## Extended to November 15,

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

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			social security numbers or				1 2010
	_		rs.gov/Form990PF for unst	•		nformation	Open to Public Inspection
		ndar year 2018 or tax year beginning	-	, and e	naing	A P	
		foundation	Tna			A Employer identification	number
		tha G Moore Foundation,				51-0201970	
		Wilmington Trust Compa and street (or PO box number if mail is not delivered to street			D		
		O N. Market Street	t address)		Room/suite	302-651-10	00
		town, state or province, country, and ZIP or foreign ${rak r}$ . ${rak {mington}}$ , ${rak DE}$ ${rak 1989}$	oostal code			C If exemption application is pe	ending, check here
		k all that apply Initial return	Initial return of a fo	rmer public o	harity	D 1. Foreign organizations	check here
_		Final return	Amended return			- Tribingh organizations	, 0.110011 11010
2 2 3 4		Address change	Name change			Foreign organizations med check here and attach cor	eting the 85% test,
3 H	_	k type of organization X Section 501(c)(3) ex	kempt private foundation		bU	E If private foundation stat	us was terminated
* <u> </u>		ection 4947(a)(1) nonexempt chantable trust	Other taxable private founda	$\neg$	- <u> </u>	under section 507(b)(1)	(A), check here
-4.		arket value of all assets at end of year   J Account	-	L Accr	rual	F If the foundation is in a 6	
	rom ∣ ►\$	Part II, col (c), line 16) O 4932414. (Part I, colur	ther (specify) nn (d) must be on cash basi	s)		under section 507(b)(1)	(B), check here
P.	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
<u> </u>	1	Contributions, gifts, grants, etc., received				N/A	(Carrie Danie Office)
X.	2	Check X if the foundation is not required to attach Sch B			***************************************		
(Q)	3	Interest on savings and temporary cash investments					
(y)	4	Dividends and interest from securities	116142.	1	11692.		Statement 1
	1	Gross rents					**********
	[	Net rental income or (loss)			***************************************		
	۱ ـ	Net gain or (loss) from sale of assets not on line 10	91745.	**	<del></del>		
Revenue	T	Gross sales price for all assets on line 6a 19061379.			······		FT 1
ě	7	Capital gain net income (from Part IV, line 2)	· · · · · · · · · · · · · · · · · · ·		91745.	1	
٠ ٣	8	Net short-term capital gain				FECEIVI	101
	g	Income modifications				TET NOV 18	5013 1031
	10a	Grace calce loce returns		***************************************	***************************************	181 NO	The state of the s
	Ь	Less Cost of goods sold		· · · · · · · · · · · · · · · · · · ·		1 X 2(7) 1	1 1 1 1 1 1
		Gross profit or (loss)			***************************************	OGDE	- Company of the Comp
	11	Other income		•		1 00	
	12	Total. Add lines 1 through 11	207887.	2	03437.		
	13	Compensation of officers, directors, trustees, etc	0.		,0,		0.
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					·
ses	16a	Legal fees					
ë	b	Accounting fees Stmt 2	8700.		4350.		4350.
Ä	C	Other professional fees Stmt 3	45326.	~~,	45326.		0.
ķ	17				•		
rati	18	Taxes Stmt 4	1806.		1806.		0.
Operating and Administrative Expenses	19	Depreciation and depletion					
Ē	20	Occupancy					
Ā	21	Travel, conferences, and meetings					
pue	22	Printing and publications					
ğ	23	Other expenses Stmt 5	2058.		68.		1990.
rati	24	Total operating and administrative					
per Jber		expenses. Add lines 13 through 23	57890.		<u>51550.</u>		6340.
0	25	Contributions, gifts, grants paid	260000.				260000.
	26	Total expenses and disbursements.					<u> </u>
	lacksquare	Add lines 24 and 25	317890.		<u>51550.</u>		266340.
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-110003.				
	b	Net investment income (if negative, enter -0-)		1	51887.	, ,	
_	C	Adjusted net income (if negative, enter -0-)			·····	N/A	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	390664.	490448.	490448.
2 Savings and temporary cash investments			
3 Accounts receivable ►			
Less allowance for doubtful accounts			
4 Pledges receivable ►			
Less allowance for doubtful accounts ▶			
5 Grants receivable	•		· <u>· · · · · · · · · · · · · · · · · · </u>
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			
Less allowance for doubtful accounts	Ì	1	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b investments - corporate stock Stmt 7	4672656.	4551828.	4441966.
c Investments - corporate bonds	10,2000.		11117000
11 Investments - land, buildings, and equipment basis			
	į.	į	
Less. accumulated depreciation  12 Investments - mortgage loans			
13 Investments - other			
			-
14 Land, buildings, and equipment basis Less accumulated depreciation		İ	
15 Other assets (describe )			
16 Total assets (to be completed by all filers - see the	5063320.	5042276.	4932414.
instructions Also, see page 1, item i)	3003320.	3042270.	4932414.
17 Accounts payable and accrued expenses			
18 Grants payable		<del>-</del>	
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe)			
	0 /	,	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26, and lines 30 and 31	5062220	5040076	
24 Unrestricted	5063320.	5042276.	
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances		1	
27 Capital stock, trust principal, or current funds			***************************************
28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds	5060000	5040076	
30 Total net assets or fund balances	5063320.	5042276.	
	5060000	5040056	
31 Total liabilities and net assets/fund balances	5063320.	5042276.	
Part 組 Analysis of Changes in Net Assets or Fund Bal	ances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	· · · · · · · · · · · · · · · · · · ·	<del></del>	
(must agree with end-of-year figure reported on prior year's return)	•	11	5063320.
2 Enter amount from Part I, line 27a		2	-110003.
3 Other increases not included in line 2 (itemize) <b>WASH SALE AD</b>	JUSTMENT	3	96498.
Add lines 1, 2, and 3	O O TITLIAT	3 4	5049815.
5 Decreases not included in line 2 (itemize)	See Stat		7539.
· · · · · · · · · · · · · · · · · · ·	<del></del>		5042276.
5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	nin (n), iiile 30	6	Form <b>990-PF</b> (2018)

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Part IV Capital Gains a	nd Losses for Tax on In	vestmen	t Income				020	1370 Tuge C
	ne kind(s) of property sold (for exar ehouse, or common stock, 200 shs		ate,	` P	How acquired - Purchase - Donation		acquired day, yr)	(d) Date sold (mo , day, yr )
1a SALE OF SECURIT	IES			<del>                                     </del>	P			
b SALE OF SECURIT	PIES				P		-	
c Capital Gains D	ividends							
d					_			
е	· -			L.,	_			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss) is (f) minus (	
a 18406858.			1841414					-7288
b 653670.			55548	8.				98182.
c 851.	<del>-</del>							851.
d								
Complete only for coasts of awar			40/04/00				<del> </del>	<u>.</u>
Complete only for assets snowing	gain in column (h) and owned by t		_				Col (h) gain not less thar	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				s (from col (	h))
a								-7288.
<u>b</u>								98182.
<u>C</u>				_				851.
_ <b>d</b>				-				
_e				$\rightarrow$				
2 Capital gain net income or (net cap	If gain, also enter   If (loss), enter -0-			}	2			91745.
3 Net short-term capital gain or (loss								
If gain, also enter in Part I, line 8, c		u (0)		)				
If (loss), enter -0- in Part I, line 8				J	3		N/A	
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estment In	come		
(For optional use by domestic private 1	oundations subject to the section 4	940(a) tax on	net investment in	come	)			
If section 4940(d)(2) applies, leave this	s part blank							
. ,, , , ,								
Was the foundation liable for the section			F	10d?				Yes X No
If "Yes," the foundation doesn't qualify  1 Enter the appropriate amount in ea				ntriac				
(a)	(b)	Structions be	Tote making any e					(d)
Base periód years Calendar year (or tax year beginning	A ALLEAN ALLE AND ALLE ALLE ALLE ALLE ALLE ALLE ALLE ALL	ributions	Net value of no	(c) nchar	ıtable-use asset	,	Distrib	(d) ution ratio ded by col (c))
2017		51374.			519879	7 .	(cor (b) divi	•048352
2016		53884.			505830			.050192
2015		74291.			552400			.049654
2014	20	63277.			589638	7.	-	.044651
2013	2:	94386.			548348	1.		.053686
			-					
2 Total of line 1, column (d)						2	<u></u>	.246535
3 Average distribution ratio for the 5-	year base period - divide the total o	n line 2 by 5 (	0, or by the numbe	er of y	ears/			
the foundation has been in existence	e if less than 5 years					3	ļ	.049307
		_						E000400
4 Enter the net value of noncharitable	-use assets for 2018 from Part X, I	ine 5				4		5229402.
E. Birchinello line 4 horologo O						_		257046
5 Multiply line 4 by line 3						5		257846.
6 Eater 1% of pet investment income	(10/, of Part Line 27h)							1510
6 Enter 1% of net investment income	(1 /0 UI Fail I, IIIIE 2/0)					6	<del> </del>	1519.
7 Add lines 5 and 6						7		259365.
moo o unu o						-'-	-	
8 Enter qualifying distributions from I	Part XII, line 4					8		266340.
If line 8 is equal to or greater than li See the Part VI instructions	ne 7, check the box in Part VI, line	1b, and comp	elete that part using	g a 19	% tax rate			
Occ me i art vi instructions								

Martha G Moore Foundation, Inc.

C/O Wilmington Trust Company 51-0201970 Form 990-PF (2018) Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here | and enter "N/A" on line 1 (attach copy of letter if necessary-see instructions) Date of ruling or determination letter b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 1519. 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 1519 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-5 6 Credits/Payments 2756 a 2018 estimated tax payments and 2017 overpayment credited to 2018 0. **b** Exempt foreign organizations - tax withheld at source 6b 5000 c Tax paid with application for extension of time to file (Form 8868) 6c 0 d Backup withholding erroneously withheld 6d 7756. 7 Total credits and payments Add lines 6a through 6d 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 g 6237. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 6237 . Refunded ▶ 11 Enter the amount of line 10 to be Credited to 2019 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a 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 Х c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0. (1) On the foundation > \$ 0 • (2) On foundation managers ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0. X 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 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 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Х X 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 None 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) Х 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 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

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C/O Wilmington Trust Company 51-0201970 Form 990-PF (2018) Page 5 Part VII-A 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 Х 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? X 12 If "Yes," attach statement See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address Telephone no ▶302-651-1942 14 The books are in care of ▶ WILMINGTON TRUST COMPANY ZIP+4 ►19890-0900 Located at ▶ 1100 N MARKET STREET, WILMINGTON, DE 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year No 16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, Yes X securities, or other financial account in a foreign country? 16 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 No Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (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 Yes X No 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 foundation agreed to make a grant to or to employ the official for a period after Yes X No 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 Х section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions 1b Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2018? 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(1)(3) or 4942(1)(5)) a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ▶ b Are there any years listed in 2a for which the foundation is not 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 N/A 2b statement - see instructions ) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2018) 3b

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4a

X

Х

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

1 List all officers, directors, trustees, and foundation managers a	nd their compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LISA K. HOLMES	CHAIRMAN, PRE	ESIDENT, T	RUSTEE	
1100 N MARKET STREET				
WILMNGTON , DE 19890-0900	1.00	0.	0.	0.
SHARON J KRABY	SECRETARY, TH	USTEE		
1100 N MARKET STREET				
WILMNGTON , DE 19890-0900	1.00	0.	0.	0.
JOSEPH E. LUNDY	TRUSTEE			
1100 N MARKET STREET				
WILMNGTON , DE 19890-0900	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those	included on line 1). If none,	enter "NONE."		
(a) Name and address of each employee hald more than \$50,000	(b) Title, and average	(a) Compensation	(d) Contributions to employee benefit plans	(e) Expense

- vempensation of the inglicat para employees (other than those in	oladea oli illie 17. il iloile	,		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	-			
	_			
Total number of other employees paid over \$50,000	•			C

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3 Five highest-paid independent contractors for professional services. If none, enter "I	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(C) Type or correct	(-) (-)
		_
otal number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<b>•</b>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers product	ed, etc	Expenses
N/A	,	
Part IX-B Summary of Program-Related Investments		· · · · · · · · · · · · · · · · · · ·
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
N/A		
All other program-related investments. See instructions		
sale data program totale anticolation to coo medical data.		

Form 990-PF (2018) Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities 1a 4860701. 448337. 1b b Average of monthly cash balances c Fair market value of all other assets 10 5309038. d Total (add lines 1a, b, and c) 1 d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 5309038 3 3 Subtract line 2 from line 1d 79636. 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 5229402. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 261470. Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here 
and do not complete this part ) 261470. Minimum investment return from Part X, line 6 1519 2a Tax on investment income for 2018 from Part VI, line 5 2a b income tax for 2018 (This does not include the tax from Part VI) 1519 c Add lines 2a and 2b 20 259951. 3 Distributable amount before adjustments Subtract line 2c from line 1 3 Ο. Recoveries of amounts treated as qualifying distributions 4 259951. 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 259951 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 266340. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 16 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the 3 a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 266340. 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1519 income Enter 1% of Part I, line 27b 5 264821. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

•				
,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI, line 7		F		259951.
*****		***************************************		233331.
2 Undistributed income, if any, as of the end of 2018			0.	
a Enter amount for 2017 only		<del></del>	<u> </u>	
<b>b</b> Total for prior years		0.		
Evano distributions corrector if any to 2019		U •		
3 Excess distributions carryover, if any, to 2018				
a From 2013 14532.				
b From 2014				
t From 2015				
d From 2016 1689.				
8 From 2017	16221.		<del></del>	·····
f Total of lines 3a through e	10221•			
4 Qualifying distributions for 2018 from				
Part XII, line 4 ► \$ 266340 .			0	
a Applied to 2017, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		,		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.		<del>чини ч. п.ч. — — — ч.чинин</del>	250051
d Applied to 2018 distributable amount	6200			259951.
e Remaining amount distributed out of corpus	6389.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	22610.		·····	
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	·····	·····
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed d Subtract line 6c from line 6b Taxable		0.	······	
amount - see instructions		0.		
e Undistributed income for 2017 Subtract line		0.		
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2018 Subtract				<del></del>
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of	······································			***************************************
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013		***************************************	***************************************	
not applied on line 5 or line 7	14532.			
9 Excess distributions carryover to 2019.	113021	······································		***************************************
Subtract lines 7 and 8 from line 6a	8078.			
10 Analysis of line 9				***************************************
a Excess from 2014				
b Excess from 2015				
c Excess from 2016 1689.				
d Excess from 2017				
e Excess from 2018 6389.				
5 E. 1000 11 C. 11 E. 10 10 1		£		

10

Form **990-PF** (2018)

133979-1

C/O Wilmington Trust Company

or Approved for Future F recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	<del>_</del>
or substantial contributor	recipient		<del>_</del>
IE.			•
IE			
TE .	!		
1.5	PC .	GENERAL SUPPORT	
	PC .	GENERAL SUPPORT	
			10000.
IE :	PC	GENERAL SUPPORT	
			5000.
IE .	PC	GENERAL SUPPORT	
			5000.
12	PC	GENERAL SURPORT	
		SINDIVID BOTTOKT	
			25000.
IE	PC	GENERAL SUPPORT	
			5000.
nuation shee	t(s)	<b>▶</b> 3a	260000.
777			
•			
		<b>▶</b> 3b	0.
r:	E	E PC	E PC SENERAL SUPPORT  E PC SENERAL SUPPORT  Nuation sheet(s) > 32

ter gross amounts unless otherwise indicated	Unrelated t	ousiness income		by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
C	1 1				
d	1 1				
e	l l				
f					_
Fees and contracts from government agencies					_
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	116142.	·
Net rental income or (loss) from real ostato		, , , , , , , , , , , , , , , , , , , ,		1 17 1 11 1 11 11 11 1	
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					••
than inventory			18	91745.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b					
c					
d	I I				
е					
Subtotal Add columns (b), (d), and (e)		0	•	207887.	
	•	··· ·		13	20788
Total. Add line 12, columns (b), (d), and (e)					
	)				
e worksheet in line 13 instructions to verify calculations		nplishment of E	xempt	Purposes	
e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities	s to the Accon				olishment of
e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie	s to the Accon	olumn (e) of Part XVI-			olishment of
e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  ne No Explain below how each activity for which in	s to the Accon	olumn (e) of Part XVI-			olishment of
e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  ne No Explain below how each activity for which in	s to the Accon	olumn (e) of Part XVI-			olishment of
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ret XVI-B Relationship of Activities  ne No Explain below how each activity for which in	s to the Accon	olumn (e) of Part XVI-			olishment of
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re worksheet in line 13 instructions to verify calculations  Relationship of Activities  ne No Explain below how each activity for which in	s to the Accon	olumn (e) of Part XVI-			plishment of
e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  ne No Explain below how each activity for which in	s to the Accon	olumn (e) of Part XVI-			plishment of

Part	XVII	Information Re		sfers to a	nd Transactions a	and Relations	hips With Non	charitable	1	
1 D	d the or		-	of the following	ig with any other organizati	on described in sect	tion 501(c)		Yes	No
					g to political organizations?					
		from the reporting founda	•		• •					İ
	) Cash	. •		•	•			1a(1)		Х
•	) Other							1a(2)		X
•	•	sactions								
(1	) Sales	of assets to a noncharital	ble exempt organiza	ition				1b(1)		Х
(2	) Purcl	nases of assets from a nor	ncharitable exempt	organization				1b(2)		X
(3	) Renta	al of facilities, equipment,	or other assets					1b(3)		_X
(4	) Reim	bursement arrangements						1b(4)		X
(5	) Loan	s or loan guarantees						1b(5)		X
(6	) Perfo	rmance of services or me	mbership or fundrai	ısıng solicitatio	ons			1b(6)		X
c SI	naring o	f facilities, equipment, mai	ılıng lists, other asse	ets, or paid em	ployees			10		X
10	service	s given by the reporting fo	oundation If the fou	indation receiv	edule Column (b) should al ed less than fair market val		_		ets,	
		1) the value of the goods,	<del></del>			(4) -				
(a) ⊔ne	no	(b) Amount involved	(c) Name of		e exempt organization	(Q) Description	n of transfers, transaction	ns, and shanng an	rangeme	nts
			_	N/A						
				·				· · · · · · · · · · · · · · · · · · ·		
	-									
	<del> </del>			<u> </u>						
	<u> </u>		-		••••					
	_									
	_									
		•	•		or more tax-exempt organ	izations described				
		501(c) (other than section complete the following sche		ection 52/7				Yes	[	] No
וו ע	165, C	in Name of org			(b) Type of organization	<u>T · · · · · · · · · · · · · · · · · · ·</u>	(c) Description of rel	ationship		
		N/A			(=/ · ) pr v · o · gamaation		4-7			
-										
				-					_	
	<b>,</b>							,		
Sign Here	and be	elief, it is true, correct, and corr			ng accompanying schedules and n taxpayer) is based on all infor	Presi		May the IRS of return with the shown below Yes	e prepan	er
	Sigr	lature of officer or trustee		Preparer's s	Date	Title Date	Check   If	PTIN		
		Print/Type preparer's na	mo	i ichaigi 2 2	ignaturo	Date	self- employed			
Paid		BARBARA MC	NETT.	BARRAR	A MCNEIL	11/08/19	55 5 <b>.</b>	P01279	930	
Prep		Firm's name WIL		RUST C		,,,	Firm's EIN ► 51			
Use		Tarres name > ***			<b></b>				_ ~	
	-	Firm's address ▶ 11	00 N MARK	ET STR	EET DES-C070	)	<u> </u>			
			LMINGTON		9890-0001		Phone no 302	2-651 <b>-</b> 1	<u>035</u>	
			<del></del>					Form <b>990</b>	)-PF	(2018)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient FEEDING SOUTH FLORIDA NONE PC GENERAL SUPPORT 2501 SW 32ND TERRACE PEMBROKE PARK, FL 33023 5000. FLORIDA OCEANOGRAPHIC SOCIETY NONE PC GENERAL SUPPORT 890 NE OCEAN BLVD STUART, FL 34996 25000. FLORIDA OCEANOGRAPHIC SOCIETY NONE ÞC GENERAL SUPPORT 890 NE OCEAN BLVD STUART, FL 34996 15000. GREENWAVE NONE ÞС GENERAL SUPPORT 315 FRONT STREET NEW HAVEN, CT 06513 25000. HUMAN SERVICES- BRAVARD MEALS ON NONE PC GENERAL SUPPORT WHEELS 451 N STATE RD 7 5000. PLATATION, FL 33317 JUNIOR WELFARE SOCIETY NONE GENERAL SUPPORT P O BOX 39646 FORT LAUDERDALE, FL 33339 5000. LIGHT OF THE WORLD CLINIC NONE GENERAL SUPPORT ÞС 5333 N DIXIE HWY # 201 OAKLAND PARK, FL 33334 5000. LOCKS OF LOVE, INC NONE GENERAL SUPPORT 234 SOUTHERN BLVD WEST PALM BEACH, FL 33405 5000. NATUREBRIDGE NONE PC GENERAL SUPPORT 28 GEARY STREET, SUITE 650 SAN FRACISCO, CA 94108 25000. NEUROFIBROMATOSIS CENTER NONE ÞC GENERAL SUPPORT 201 EAST SAMPLE ROAD POMPANO BEACH, FL 33064 5000. Total from continuation sheets 210000.

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
OCEAN RESEARCH & CONSERVATION	NONE	PC	GENERAL SUPPORT	
ASSOCIATION				
1420 SEAWAY DR.				
FORT PIERCE, FL 34949				5500
RACHEL'S NETWORK	NONE	PC	GENERAL SUPPORT	
1200 18TH ST NW #910				
WASHINGTON, DC 20036				2500
SAN ISIDRO FOOD MINISTRY	NONE	PC	GENERAL SUPPORT	
2310 MATIN LUTHER KING BLVD				
POMPANO BEACH, FL 33069				500
WOMEN IN DISTRESS	NONE	PC	GENERAL SUPPORT	
1000 NE 56TH STREET				
FORT LAUDERDALE, FL				500
			-	
Total from continuation sheets				

Form 990-PF Di	ividend	s and Inter	est from Secui	cities St	atement 1
	Gross Amount	Capital Gains Dividend	Revenue	(b) Net Invest- ment Income	(c) Adjusted Net Income
INTEREST & DIVIDENDS	116993	. 85	1. 116142.	111692.	
To Part I, line 4	116993	. 85	116142	111692.	
Form 990-PF		Accounti	ng Fees	St	catement 2
Description		(a) Expenses Per Books		(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING FEE		8700.	4350.		4350.
To Form 990-PF, Pg 1, ]	Ln 16b =	8700.	4350.		4350.
Form 990-PF	0	ther Profes	sional Fees	St	atement 3
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable
					Purposes
INVESTMENT ADVISORY FEE ADR FEES	2	45296. 30.	45296. 30.		
					0.
ADR FEES		30.	45326.	st	0.
ADR FEES To Form 990-PF, Pg 1, ]		30. 45326.	45326.	(C) Adjusted Net Income	0. 0. 0. atement 4
ADR FEES To Form 990-PF, Pg 1, ] Form 990-PF		45326. Tax  (a) Expenses	30. 45326. es (b) Net Invest-	(c) Adjusted	0. 0. atement 4 (d) Charitable

Form 990-PF	Other Expenses		Statement 5	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom	
BANK SERVICE FEE LICENCES MEETING EXPENSE P O BOX RENTAL INSURANCE	68. 70. 690. 250. 980.	68. 0. 0. 0.		0. 70. 690. 250. 980.
To Form 990-PF, Pg 1, ln 23	2058.	68.		1990.
Description				Amount
PENDING CASH ADJ ADJUSTMENT	II, line 5			7299. 240.
PENDING CASH ADJ ADJUSTMENT Total to Form 990-PF, Part II	II, line 5			Amount 7299. 240. 7539.
PENDING CASH ADJ ADJUSTMENT Total to Form 990-PF, Part II	II, line 5 Corporate	e Stock		7299. 240. 7539.
PENDING CASH ADJ ADJUSTMENT Total to Form 990-PF, Part II			ok Value	7299 240 7539
PENDING CASH ADJ ADJUSTMENT			ok Value 4551828.	7299. 240. 7539. Statement 7