · · · · · ·			-									
		<u> </u>												
		· · · · · · · · · · · · · · · · · · ·												
								_		_				
			lare that I have examined this re						y knowledge	and belie	f, it is true,			
Sign	come	ct, and complete Declaration	on of preparer tother than taxpa	yer) is based on	all information of v	which prepare	r has any knov	vledge		ſ	May the IRS	discuss t	his returi	n
Here		TIMIN N		121	11/13/19	TRU	STEE	(			with the pre	parer shov	<u>vn</u> below	<u>?</u>
.010	Sig	nature of officer or trus	itee	17	Date	Title	-·- <b>=</b> _			— <u>[</u>	See instruc	ions [X	Yes	No
	<del>'                                    </del>	Print/Type preparer's	s name	Preparer's	seignature			Date			<u> </u>	PTIN		
Paid	_	GEORGE A AITI	_					11/11/	2019	Check self-en		200093	622	
Prepa	arer			<u>L L</u>	IIC			1 1/11/	$\overline{}$		83-372		<u> </u>	
Jse (			WEST, EDWARDS			CON MAD	21204			EIN ▶				
		Firm's address	409 WASHINGTON	IAVESIE	1010, 1000	SUN, ML	121204		Phone	no		6-4655		2045
											Fo	m 990	-rr (	2018)

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

### 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** 

38-7124799 THE RIGHT TO VISION CHARITABLE TRUST Organization type (check one) Section: Filers of: 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 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check 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** X 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

THE RIGHT TO VISION CHARITABLE TRUST

Separate Separa

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	ALAN L ROBIN, MD  13 IVEY TRACE COURT  HUNT VALLEY MD 21230  Foreign State or Province  Foreign Country	\$100,778	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	OPHTHALMOLOGY ASSOCIATES YORK  1945 QUEENSWOOD DRIVE  YORK PA 17403  Foreign State or Province: Foreign Country	\$2,000	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province. Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country.	\$	Person Payroli Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country.	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				

Name of organization Employer identification number THE RIGHT TO VISION CHARITABLE TRUST 38-7124799

Part II :	Noncash Property (see instructions). Use duplicate	copies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	150 SHS CHEVRON CORP	\$17,855	12/4/2018
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	1200 SHS GENERAL ELECTRIC CO	\$ 9,048	12/4/2018
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	600 SHS IBM	\$	12/4/2018
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
••••		\$	<u></u>
(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
		\$	

Name of org	ganization T TO VISION CHARITABLE TRUST			Employer identification number 38-7124799			
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the y the following line entry. For organizations of contributions of \$1,000 or less for the year	ear from any one cont completing Part III, ente (Enter this information	tributor. Complete co	section 501(c)(7), (8), or olumns (a) through (e) and ely religious, charitable, etc.			
(a) Na	Use duplicate copies of Part III if additiona	space is needed	· <del>- · · · · · · · · · · · · · · · · · ·</del>				
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
		(e) Transfer	of gift				
	Transferee's name, address, and a	ZIP + 4	Relationship o	f transferor to transferee			
	For Prov Country						
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
		(e) Transfer	of gift				
	Transferee's name, address, and 2	(IP + 4	Relationship of	f transferor to transferee			
	For Prov Country						
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and 2	(IP + 4	Relationship of	f transferor to transferee			
	For Prov Country						
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
}	<u> </u>	(e) Transfer	of gift				
	Transferee's name, address, and 2	(IP + 4	Relationship of	transferor to transferee			
Ì							
_	For Prov Country						

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

, Fine o (330-1 1) - Canificos nom cale of Assets Offici man interned														
								Totals	Scos	SS	Cost or Other B	Cost or Other Basis, Expenses,	Net Gain	ain
	Amount								Sales	SS	Depreciation at	Depreciation and Adjustments	or Loss	SS
Long Term CG Distributions	0						ڻ ا	Capital Gains/Losses		100,021		100,813	h H	-792
Short Term CG Distributions	0							Other sales		0		0		
				Check X ff									•	
		Check X		Purchaser				•			Expense of Sale			
		to include		S S	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description	CUSIP#	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	Improvements	Depreciation	Adjustments	orLoss
150 SHS CHERVON CORP		×			O	12/4/2018	12/4/2018	17,823	17,855		101			
1200 SHS GENERAL ELECTR		×			0	12/4/2018	12/4/2018	8,944	9,048		10			-114
900 SHS IBM CORP		×			٥	12/4/2018	12/4/2018	73,254	73,875		15			-636

Part I, Line 16a (990-PF) - Legal Fees

		1,336	1,336	0	0
		Revenue and Expenses per	Net Investment	Adjusted Net	Disbursements for Charitable Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	BAKER DONNELSON	1,336	1,336		0

Part I, Line 23 (990-PF) - Other Expenses

				25	25	0	0
			Re	evenue and			Disbursements
			[	Expenses	Net Investment	Adjusted Net	for Charitable
		Description		er Books	Income	Income	Purposes
1	BANK FEE			25	25		

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

"	·	-	
,	Expense Account	0	0
•	Benefits	0	0
•	Avg Hrs Per Week Compensation	0	0
	Avg Hrs Per Week	1 00	1 00
	Title	TRUSTEE	TRUSTEE
	Foreign Country		
	State Zp Code	90024	21204
	State	CA 90024	MD
	Crip	LOS ANGELES	TOWSON
	Street	10636 WILSHIRE BLVD APT 507 LOS ANGELES	442 RANGE RD
	Check "X" if Business	-	_
	Name	TODD ALAN ROBIN	LINDSAY R SAFFER
		_	~