For Paperwork Reduction Act Notice, see instructions.

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. 1545-0047

Open to Public Inspection

		idar year 2019 or lax year beginning		, 201	o, anu e			, 20
Na	me of fou	ndation			İ	A Employe	r identification numbe	er
Tu	rimiquir	re Foundation					04-3286660	
Nu	mber and	street (or P O box number if mail is not delivered to street address)		Room	1/surte	B Telephon	e number (see instructi	ons)
16	Cresce	nt Street			i		617-721-9445	
		, state or province, country, and ZIP or foreign postal code				C If exempt	ion application is pend	ıng, check here▶
Ca	mbrida	e, Massachusetts, USA, 02138			ł			
_		<u> </u>	n of a former r	oublic	charity	D 1. Foreign	n organizations, check	here ▶
	-	☐ Final return ☐ Amended			·····		-	
	4	☐ Address change ☐ Name cha					n organizations meeting here and attach compl	-
ਮ ਮ	Chack	type of organization: Section 501(c)(3) exempt p		ation			foundation status was	_
クロ		on 4947(a)(1) nonexempt chantable trust Other tax			tation		07(b)(1)(A), check here	
屵		narket value of all assets at J Accounting method						
•		f year (from Part II, col. (c),	i. 💽 Casii		CCIUAI		ndation is in a 60-mont ction 507(b)(1)(B), checl	
	line 16		a on each back	<u></u>		under ser	50011 307 (D)(1)(D), G11601	Kilere .
			le on cash basi	3./				(d) Dh
	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p		(b) Net	investment	(c) Adjusted net	(d) Disbursements for chantable
		the amounts in column (a) (see instructions).)	books	rei	in	come	income	purposes (cash basis only)
	1				734 - 173 7 - 174	A. S. S.		
	1	Contributions, gifts, grants, otc., received (attach schedule)	··· ··· · · · · · · · · · · · · · · ·				おを得ける。他 できる	
	2	Check ► ☐ If the foundation is not required to attach Sch. B	falas Como	THE STATE OF	SEA SE	A. J. J. B.	Participant desired	
	3	Interest on savings and temporary cash investments		70		70	70	L ating with the st
	4	Dividends and interest from securities		0				i ratuatid
	5a	Gross rents		0			·	code de la
	b	Net rental income or (loss)	ar recolision				Special property	がらいってきれ
- e	6a	Net gain or (loss) from sale of assets not on line 10			_		said distributions	p. office 'pi' u
evenue	b	Gross sales price for all assets on line 6a			等等等	Ser Property	W-michigh	Franciscopies and Franciscopies
ة د	7	Capital gain net income (from Part IV, line 2)	इन्ड रहे के कार	-			が気がいるかいはませ	Secretary of the second
	8	Net short-term capital gain	Ma ermina			AND THE		actional as
•	9	Income modifications	and the same of the			Sentar'	· ···	die a saven ale
	10a	Gross sales less returns and allowances	in the team				wife for the same	
2021	b	Less: Cost of goods sold	ar dem value	garag.			Accelerations	a which are the same
7	C	Gross profit or (loss) (attach schedule)		0	M. S.	and Low		Same and
ග	11	Other income (attach schedule)		0				mand-minated
~	12	Total. Add lines 1 through 11	20	69594				- Same
\Box 8	13	Compensation of officers, directors, trustees, etc.		0		I RE	CENTER	
JO Ses	14	Other employee salanes and wages		0			OLIVED	
NNED Expen	15	Pension plans, employee benefits		0		181		
및 X	16a	Legal fees (attach schedule)		0		SE SE	P 2 8 2020	Ö
		Accounting fees (attach schedule)		0				S
₹≩	C	Other professional fees (attach schedule)		0		<u>UG</u>	DEN, UT	=
SCA!	17	Interest		0				
<u> </u>	18	Taxes (attach schedule) (see instructions)		0				
dair dair	19	Depreciation (attach schedule) and depletion		0				The way with the contract of t
֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	20	Occupancy		0				
, 4	21	Travel, conferences, and meetings		0				·
<u></u>	22	Printing and publications		552				
. 0	23	Other expenses (attach schedule)		11116				·
:	24	Total operating and administrative expenses.	1					
- Fra	1	Add lines 13 through 23		11668		, ,		
Operating and Administrative	25	Contributions, gifts, grants paid	28	32992	ب عدده	a Dane	Edward Man Takes	282992
	26	Total expenses and disbursements. Add lines 24 and 25	29	94660				294660
	27	Subtract line 26 from line 12:			10000		The state of the s	The State of the S
	a	Excess of revenue over expenses and disbursements		วีบีซ์ช)	1,00	NS. ETC. "Q		ELSE SYLES
	b	Net investment income (if negative, enter -0-) .	The state of	3		70	Hall San Louis	الم الماسية المداح
	C	Adjusted net income (if negative, enter -0-)	and suffering		بالمعالمة	i a mazda		السلام سالمضيح
Fo	r Papen	work Reduction Act Notice, see instructions.		Cat. N	lo. 11289)	<	Fo	rm 990-PF (2019)

Cat. No. 11289X

Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	19547	19666	19666
	2	Savings and temporary cash investments	144285	115700	115700
	3	Accounts receivable ▶	-		
		Less: allowance for doubtful accounts ▶	}		
	4	Pledges receivable ► Less: allowance for doubtful accounts ►			- (
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	<u>e</u>	,	100
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			-
ď	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis	11.20 W. W. W. W.	Уу , н ;	- · · · · · · · · · · · · · · · · · · ·
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment hasis ▶	, • ,		n 1 3- 1
	1	Less: accumulated depreciation (attach schedule) ▶		,	
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item I)	163832	135366	135366
	17	Accounts payable and accrued expenses			}
Ø	18	Grants payable	41372	37972	
ŧ	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			·]
Ē	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	41372	37972	
es		Foundations that follow FASB ASC 958, check here ▶ □			
Balances		and complete lines 24, 25, 29, and 30.			
ala.	24	Net assets without donor restrictions	122460	97394	
	25	Net assets with donor restrictions			<u> </u>
힏		Foundations that do not follow FASB ASC 958, check here ▶ □			
Fun		and complete lines 26 through 30.			<i>'</i>
ō	26	Capital stock, trust principal, or current funds			<u> </u>
E	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
se	28	Retained earnings, accumulated income, endowment, or other funds			l
As	29	Total net assets or fund balances (see instructions)	122460	97394	·- · ·
Net Assets or	30	Total liabilities and net assets/fund balances (see			Į
		instructions)	163832	135366	
_	rt III	Analysis of Changes in Net Assets or Fund Balances	·	· - · · · · · · · · · · · · · · · · · ·	
1		Il net assets or fund balances at beginning of year-Part II, colu			
_		of-year figure reported on prior year's return)			122460
2		er amount from Part I, line 27a			(25066)
3					
4		lines 1, 2, and 3		4	97394
5	Decr	reases not included in line 2 (itemize) ► If net assets or fund balances at end of year (line 4 minus line 5)—	Dod II ook /-\ '	5	
	ıota	il riet assets or rund dalances at end of year (line 4 minus line 5)—I	rari II, column (b), lin	e 29 6	97394

Part	w Sabital Gains and	a posses for lax offitivestif	ient inc	UIIIE				
		nd(s) of property sold (for example, real ease; or common stock, 200 shs. MLC Co			(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr.)	(d) Date sold (mo., day, yr.)
1a	N/A							
b								48.4
С								
d								
е	<u>.</u>		· · · · · · · · · · · · · · · · · · ·					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ise of sale			n ôr (loss) f) minus (g))
а								
b								····
С								
<u>d</u>								
е							······	
	Complete only for assets sho	owing gain in column (h) and owned	by the fou	ndation	on 12/31/69.		(I) Gains (Col	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col	of col (i) (i), if any			t less than -0-) or rom col (h))
а								
b								
С					Ţ.			
đ								
е								
2	Capital gain net income o	rmercaonariossi / ~ ·	also ente		t I, line 7	2		
3	Net short-term capital gai	in or (loss) as defined in sections	1222(5)	and (6):	· •			······································
		I, line 8, column (c). See instru						
						3		
Part		ler Section 4940(e) for Redu				Inco	me	
Was t		section 4942 tax on the distribu				oase p	enod?	☐ Yes ☐ No
1		ount in each column for each year				aking	any entries	
<u> </u>	(a)	- T	<u> </u>	Cilibild			uny critico.	(d)
Cale	Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Ne	t value of	(c) nonchantable-use as	ssets		ribution ratio divided by col (c))
	2018		8,813		14	9,446		1.06268
	2017		0,409			1,949		0.62894
	2016	-	7,708			7,391		1.34344
	2015		7,536			8,224		0.79296
	2014		4,247			6,149		0.54534
	2014		4,247]			0,143	··	0.34334
2	Total of line 1, column (d)					. [2	4.3734
3		for the 5-year base period-div				by	į.	
	the number of years the fo	oundation has been in existence	if less th	an 5 ye	ars	.	3 .	0.8747
						- 1		•
4	Enter the net value of non	charitable-use assets for 2019 fi	rom Part	X, line 5	5	. [4	147,355
	• '					ľ	!	
5	Multiply line 4 by line 3					. [5	128,887
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				6	0.70
-					_	ŀ		
7	Add lines 5 and 6					. }	7	128,888
8		ons from Part XII, line 4				. [8	294,660
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box in	Part VI,	line 1b,	, and complete t	hat pa	art using a 1	% tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		•	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	ļ		0.70
	here ▶ 🗹 and enter 1% of Part I, line 27b	,		-
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	- 	-	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
3	Add lines 1 and 2	L		0.70
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.70
6	Credits/Payments:		_	_ '
a	2019 estimated tax payments and 2018 overpayment credited to 2019			
þ	Exempt foreign organizations—tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
_d	Backup withholding erroneously withheld			
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			0.70
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			
11 Post	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 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	163	140
L	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		 	-
b	instructions for the definition	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	,	Ι.	7
	published or distributed by the foundation in connection with the activities.		 	
C	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1.		
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	1.		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	.	١.	ے ا
_	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		1
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		1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		1
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
	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:	1	1	
	By language in the governing instrument, or	-		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	ы		
	conflict with the state law remain in the governing instrument?	6	1	<u> </u>
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	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	ŀ		
	Massachusetts			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	<u> </u>		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	<u> </u>
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"			ŀ
	complete Part XIV	9	/	ļ
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	/	L

Part.	VII-A	Statements Regarding Activities (continued)				
				1 1	Yes	No
11 `		me during the year, did the foundation, directly or indirectly, own a controlled of section 512(b)(13)? If "Yes," attach schedule. See instructions	entity within the	11		1
12		oundation make a distribution to a donor advised fund over which the foundation ad advisory privileges? If "Yes," attach statement. See instructions	n or a disqualified	12		1
13	Did the fou	undation comply with the public inspection requirements for its annual returns and exe	mption application?	13	1	
		address www.turimiquire.org				
14		*		7-721-		
4-		at ► 16 Crescent Street, Cambridge, MA		2138-1	908	
15	and enter	947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —ch the amount of tax-exempt interest received or accrued during the year	▶ 15	· ·	•	>
16	over a bar	ne during calendar year 2019, did the foundation have an interest in or a signature nk, securities, or other financial account in a foreign country?		16	Yes	No ✓
		nstructions for exceptions and filing requirements for FinCEN Form 114. If "Yes,"	enter the name of	- T	4. 25.3	50 Z
5		n country >		<u>ا ن</u>	-+e	}
Part	VII-B	Statements Regarding Activities for Which Form 4720 May Be Requi		<u> </u>		
		4720 if any item is checked in the "Yes" column, unless an exception applie	5.	-	Yes	No
1a	_	e year, did the foundation (either directly or indirectly):		-		•
		ge in the sale or exchange, or leasing of property with a disqualified person? . w money from, lend money to, or otherwise extend credit to (or accept it from)	. ∐Yes ☑No	· -		[بي. ا
		alified person?	· TYes No	ŀ	-	
	•	th goods, services, or facilities to (or accept them from) a disqualified person? .		ļ		
		ompensation to, or pay or reimburse the expenses of, a disqualified person?	. Tyes No	- 50	G	
	(5) Transf	fer any income or assets to a disqualified person (or make any of either available tenefit or use of a disqualified person)?				, ,
		to pay money or property to a government official? (Exception. Check "No" if t			ıi i	
	founda	ation agreed to make a grant to or to employ the official for a period affination of government service, if terminating within 90 days.)	er			
b	If any ans	swer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the excep	tions described in	i	£	
	-	ns section 53.4941(d)-3 or in a current notice regarding disaster assistance? See it ions relying on a current notice regarding disaster assistance, check here		1b	,	2 14
Ċ	_	oundation engage in a prior year in any of the acts described in 1a, other than e	-	v	-	· _
				1c		-
2		failure to distribute income (section 4942) (does not apply for years the foundation defined in section 4942(j)(3) or 4942(j)(5)):	tion was a private	_f	0	. [
a	At the end	d of tax year 2019, did the foundation have any undistributed income (Part XIII, lin	es	۵	•	-
		e) for tax year(s) beginning before 2019?	. Yes 🗸 No	3		-
	If "Yes," li	ist the years ▶ 20 , 20 , 20 , 20, 20		7	,	*
b		any years listed in 2a for which the foundation is not applying the provisions of		•	-7.	
		o incorrect valuation of assets) to the year's undistributed income? (If applying se			7.	
	-	isted, answer "No" and attach statement—see instructions.)		2b		1
С		visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list t	ne years here.	-		
3a	Did the fo	pundation hold more than a 2% direct or indirect interest in any business enterpri	Se		خيد	72.7
V.		e during the year?	. Yes 🗸 No		73 4 7	-
b	_	did it have excess business holdings in 2019 as a result of (1) any purchase by		a		=
IJ		ed persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period] =	_	[] {
		ioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest;] ,	-	"
		15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to		<u> </u>		
	foundation	n had excess business holdings in 2019.)		3b		
		undation invest during the year any amount in a manner that would jeopardize its cha		4a		1
		undation make any investment in a prior year (but after December 31, 1969) that of				
	chantable	purpose that had not been removed from jeopardy before the first day of the tax year	beginning in 2019?	4b		✓

Par	TABLE Statements Regarding Activities	s for W	/hich Form	4720	May Be R	equire	ed (conti	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:						(April of	Yes	No
	`(1) Carry on propaganda, or otherwise attempt t						Yes Yes	✓ No		-	-
	(2) Influence the outcome of any specific public		on (see secti	on 495	5); or to ca	arry on,					
	directly or indirectly, any voter registration dr						☐ Yes	✓ No	130		
	(3) Provide a grant to an individual for travel, stu						· U Yes	✓ No		*****	
	(4) Provide a grant to an organization other than			-					375		
	section 4945(d)(4)(A)? See instructions						Yes	✓ No	A CONTRACTOR		
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to o	childrer	or animals?				∐Yes	 ✓ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current no							scnbed	5b		
	Organizations relying on a current notice regarding	-						▶ □	200	72.20g	100000
C							:		7	200	
	because it maintained expenditure responsibility		-				Yes Yes	☐ No	Charles and		
_	If "Yes," attach the statement required by Regula								200		
6a	Did the foundation, during the year, receive any		-		, to pay pro	emiums	_			#12 ch	
	•						∐Yes	_ ∠ No	-	ست	
b	Did the foundation, during the year, pay premium	ns, aire	ctly or indired	ctiy, on	a persona	benetr	contract		6b	Page 19 Charl	▼
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation	a narh	to a probibit	ad tav e	haltar trans	action?	□ Vos	[Z] No	AANT.	1	200
, a b	If "Yes," did the foundation receive any proceeds								7b	-	لتستخد
8	Is the foundation subject to the section 4960 ta								要手	ন্কে	per u
	remuneration or excess parachute payment(s) du							 ✓ No		-	
Par	t VIII Information About Officers, Direc	tors, 1	rustees, Fo	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found					,			•		
-	(e) Name and address	hou	e, and average rs per week ed to position	(lf r	mpensation tot paid, ter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Exper other a	nse ac allowar	
See at	ttached listing.										
	MANAGEMENT IN THE STATE OF THE	-			· · · · · · · · · · · · · · · · · · ·						
								•			
									-		
2	Compensation of five highest-paid employed	es (oth	er than thos	se incl	uded on li	ne 1-	see instr	uctions	s). If no	one,	enter
	"NONE."	•									
			(b) Title, and a	verage			(d) Contribu	utions to	(-) E		
	(a) Name and address of each employee paid more than \$50,00	10	hours per v devoted to pe	veek -	(c) Compe	nsation	employee plans and	deferred	(e) Exper other a	allowar	ices
							compens	sation			
None.							i				
					<u>.</u>				<u></u>		
				į							
Total	number of other employees paid over \$50,000 .							. ▶		0	
										N_DE	

	and Contractors (continued)	
3 Five hi	ghest-paid independent contractors for professional services. See instructions. If none, enter "NON	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Vone.		
		
	of others receiving over \$50,000 for professional services	0
Part IX-A	Summary of Direct Charitable Activities	т
List the found organizations	ation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 See attac	hed description.	
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	<u> </u>
Describe the t	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 None.		
2		
All other progr	am-related investments. See instructions	
3 None.		
Total. Add line	es 1 through 3	

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	ign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	, de reg	
а	Average monthly fair market value of securities	1a	
Ь	Average of monthly cash balances	1b	149,599
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	149,599
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	149,599
4	Cash deemed held for chantable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	2244
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	147,355
6	Minimum investment return. Enter 5% of line 5	6	7368
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► ✓ and do not complete this part.)	oundatio	าร
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
Part	XII Qualifying Distributions (see instructions)	·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	o article	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	294660
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	, ,	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	294660
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	0.70
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	294659
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

	`	(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2019:			 	
а	Enter amount for 2018 only			0	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:		,	,	
a	From 2014	Į			-
b	From 2016	1			
d	From 2017				
8	From 2018				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$				
a	Applied to 2018, but not more than line 2a .			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		-
c	Treated as distributions out of corpus (Election required—see instructions)	o		· · ·	• "
d	Applied to 2019 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	o			o
<u>6</u>	Enter the net total of each column as indicated below:				-
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		3 (
С	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		o		2
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			O	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				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 2014 not				
9	applied on line 5 or line 7 (see instructions). Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	U	+		
10	Subtract lines 7 and 8 from line 6a	0			
a		'			
b	Excess from 2016				
C	Excess from 2017				}
d	Excess from 2018		·		
e	Excess from 2019	ľ	Ĭ		

Part [*]	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for					
b	Check box to indicate whether the four		•		ection 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	each year listed	70	41	35	36	182
b	85% of line 2a	60	35	30	31	155
C	Qualifying distributions from Part XII,					
	line 4, for each year listed	294,660	158,814	70,409	157,709	682,160
d	Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	294,660	158,814	70,409	157,709	; 682,160
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"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 $^2/_3$ of minimum investment return shown in Part X, line 6, for each year listed	4936	5006	3750	. 3933	17,625
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				ne foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		ıs.)	 		
1	Information Regarding Foundation					
а	List any managers of the foundation value before the close of any tax year (but of					by the foundation
	before the close of any tax year (but o	rily if they have co	mundated more the	ari \$5,000). (See Si	scalon 507 (a)(2).)	
None b	List any managers of the foundation	who own 1004 or	more of the stee	k of a comparation	/or on oqually las	ran portion of the
b	ownership of a partnership or other er					ge portion of the
None 2	Information Regarding Contribution	Grant Gift Loa	n Scholarship et	to Programs:		
~	Check here ► ✓ If the foundation			-	organizations and	does not accept
	unsolicited requests for funds. If the fo	•	•		-	•
	complete items 2a, b, c, and d. See in		j, g. a, e.e., .		J.	,
а	The name, address, and telephone nu	·	ress of the persor	to whom applica	tions should be ad	dressed:
-	The name, address, and telephone na			Tto Wilom applica		
b	The form in which applications should	be submitted and	information and r	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw	ards, such as by	geographical are	eas, chantable fie	lds, kinds of inst	itutions, or other

Part XV Supplementary Information (continued)

3	Grants and Contributions Paid During t	the Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid during the year				
N/A					
					İ
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b	Total	<u> </u>		▶ 3 .	a
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N/A					
					ļ
					,
	Total			> 3i	b c

	rt X\	VI-A Analysis of Income-Producing Ac	ctivities				
Ente	er gro	oss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemple function income (See instructions.)
1		gram service revenue:					
	а		-				
	b		<u> </u>		 		
	C .		<u></u>		+		
	ď		<u> </u>			-	
	e		<u> </u>				
		Fees and contracts from government agencies	ļ				
2	-	mbership dues and assessments					
3		rest on savings and temporary cash investments			14	70	
4		idends and interest from securities			 	,,,	
5		rental income or (loss) from real estate:	3. J - 7. 7	4	· - v	, a	. 4 2 4
•		Debt-financed property			<u> </u>		
		Not debt-financed property	· · · · ·				
6		rental income or (loss) from personal property					
7		er investment income			 		
8		n or (loss) from sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·			
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory		• • • • • • • • • • • • • • • • • • • •	1	· · · · · · · · · · · · · · · · · · ·	
11		er revenue: a					
	b				1		
	C				I		
	d.		_				
	е						
		ototal. Add columns (b), (d), and (e)	7 . r. s	(· ^<	70	
						13	70
		ksheet in line 13 instructions to verify calculation	'				
	rt X\	/I-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
Lin				<u>-</u>			
	e No. ▼			orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the tions.)
				orted in column n by providing fur	(e) of Part XVI ands for such purp	-A contributed in oses). (See instruc	nportantly to the
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI nds for such purp	-A contnbuted ir oses). (See instruc	nportantly to the
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI nds for such purp	-A contributed in oses). (See instruc	nportantly to the
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		rted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		rted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		rted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column in by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column in by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column in by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column n by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column hyproviding fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	
		Explain below how each activity for which accomplishment of the foundation's exempt pur		orted in column by providing fur	(e) of Part XVI	-A contributed in oses). (See instruc	

	·	Organizati	ons									
1	ın s	ection 501(c) (c		engage in any of the follo 501(c)(3) organizations)							Yes	No
	_	nizations?				_				.	'	
а			porting foundation to	a noncharitable exempt	torganization	of:				1 443		
	(1) (• •		1a(1)		√
.		Other assets . er transactions:								1a(2)	\vdash	. /
D			a nanahartahla aya	mot organization						45/41		ئىد
			a nonchantable exe				• •	• •		1b(1)		
				ible exempt organization rassets				• •		1b(2)		√
								• •	• •	1b(3)	-	<u> </u>
			rrangements				• •			1b(4)	_	√
		oans or loan gua						• •		1b(5) 1b(6)		1
С				its, other assets, or paid			• •			10(6)		1
				s," complete the following		Column (h)	· ·	dalu	· ·	_	foir m	
u				ces given by the reporting								
				ement, show in column (
(a) Line		(b) Amount involved		antable exempt organization		ption of transfe						
	_	•••			(4		,		,		<u></u>	
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				' 				. ''.			_	
				filiated with, or related		re tax-exe	mpt c	organi	zations	;		
				ction 501(c)(3)) or in sect	on 527?					☐ Ye	s 🔲	No
b	If "Ye		following schedule.	······								
		(a) Name of organ	ization	(b) Type of organiza	ition	·· - · · · · · · · · · · · · · · · · ·	(c) De	scriptio	n of relat	onship		
				 								
												
				<u> </u>								
	1 11-4		4-1	446						·		
Sign	Corre	er penames of pegury, i ect, and complete. Deck	deciare that I have examined aration of preparer (other tha	d this return, including accompany in taxpayer) is based on all informa	ring schedules and Ition of which prepa	statements, and irer has anv kno	i to the wiedge.	best of	my knowl	edge and l	belief, it	is true,
		Comme D	Pornakou	AFTON		•	Ū			IRS discu preparer s		
Here		nature of officer or trus	WXXXVIKUXXVV)	7500 (4) ADAO	President Title					uctions (
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Paid		i illiv rype preparer	3 ndille	Preparer's signature		Date			< □ f	PTIN		
Prepa		 		1		<u>.</u> ,			mployed	<u> </u>		
Use (Only	Firm's name						EIN ▶	•			
		Firm's address ▶					Phone	e no				

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

Turimiquire Foundation

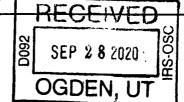
Form 990-PF (2019)

EIN: 04-3286660

July, 2020

Part IX-A,

Summary of Direct Charitable Activities in 2019



1) Family Planning Medical Services: \$250,824

Number of New (Additional) Women Served	Total Number of New and Successive Patient Visits	Hormonal Contraception Distributed: Pills, Injections, Implants	IUDs placed	Tubal Sterilizations
4870	14,609	5726	993	1274

Reproductive Health Educational Workshops	# Participants
100	1532

2) Humanitarian Medical Assistance: \$29,934

We have expanded our portfolio of medical services to include a selection of mainly ambulatory surgical procedures like hernia repair, biopsies, and laparoscopic diagnoses, as well as orthopedic, OB/gyn, pediatric, and oncological consultations and interventions for low-income patients who can no longer count on the public health system. In 2019, we were able to repair 152 hernias, and perform a small number of cesarean sections, oncological and orthopedic diagnoses and biopsies as well. We also offer access to CAT scans, ENT, ophthalmological, pediatric and other consultations, as these services fail in the public sector.

3) Rural Assistance and Sustainable Development, Eco-Agriculture: \$1470

This hands-on directed assistance applies to approximately 80 families, benefiting more than 400 family members in all, with a small model farm offering community participation in sustainable land use and ecoagriculture, introduction of new fruit and other tree crops, alternative (solar) energy and water resource projects, housing and infrastructure assistance, family emergencies and micro enterprise. NOTE: This program is now primarily funded through local revenue in Venezuela via our sister (independent) Venezuelan non-profit Fundación ServYr and supplemented by the small amount of assistance noted here from our Turimiquire funds.

4) Brito Community Center and Rural Education: \$764

Our community center is the base of our rural programs, and houses a small educational computer center, with a small primary and high school library. The center offers scholarships for up to 60 rural high school students and 25 community college students who have graduated in our high school program, along with subsidized school supplies. We assist the remote State primary-through-high school with ten teachers and 100+ students, and the local rural kindergarten that we founded with the State in 2001. In the nearby city of Cumana, we have a small computer and student center with Internet for our rural scholarship students and other low-income urban and rural students. NOTE: This program is now primarily funded through local revenue in Venezuela via our sister (independent) Venezuelan non-profit *Fundación ServYr* and supplemented by the small amount of assistance noted here from our Turimiquire funds.

EIN: 04-3286660

Part VIII. I. Board Members, Officers, Addresses, Compensation

Name and Address	Title & Average Hours Week	Compensation	Employee Benefits Plan Contribution	Expense Account
Steven Bloomstein, Apartado 295 Cumaná 6101-A Edo. Sucre, Venezuela	President 30	0	0	0
William W. Bloomstein 16 Crescent Street Cambridge, MA 02138 USA	Secretary/ Treasurer 2	0	0	0
Robert Albert. Jr. Apartado 295 Cumaná 6101-A, Edo. Sucre, Venezuela	Manager Rural Programs 5	0	0	0
Lesley Coulton Alpert 653-24 Southport St. Toronto, Ontario M6S 4Z1 Canada	Director Medical 1	0 ′	0	0
Steven Morgan 104 Landing Drive Chapel Hill, NC 27514 USA	Director 1	0	0	0

NOTE: All officers and board members serve as volunteers, without pay or benefits of any kind. Each works part-time, putting in whatever time is necessary. A small percentage of Board Member expenses incurred are reimbursed and accounted under administrative costs. Minor program costs incurred by Board Members are reimbursed and accounted for under each program. None are paid staff members.

Turimiquire Foundation

Form 990-PF (2019)

EIN: 04-3286660 July, 2020

Part I.1. Contributions

See Part VII. A.10.

All contributors who gave \$5000 or more are listed in Schedule B attached.

There were no non-cash contributions of \$5000 or more.

(Part I.18): Excise Tax of \$0.41 paid in 2019 (for 2018) is included in Part I.23, as part of

General Office, banking and administrative costs

Part I.22: Printing and publications used for hardcopy and digital

reports and fund raising, and website maintenance and updates \$552

Part I.23: General Office, banking and administrative costs,

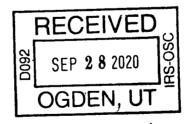
including Excise Tax of \$0.41 paid in 2019: \$11,116

Part II.16, Total Assets

These sums add up our ending balances in our combined **Bank of America** accounts plus **PayPal**, on Dec. 31st, 2018, and on Dec. 31st, 2019.

Part II.18, Grants Payable

The Foundation owed \$37,972 to ongoing programs in Venezuela at the end of 2019. These expenses pertain primarily to medical facilities which typically bill us on a quarterly basis; for contraceptives which we have ordered going forward, and to private sector doctors. The complex and unpredictable currency control system which the current Venezuelan regime imposes, leads to calculating and paying the actual costs in dollars after all expenses are summed up in the local currency and converted at the end of the year. Clinic and various program expenses accumulated over the entire year are often not completely accounted and paid until the first and second quarters of the following year. The year 2019 was additionally characterized by "hyperinflation", generating delays in calculation of fair debt accumulated in our other field programs, delaying some payment until now over several quarters in 2020.



Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

Employer identification number

Turimigi	uire Foundation			04-3286660			
Organization type (check one):							
Filers o	f:	Section:					
Form 990 or 990-EZ		☐ 501(c)() (enter number) organization				
		4947(a)(1) no	nexempt charitable trust not treated as a private for	undation			
		527 political	organization	RECEIVED			
Form 99	90-PF	√ 501(c)(3) exe	mpt private foundation	MECEIVED			
		4947(a)(1) no	nexempt charitable trust treated as a private foundation	SEP 2 8 2020 S			
		☐ 501(c)(3) taxa	able private foundation	OGDEN, UT			
	only a section 501(c)(7	•	eneral Rule or a Special Rule. iization can check boxes for both the General Rule a	and a Special Rule. See			
Genera	l Rule						
Ø	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 33½% 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, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, 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			the General Rule and/or the Special Rules doesn't fi				

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).

Washington, DC 20037

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization Employer identification number **Turimiquire Foundation** 04-3286660 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) (d) Name, address, and ZIP + 4 Total contributions Type of contribution No. 1 Elizabeth Gilmore Person \square Payroll 30,000 Noncash 39 W. 11th St. (Complete Part II for noncash contributions.) New York, N.Y. 10011 (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 2 Advisors Charitable Gift Fund Person \square **Pavroll** 10,000 Noncash 12 Gill Street, Suite 2600 (Complete Part II for noncash contributions.) Woburn, MA. 01081-1721 (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person 3 Philanthropic Ventures Foundation \square **Payroll** 1222 Preservation Park Way 148,440 Noncash (Complete Part II for noncash contributions.) Oakland, CA. 94612 (b) (a) (c) (d) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** Person Elspeth Gilmore Ø **Payroll** 5000 Noncash (Complete Part II for noncash contributions.) New York, N.Y. 10014 (b) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Adrienne Brecher Person Pavroll 5000 Noncash 923 Fifth Avenue (Complete Part II for noncash contributions.) New York, NY 10021 (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 6 Person Population Connection **Payroll** 5000 Noncash 2120 L Street NW, Suite 500

(Complete Part II for noncash contributions.) Name of organization Employer identification number
Turimiquire Foundation 04-3286660

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	Andrew Tobias 146 Central Park West New York, NY 10023	\$10000	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8	William Hillis 405 Robbins Road Rindge, NH 03461	\$5000	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9	Joyanne Bloom 883 Basin Rd. Juneau, Alaska 99801	\$10000	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	SEP 2 8 2020 OGDEN, UT	\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Schedule B (Form, 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number Turimiquire Foundation** 04-3286660 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given. **Date received** Part I (See instructions.) None. (a) No. (c) **(b)** (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) **Description of noncash Date received** Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) (p) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.)