

Form **990-PF**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.

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

OMB No. 1545-0052

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning

Jul 1, 2018, and ending

Jun 30, 2019

Name of foundation

KINESIS, INC

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

2000 CARR 877 PMB 208

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

GUAYNABO PR 00966

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationI Fair market value of all assets at
end of year (from Part II, col. (c),
line 16) ▶ \$ 14,533,063.J Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

A Employer identification number

66-0727042

B Telephone number (see instructions)

(787) 250-0033

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☒2. Foreign organizations meeting the 85% test,
check here and attach computation ☐E If private foundation status was terminated under
section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination
under section 507(b)(1)(B), check here ☒**Part 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) (see instructions).)(a) Revenue and
expenses per
books(b) Net investment
income(c) Adjusted net
income(d) Disbursements
for charitable
purposes
(cash basis only)

1	Contributions, gifts, grants, etc., received (attach schedule)	2,074,428.			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	484,186.	484,186.		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	423,916.			
b	Gross sales price for all assets on line 6a 2,381,799.				
7	Capital gain net income (from Part IV)				
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule) See Stmt	612,701.			
12	Total. Add lines 1 through 11	3,595,231.	484,186.		
13	Compensation of officers, directors, trustees, etc.	106,543.			
14	Other employee salaries and wages	777,142.			
15	Pension plans, employee benefits	11,503.			
16a	Legal fees (attach schedule) L-16a Stmt	86,165.			
b	Accounting fees (attach schedule) L-16b Stmt	23,183.			
c	Other professional fees (attach schedule) L-16c Stmt	776,574.			
17	Interest	84,847.			
18	Taxes (attach schedule) (see instructions) See Stmt	110,591.			
19	Depreciation (attach schedule) and depletion	46,389.			
20	Occupancy	152,329.			
21	Travel, conferences, and meetings	48,426.			
22	Printing and publications	6,027.			
23	Other expenses (attach schedule) See Stmt	429,150.		0.	0.
24	Total operating and administrative expenses. Add lines 13 through 23	2,658,869.		0.	0.
25	Contributions, gifts, grants paid	1,496,309.			
26	Total expenses and disbursements. Add lines 24 and 25	4,155,178.		0.	0.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	-559,947.			
b	Net investment income (if negative, enter -0-)		484,186.		
c	Adjusted net income (if negative, enter -0-)			0.	

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	1,490,093.	505,390.	505,390.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ 833,505. Less: allowance for doubtful accounts ▶	564,228.	833,505.	833,505.
	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) ▶ Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	1,290,234.	1,037,224.	1,037,224.
	c Investments—corporate bonds (attach schedule)	7,675,695.	6,944,992.	6,944,992.
	11 Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	3,786,726.	4,483,994.	4,483,994.
	14 Land, buildings, and equipment: basis ▶ 798,667. Less: accumulated depreciation (attach schedule) ▶ 81,429.	307,221.	717,238.	717,238.
	15 Other assets (describe ▶ Prepaid expenses)	8,735.	10,720.	10,720.
	16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	15,122,932.	14,533,063.	14,533,063.
Liabilities	17 Accounts payable and accrued expenses	2,069,244.	2,039,322.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	2,069,244.	2,039,322.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted	12,466,688.	11,882,741.	
	25 Temporarily restricted	0.	0.	
	26 Permanently restricted	587,000.	611,000.	
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> 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 (see instructions)	13,053,688.	12,493,741.	
	31 Total liabilities and net assets/fund balances (see instructions)	15,122,932.	14,533,063.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	13,053,688.
2 Enter amount from Part I, line 27a	2	-559,947.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	12,493,741.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	12,493,741.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017			
2016			
2015			
2014			
2013			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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 Part VI instructions.

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 <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	19,367.	
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-)	2	0.	
3	Add lines 1 and 2	3	19,367.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	19,367.	
6	Credits/Payments:			
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a		
b	Exempt foreign organizations—tax withheld at source	6b	3,789.	
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d	7	3,789.	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	15,578.	
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 <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

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 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	x
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.		
c Did the foundation file Form 1120-POL for this year?	1c	x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ _____ (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. ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	x
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	x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	x
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .	5	x
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
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	x
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ►		
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 <i>General Instruction G</i> ? If "No," attach explanation	8b	x
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	9	x
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	10	x

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		x
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>www.kinesispr.org</u>	x	
14 The books are in care of ► <u>KINESIS, INC</u> Telephone no. ► <u>(787) 250-0033</u> Located at ► <u>1001 SAN ROBERTO STREET SUITE 101 SAN JUAN PR</u> ZIP+4 ► <u>00927</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ► 15		
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		x
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 RequiredFile **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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		
Organizations relying on a current notice regarding disaster assistance, check here ► <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?		x
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(j)(3) or 4942(j)(5)):		
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
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 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. ► 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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?		x

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year, did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☒ Yes ☐ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructionsOrganizations relying on a current notice regarding disaster assistance, check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

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

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No**8** Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ☐ Yes ☒ No**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(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
JOSE E. FERNANDEZ-BJERG 1717 LILAS STREET SAN JUAN PR 00907	PRESIDENT & CHAIRMAN 20.00	0.	0.	0.
JORGE L FERNANDEZ-BJERG DA 11 Montebello GUAYNABO PR 00966	VICE PRESIDENT, DIRECTOR 15.00	0.	0.	0.
MILTON JIMENEZ SKY DRIVE I-2 LAKE VIEW STATES CAGUAS PR 00725	SECRETARY, TREASURER 10.00	0.	0.	0.
See Statement	40.00	106,543.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LUIS E. GAUTIER LLOVERAS DA-4 HASTINGS STREET, GARDEN HILLS GUAYNABO PR 00966	DEVELOPMENT EXECUTIVE DIRECTOR 40.00	136,023.	0.	0.
YAMIRA FLORES RODRIGUEZ JARDINES DE SAN LORENZO, CALLE 4 #E-13C SAN LORENZO PR 00754	PROGRAM DIRECTOR 40.00	67,096.	0.	0.
ISABEL SOTO CRUZ URB. BAIRIO PARK, R-1 CALLE LOS ANGELES CAGUAS PR 00727	COLLEGE COUNSELOR 40.00	58,404.	0.	0.
MAYRA PRATTS FANTAUZZI AA-36 CALLE BRUMA DORADO PR 00646	COLLEGE COUNSELOR SUPERVISOR 40.00	55,341.	0.	0.
ISMAVETTE COTTO GARCIA URB. PARQUE DE TORRIMAR, CALLE 8, C-12 BAYAMON PR 00959	PROGRAM SUPERVISOR 40.00	52,742.	0.	0.

Total number of other employees paid over \$50,000 ☐ 5

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**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
SMITH DAWSON & ANDREWS 1150 CONNECTICUT AVENUE NW SUITE 105 WASHINGTON DC 20036	PROFESSIONAL SERVICES	82,000.
ANDRES MUNIZ 232 REY FERNANDO, LA VILLA DE TORRIMAR GUAYNABO PR 00969	PROFESSIONAL SERVICES	153,558.
Mari Carmen Aponte 4201 LINNEAN AVE. NW WASHINGTON DC 20008	PROFESSIONAL SERVICES	76,043.
PAC CONSULTING GERONA Q-21, CASTELLANA GARDENS CAROLINA PR 00983	PROFESSIONAL SERVICES	75,468.
KINESIS IT ACADEMY 1000 CALLE SAN ROBERTO, SUITE 1001, PROFESSIONAL OFFICE PARK SAN JUAN PR 00926	TECHNOLOGY SERVICES ALLIANCES	377,625.
Total number of others receiving over \$50,000 for professional services		6

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1 SCHOLARSHIPS GRANTED - THE ORGANIZATION'S MAIN OBJECTIVE IS TO PROVIDE SCHOLARSHIPS TO PUERTO RICO'S TALENTED YOUTH TO PURSUE UNIVERSITY EDUCATION ABROAD WITH THE COMPROMISE TO SERVE THE COMMUNITY. A total of 160 students benefited.	1,441,309.
2 BRIGHT STARS PROGRAMS (COLLEGE ACCESS PROGRAM)-PAY FOR COLLEGE PREPARATION TRAINING COURSES AND ADMITTANCE TESTS REVIEW FOR STUDENTS.	1,179,978.
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 SCHOLARSHIPS AND BRIGHTSTARS PROGRAMS ADMINISTRATION	204,619.
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	204,619.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.

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

1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	19,367.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	19,367.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
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	0.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0.
b	Program-related investments—total from Part IX-B	1b	204,619.
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	204,619.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	204,619.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2018:				
a Enter amount for 2017 only				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018:				
a From 2013	0.			
b From 2014	0.			
c From 2015	1,371,193.			
d From 2016	244,900.			
e From 2017	1,282,708.			
f Total of lines 3a through e	2,898,801.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$ 204,619.				
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	204,619			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,103,420.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see 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 to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	3,103,420.			
10 Analysis of line 9:				
a Excess from 2014	0.			
b Excess from 2015	1,371,193.			
c Excess from 2016	244,900.			
d Excess from 2017	1,282,708.			
e Excess from 2018	204,619.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a				
c 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				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon:				
a "Assets" alternative test—enter:				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test—enter $\frac{2}{3}$ of minimum investment return shown in Part X, line 6 for each year listed				
c "Support" alternative test—enter:				
(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				
(4) Gross investment income				

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

Jose. E. Fernandez Bjerg

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

See Supplementary Information Statement

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)**3. Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
MICHIGAN STATE UNIVERSITY 220 TROWBRIDGE ROAD EAST LANSING MI 48824 SCHOLARSHIPS TO STUDENTS *SCHED ATTACHED KINESIS, INC. SAN JUAN PR 00927	N/A	NC	EDUCATION AND SCHOLARSHIPS	61,500.
ROCKY MOUNTAIN INSTITUTE - PR SCHOOLS MICROGRIDS 2490 JUNCTION PLACE SUITE 200 BOULDER CO 80301	*SCHED ATTACHED	I	EDUCATION AND SCHOLARSHIPS Renewable Microgrid for PR Schools Project	1,379,809.
		NC		55,000.
Total			3a	1,496,309.
b Approved for future payment				
None				
Total			3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			14	0.	423,916.
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a _____					
	b _____					
	c _____					
	d _____					
	e _____					
12	Subtotal. Add columns (b), (d), and (e)				0.	423,916.
13	Total. Add line 12, columns (b), (d), and (e)					423,916.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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

- | | | | | |
|----------|--|--------------|------------|-----------|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| | (1) Cash | 1a(1) | | x |
| | (2) Other assets | 1a(2) | | x |
| b | Other transactions: | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | x |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | x |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | | x |
| | (4) Reimbursement arrangements | 1b(4) | | x |
| | (5) Loans or loan guarantees | 1b(5) | | x |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | | x |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | x |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below?
See instructions ☐ Yes ☐ No

Signature of officer or trustee

Date _____

Chairman
Title _____

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

P01424908

Firm's name ► JLM & CO., LLP

Firm's EIN ▶ 66-0479116

Firm's address ► 304 DOMENECH AVE

Phone no. (787) 764-6365

BAA

SAN JUAN, Puerto Rico

00918

Form **990-PF** (2018)

KINESIS, INC.

66-0727042

A STATEMENT ATTACHED TO AND MADE PART OF
US FORM 990-PF
FOR THE TAXABLE YEAR ENDED JUNE 30, 2019

PAGE 2, PART II, LINES 10b, 10c, AND 13

DESCRIPTION	FAIR MARKET VALUE 6/30/2018	FAIR MARKET VALUE 6/30/2019
<u>Line 10b</u>		
Common Stocks - Corporates	<u>\$ 1,290,234</u>	<u>\$ 1,037,224</u>
<u>Line 10c</u>		
Fixed income	5,532,761	4,742,472
Mutual funds	579,170	546,844
Hedge funds	<u>1,563,764</u>	<u>1,655,676</u>
	<u>7,675,695</u>	<u>6,944,992</u>
<u>Line 13</u>		
Private equity	<u>3,786,726</u>	<u>4,483,994</u>
TOTAL	<u>\$ 12,752,655</u>	<u>\$ 12,466,210</u>

Form 990-PF: Return of Private Foundation

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. Continuation Statement

Name and Address Information	Form Information	Submission Information	Restrictions
KINESIS, INC. 2000 CARR. 8177, SUITE 26, PMB 208 GUAYNABO, PR 00966 787-250-0033	Applications can be filed through the Kinesis, Inc. web page. Among documents to be submitted are admission letter, evidence of financial need, and transcript.	Mid April of each year.	Grade average point should be 3.5 or higher and should be admitted one of the 100 top universities.

Form 990-PF: Return of Private Foundation**Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** Continuation Statement

Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
SOCORRO JULIA PO BOX 7086 SAN JUAN, PR 00916-7086	MEMBER 10.00	0.	0.	0.
Dr. RAFAEL ARAGUNDE APARTADO 5062 CAYEY, PR 00737	MEMBER 10.00	30,500.	0.	0.
MARI CARMEN APONTE 4201 LINNEAN AVE. NW WASHINGTON, DC 20036	MEMBER 20.00	76,043.	0.	0.
		106,543.	0.	0.

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

KINESIS, INC

Employer identification number

66-0727042

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

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

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % 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 KINESIS, INC	Employer identification number 66-0727042
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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	OMEGA OVERSEAS INVESTMENTS, INC. PROFESSIONAL OFFICES PARK II, 1001 SAN ROBERTO ST. SUITE 101 SAN JUAN PR 00926	\$ 704,914.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	JOSE E. FERNANDEZ BJERG CALLE LILA 1717 URB. SAN FRANCISCO SAN JUAN PR 00927	\$ 305,086.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ABBVIE LTD PO BOX 3030 BARCELONETA PR 00617	\$ 200,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	ASAMBLEA LEGISLATIVA PO BOX 9022228 SAN JUAN PR 00902228	\$ 148,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	BARCELONETA WASTE TREATMENT PO BOX 601 BARCELONETA PR 006170601	\$ 109,250.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	RAFAEL A. VELEZ URB. COSTA DE ORO, D76 CALLE C DORADO PR 006462012	\$ 50,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KINESIS, INC

Employer identification number

66-0727042

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ADAM SINN 875 CARR 693, SUITE201 DORADO PR 00646	\$ 40,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	LCDO. JACOBO ORTIZ MURIAS METRO OFFICE PARK 8, CALLE 1 STE 308 GUAYNABO PR 009681719	\$ 35,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	NEW YORK CITY 909 THIRD AVENUE NEW YORK NY 10022	\$ 30,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	CHARLES SCHWAB 4700 ALLIANCE GATEWAY FWY FORT WORTH TX 76166	\$ 25,050.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	BLOOMBERG PHILANTROPIES 25 EAST 78TH STREET NEW YORK NY 10075	\$ 25,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	FUNDACION PLAZA DEL CARIBE PO BOX 364249 SAN JUAN PR 009364249	\$ 25,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KINESIS, INC

Employer identification number

66-0727042

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	KATHERINE JAMES FOUNDATION 295 PALMAS INN WAY, SUITE 104 PMB 363 HUMACAO PR 00791	\$ 25,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	MERCK POLARIS PRAIRIE INDUSTRIAL PARK STATE LAS PIEDRAS PR 00771	\$ 25,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	FUNDACION AIREKO P.O. BOX 2128 SAN JUAN PR 009222128	\$ 20,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	FUNDACION ANGEL RAMOS PO BOX 364208 SAN JUAN PR 009362408	\$ 20,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	SCOTIABANK PO BOX 362230 SAN JUAN PR 009362230	\$ 20,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	TARGET POINT INC. PO BOX 365047 SAN JUAN PR 009365047	\$ 15,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KINESIS, INC

Employer identification number

66-0727042

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	ROCK SOLID TECHNOLOGIES PO BOX 195599 SAN JUAN PR 009195599	\$ 12,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	ENRIQUE VILA DEL CORRAL PO BOX 11363 SAN JUAN PR 009221363	\$ 10,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	JUAN CARLOS FERNANDEZ 145 MASON ST. GREENWICH CT 06830	\$ 10,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	MIGUEL FERNANDEZ 1209 GARDNER AVE AUSTIN TX 78704	\$ 10,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	SOCIETY FOR HUMAN RESOURCES MANAGEMENT 1800 DUKE ST. ALEXANDRIA VA 22314	\$ 10,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	STRYKER GLOBAL SUPPLY PO BOX 329 ARROYO PR 00714	\$ 10,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KINESIS, INC

Employer identification number

66-0727042

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	UNILEVER DE PUERTO RICO PROFESSIONAL OFFICE PARK II, 1001 SAN ROBERTO ST. SAN JUAN PR 00923	\$ 10,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	VALIJA GITANA, INC PO BOX 8789, FERNANDEZ JUNCOS STATION SAN JUAN PR 009100789	\$ 6,600.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	AMGEN PO BOX 4060, ROAD 31, KM 24.6 JUNCOS PR 007774060	\$ 6,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	RAFAEL ESCALERA RODRIGUEZ PO BOX 364148 SAN JUAN PR 00936	\$ 6,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	ADRIEL LONGO 100 GRAND PASEOS BLVD., SUITE G-01 SAN JUAN PR 00926	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	CAPARRA CENTER ASSOCIATES, INC. PO BOX 9506 SAN JUAN PR 009089555	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KINESIS, INC

Employer identification number

66-0727042

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	EDGAR COLON NEGRON MONTEHIEDRA 247, REINA MORA SAN JUAN PR 00926	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	FE-RI CONSTRUCTION, INC. PO BOX 363136 SAN JUAN PR 009363136	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	FERNANDEZ-BERNAL FAMILY LLC URB. SANTA MARIA, 1893 CALLE NARCISO SAN JUAN PR 00927	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	JAMES & BARBARA CIMINO FOUNDATION PO BOX 363328 SAN JUAN PR 00936	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	MARI CARMEN APONTE RODRIGUEZ 4201 LINNEAN AVE. NW WASHINGTON DC 200083808	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	MARIA L. GONZALEZ INCLAN URB. SUCHVILLE 18 CALLE PRINCIPAL GUAYNABO PR 00966	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KINESIS, INC	Employer identification number 66-0727042
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Part I • **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	MARIA LUIS FERRE-RANGEL PO BOX 11924 SAN JUAN PR 009221924	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	JIM O'DROBINAK AND MRS. LIANA O'DROBINAK CULBREATH ISLES DR TAMPA FL 33629	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	LUIS ALBERTO FERRE RANGEL CITY VIEW PLAZA 48 CARR 165 SUITE 200 GUAYNABO PR 00968	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	PEDRO J. BEAUCHAMP, MD 100 PASEO SAN PABLO, SUITE 503 BAYAMON PR 009617028	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	RAFAEL A. BLANES GONZALEZ AA-4 GARDEN HILLS GUAYNABO PR 00966	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	RAFAEL ORTIZ 795 COLOMBUS AVE., APT 4A NEW YORK NY 10025	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KINESIS, INC	Employer identification number 66-0727042
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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
43	RICARDO ALEGRIA FF 3 BRUMA ST., DORADO DEL MAR DORADO PR 00646	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	RICARDO CARDONA PMB 240 425 CARR 693, SUITE 1 DORADO PR 006464802	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	SANJURJO SAMMY RAMOS CORDOVA PO BOX 364564 SAN JUAN PR 009364564	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	SUSHEEL KIRPALAMI 51 MADISON AVE. 22ND FLOOR NEW YORK NY 10010	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	THE LUIS A. FERRE FOUNDATION, INC. PO BOX 11924 GUAYNABO PR 00966	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	UNITED SURETY& INDEMNITY COMPANY PO BOX 2111 SAN JUAN PR 009222111	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KINESIS, INC

Employer identification number

66-0727042

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
49	UNIVERSAL INSURANCE PO BOX 71338 SAN JUAN PR 009368438	\$ 5,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KINESIS, INC	Employer identification number 66-0727042
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

(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 ZIP + 4

Relationship of transferor to transferee

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(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 ZIP + 4

Relationship of transferor to transferee

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(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 ZIP + 4

Relationship of transferor to transferee

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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

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

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
Fundraising activities	315,546.		
Students fees	125,495.		
Scholarship fees	115,150.		
Continued education fees	56,510.		
Total	612,701.		

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
PAYROLL AND OTHER MISC TAXES	110,591.			
Total	110,591.			

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
FEES AND DUES	2,529.			
OFFICE SUPPLIES	5,688.			
POSTAGE AND DELIVERY	394.		0.	0.
PROGRAM ACTIVITY EXPENSE	32,673.			
CONTINUED EDUCATION EXPENSE	16,700.			
SOFTWARE LICENSES	9,821.			
INSURANCE EXPENSE	5,500.			
MARKETING EXPENSE	69,875.			
Amortization	0.			
REPAIR AND MAINTENANCE	9,692.			
UTILITIES	10,057.			
HEALTH AND MEDICAL INSURANCE	51,223.			
LEASED EQUIPMENT	11,775.			
BANK CHARGES	8,689.			
STATE INSURANCE FUND	1,726.			
INTERNET AND COMMUNICATIONS	6,536.			
OTHER EXPENSES	37,274.			
BROKER COMMISSION	6,001.			
IN KIND DONATION	142,997.			

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
Total	429,150.		0.	0.

Name
KINESIS, INC

Employer Identification No
66-0727042

Asset Information:

Description of Property Securities
Business Code Exclusion Code
Date Acquired various How Acquired Purchased
Date Sold various Name of Buyer Various
Check Box, if Buyer is a Business . . . ☐
Sales Price 2,381,799 Cost or other basis (do not reduce by depreciation) 1,957,883
Sales Expense 0 Valuation Method Fair Market Value
Total Gain (Loss) 423,916 Accumulated Depreciation 0

Description of Property
Business Code Exclusion Code
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business . . . ☐
Sales Price Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss) Accumulated Depreciation

Description of Property
Business Code Exclusion Code
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business . . . ☐
Sales Price Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss) Accumulated Depreciation

Description of Property
Business Code Exclusion Code
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business . . . ☐
Sales Price Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss) Accumulated Depreciation

Description of Property
Business Code Exclusion Code
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business . . . ☐
Sales Price 0 Cost or other basis (do not reduce by depreciation) 0
Sales Expense Valuation Method
Total Gain (Loss) 0 Accumulated Depreciation

Totals:

Total Gain (Loss) of all assets 423,916
Gross Sales Price of all assets 2,381,799
Unrelated Business Income Business Code
Excluded by section 512, 513, 514 Exclusion Code
Related/Exempt Function Income 423,916

QuickZoom here to Form 990-PF, Page 1 ►
QuickZoom here to Form 990-PF, Page 12 ►

Name KINESIS, INC	Employer Identification No 66-0727042
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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
LCDO. JUAN BERRIOS	Legal services	204.			
JRGI Law, LLC	Legal Consultation	3,961.			
SMITH & DAWSON	LEGAL CONSULTATION	82,000.			
Total to Form 990-PF, Part I, Line 16a		86,165.			

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
JLM & Co., LLP	Audit	23,183.			
Total to Form 990-PF, Part I, Line 16b		23,183.			

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
BURKHART CONSULTING	CONSULTING - HIRING	50,816.			
PRIME POLICY GROUP	CONSULTING	47,017.			
PAC CONSULTING	CONSULTING	75,468.			
PEDRO RODRIGUEZ	PROFESSIONAL SERVICES	150.			
NORMA SOLER	PROFESSIONAL SERVICES	16,904.			
KINESIS IT ACADEMY	TECHNOLOGY SERVICES	377,625.			
JAVIER TORRES	PROFESSIONAL SERVICES	500.			
ANDRES MUNIZ COLON	CONSULTING-DEVELOPMENT	153,558.			
CESAR DE LA CRUZ	PROFESSIONAL SERVICES - DEVELOPMENT	2,495.			
MARIA E. SOTO	PROFESSIONAL SERVICES - DEVELOPMENT	9,700.			
	See Line 16c - Other Professional Fees	42,341.			
Total to Form 990-PF, Part I, Line 16c		776,574.			

Additional information from your 2018 Federal Exempt Tax Return

Form 990-PF Part I Line 16a-c Legal and Professional Fees

Line 16c - Other Professional Fees

Continuation Statement

Line 16c Name	Line 16c Type Svc	Line 16c Book amount	Line 16c Net invest inc	Line 16c Adjusted net inc	Line 16c Chrtbl dsbrsmnts
PEGGY VANKIRK	PROFESSIONAL SERVICES - DEVELOPMENT	6,000.			
DESIREE MORALES DIAZ	PROFESSIONAL SERVICES	8,113.			
GABRIELA AULET	PROFESSIONAL SERVICES	4,800.			
OUTSOURCING SOLUTION INTERNATIONAL	PAYMENT PROCESSING FEES	8,296.			
JOSE VEGA	PROFESSIONAL SERVICES	80.			
JOSE MAYSONET	PROFESSIONAL SERVICES	80.			
MARIBEL RIVERA	PROFESSIONAL SERVICES	500.			
YENNIFER SILFA	PROFESSIONAL SERVICES	75.			
CARIBBEAN SCHOOL PONCE	CONSULTING	352.			
CECILE VELEZ	CONSULTING	8,925.			
COLEGIO EVANGELICO CAPITAN CORREA	PROFESSIONAL SERVICES	420.			
CYNTHIA PEREZ REYES	PROFESSIONAL SERVICES	150.			
HUMAN CAPITAL CONSULTING	CONSULTING HUMAN RESOURCES	4,550.			
Total		42,341.			

KINESIS, INC.

66-0727042

CONTRIBUTIONS TOTALING \$5,000 OR MORE

A STATEMENT ATTACHED TO AND PART OF THE
SCHEDULE B, FORM 990-PF
FOR THE TAXABLE YEAR ENDED JUNE 30, 2019

Donor	Amount
OMEGA OVERSEAS INVESTMENT	\$ 704,914 00
JOSE E FERNANDEZ BJERG	305,086 00
ABBVIE LTD	200,000 00
Asamblea Legislativa	148,000 00
Barceloneta Wastewater Treatment	109,250 00
RAFAEL A VELEZ-DOMINGUEZ	50,000 00
Adam Sinn	40,000 00
LCDO JACOBO ORTIZ MURIAS	35,000 00
New York City	30,000 00
CHARLES SCHWAB	25,050 00
BLOOMBERG PHILANTHROPIES	25,000 00
FUNDACION PLAZA DEL CARIBE	25,000 00
KatherineJames Foundation	25,000 00
Merck Polaris	25,000 00
FUNDACION AIREKO	20,000 00
Fundacion Angel Ramos	20,000 00
SCOTIABANK	20,000 00
Target Point, Inc	15,000 00
Rock Solid Technologies	12,000 00
ENRIQUE VILLA DEL CORRAL	10,000 00
JUAN CARLOS FERNANDEZ	10,000 00
MIGUEL FERNANDEZ	10,000 00
SOCIETY FOR HUMAN RESOURCE MANAGEMENT	10,000 00
STRYKER GLOBAL SUPPLY	10,000 00
UNILEVER DE PUERTO RICO	10,000 00
VALIJA GITANA INC	6,600 00
AMGEN	6,000 00
Rafael Escalera Rodriguez	6,000 00
Adriel Longo	5,000 00
CAPARRA CENTER ASSOCIATES LLC	5,000 00
EDGAR COLON NEGRON	5,000 00
FE-RI CONSTRUCTION INC	5,000 00
Fernandez-Bernal Family LLC	5,000 00
JAMES & BARBARA CIMINO FOUNDATION	5,000 00
MARI CARMEN APONTE RODRIGUEZ	5,000 00
MARIA L GONZALEZ INCLAN	5,000 00
MARIA LUISA FERRE-RANGEL	5,000 00
Mr Jim O'Drobinak and Mrs Liana O'Dro	5,000 00
MR Luis Alberto Ferre Rangel	5,000 00
Pedro J Beauchamp, MD	5,000 00
RAFAEL A BLANES GONZALEZ	5,000 00
RAFAEL ORTIZ	5,000 00
RICARDO ALEGRIA	5,000 00
RICARDO CARDONA GILESTRA	5,000 00
SANJURJO SAMMY RAMOS CORDOVA	5,000 00
SUSHEEL KIRPALAMI	5,000 00
THE LUIS A. FERRE FOUNDATION INC	5,000 00
UNITED SURITY & INDEMNITY COMPANY	5,000 00
UNIVERSAL INSURANCE	5,000 00
	<u>\$ 2,017,900 00</u>