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 1545-0047 20

Open to Public Inspection

	<u>FO</u>	r caler	idar year 2019 or tax year beginning		, and	enaing		
	Na	me of for	undation			A Employer	identification number	•
	Ма	ljasili l	nitiatives, Inc					
	Nu	mber and	d street (or PO box number if mail is not delivered to street address)		Room/suite	1	27-3183146	
	4 (	Carmic	hael Street		111-193	B Telephone	number (see instructio	
	City	y or town	n, state or province, country, and ZIP or foreign postal code			1		
	Es	sex Ju	nction VT	0545	2		(301) 956-474	13
	For	reign cou	untry name Foreign province/state/county	Foreig	n postal code	C If exempti	on application is pendir	ig, check here ▶
2021							•	_
$\approx$	G	Check	k all that apply   Initial return   Initial return	of a former pu	blic charity	D 1 Foreign	organizations, check t	nere ►
တ			Final return Amended ret		J J.	2. Foreign	n organizations meeting	the 85% test
0			Address change Name chang	e		_	nere and attach comput	
Z	H	Check	k type of organization X Section 501(c)(3) exempt pri		on 04	E If private f	oundation status was te	
S	П		on 4947(a)(1) nonexempt charitable trust		Un	section 50	7(b)(1)(A), check here	▶ 📙
	<u> </u>		narket value of all assets at J Accounting method		X Accrual	1		
	•		f year (from Part II, col (c), Other (specify)	☐ Casii i	A) Accidai		dation is in a 60-month	
Ž			6) ► \$ 1,662,367 (Part I, column (d), must b	e on cash hasis		under sec	tion 507(b)(1)(B), check	nere
SCANNED	D.	art I	Analysis of Revenue and Expenses (The total of	e on cash basi.	, ,	<u> </u>	<del></del>	(d) Disbursements
5		artı	amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue		et investment	(c) Adjusted net	for charitable
Š			equal the amounts in column (a) (see instructions))	expenses pe books	"	ncome	income	purposes
		T 4		2 247	650			(cash basis only)
		1	Contributions, gifts, grants, etc , received (attach schedule)	2,217	,000			-
		2	Check ► if the foundation is not required to attach Sch B	· · · · · · · · · · · · · · · · · · ·				
	-	4	Interest on savings and temporary cash investments  Dividends and interest from securities	<b></b>	-			-
14		5a	Gross rents					
		b	Net rental income or (loss)			_	<del></del>	
	a	6a	Net gain or (loss) from sale of assets not on line 10	RECE	. T V 4	6)		<del>                                     </del>
	Revenue	b	Gross sales price for all assets on lino 6a	ļ. v		<u> </u>	-	
	V	7	Capital gain net income (from Part IV, line 2)					
	Re	8	Net short-term capital gain	11	-			
		9	Income modifications	200	117	1		
		10a	Gross sales less returns and allowances	003	- <del>- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</del>	<u></u>		
		b	Less Cost of goods sold					<del> </del>
		c	Gross profit or (loss) (attach schedule)					
		11	Other income (attach schedule)	111	,196			
		12	Total. Add lines 1 through 11	2,328		0	0	1
	s	13	Compensation of officers, directors, trustees, etc	275	820		-	141,740
	genses	14	Other employee salaries and wages	165	,746			165,746
	en e	15	Pension plans, employee benefits	32	,862			24,430
2	×	16a	Legal fees (attach schedule)	11	,084			
~~	W)	b	Accounting fees (attach schedule)	8	,725			
<del></del> 1	Š	С	Other professional fees (attach schedule)	531	,973			471,219
>_	ī	17	Interest					
7	<u>s</u>	18	Taxes (attach schedule) (see instructions)	35	,061			24,415
9	盲	19	Depreciation (attach schedule) and depletion					1
$\sim$	뮵	20	Occupancy		,160			2,340
2	⋖	21	Travel, conferences, and meetings		,556		<del></del>	97,94 <u>0</u>
20226MAY13	חק	22	Printing and publications		,416			15,500
		23	Other expenses (attach schedule)	158	,065			105,322
32	Operating	24	Total operating and administrative expenses.					
27	rat		Add lines 13 through 23	1,353		0	0	1,048,652
42	pe	25	Contributions, gifts, grants paid	805	,542		*	805,542
0	0	26	Total expenses and disbursements. Add lines 24 and 25	2,159	,010	0	0	1,854,194

For Paperwork Reduction Act Notice, see instructions.

Subtract line 26 from line 12

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

Form 990-PF (2019)

0

169,844

27

Part II End of year Balance Sheets Attached schedules and amounts in the description column Beginning of year should be for end-of-year amounts only (See instructions ) (b) Book Value (a) Book Value (c) Fair Market Value Cash-non-interest-bearing 1.095.829 762.693 762.693 2 Savings and temporary cash investments 3 Accounts receivable 20,548 Less allowance for doubtful accounts 35,983 20,548 4 Pledges receivable ► 192,661 Less allowance for doubtful accounts > 292,730 192.661 192,661 5 Grants receivable 14.044 3.771 3,771 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 R Inventories for sale or use 9,390 Prepaid expenses and deferred charges 14,361 9 14,361 10a Investments—U S and state government obligations (attach schedule) Investments—corporate stock (attach schedule) Investments—corporate bonds (attach schedule) C 11 Investments—land, buildings, and equipment basis 7 79 AL Less accumulated depreciation (attach schedule) ▶ 12 Investments—mortgage loans 13 Investments—other (attach schedule) 2,190 14 Land, buildings, and equipment basis 2,190 Less accumulated depreciation (attach schedule) 668.333 668.333 15 16 Total assets (to be completed by all filers—see the 1,662,367 instructions Also, see page 1, item I) 1.447.976 1.662.367 17 Accounts payable and accrued expenses 76.304 83.351 18 Grants payable Liabilities 37,500 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) Other liabilities (describe 22 23 Total liabilities (add lines 17 through 22) 76,304 120,851  $\triangleright [X]$ Balances Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. 24 Net assets without donor restrictions 188,942 390,220 1.182.730 25 Net assets with donor restrictions 1.151.296 Net Assets or Fund Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 1,371,672 1,541,516 29 Total net assets or fund balances (see instructions) 30 Total liabilities and net assets/fund balances (see 1,447,976 1,662,367 instructions) **Analysis of Changes in Net Assets or Fund Balances** Part III Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with 1,371,672 end-of-year figure reported on prior year's return) 2 169,844 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 1,541,516 4 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 1,541,516

2-story brick warehouse, or common stock, 200 shs MLC Co )					(b) How acquired P—Purchase D—Donation	(C)	Date acquired no , day, yr )	(d) Date sold (mo , day, yr )		
1a		<u> </u>								
b										
<u> </u>								_		
d	<del></del>					<del>- </del>				
е_	(e) Gross sales pnce	(f) Depreciation allowed (or allowable)			other basis	<del> </del>		n or (loss) (f) minus (g))		
а			+			+		.,		
b			1				<del>-</del>			
С								·		
d										
е										
	Complete only for assets sl	howing gain in column (h) and owne	d by the	foundation	on 12/31/69		(I) Gains (Co	(h) gain minus		
	(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess of col (i) over col (j), if any			(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))			
а										
b										
С										
d					_	ļ				
е						<u> </u>	<b>T</b>			
2	Capital gain net income or	r (net canital loss) 1	-	nter in Par :-0- in Par	· •	2		C		
3	· · · · · · · · · · · · · · · · · · ·	n or (loss) as defined in sections , line 8, column (c). See instruction			r-0- in Ղ					
	Part I, line 8				ſ	I _	l	_		
					<u> </u>	3	<u> </u>	0		
(For d	optional use by domestic pri	der Section 4940(e) for Red vate foundations subject to the se				t Inco		0		
(For o	optional use by domestic pri tion 4940(d)(2) applies, leav the foundation liable for the	vate foundations subject to the so re this part blank section 4942 tax on the distributa	ection 4	940(a) tax	on net investm	nt Inco	ome )	☐ Yes ☒ No		
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Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instru	<u>uctio</u>	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here  Date of ruling or determination letter  (attach copy of letter if necessary—see instructions)		12 13	ر اور مفاحد ک	3.5°	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				
	here ► X and enter 1% of Part I, line 27b		75 J. 17	Alle	多問	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)	. 7		, p 5,	<u> </u>	
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			0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3	T** .53	0	
6	Credits/Payments	1	\$	14 . 1 .		
a	2019 estimated tax payments and 2018 overpayment credited to 2019  Exempt foreign organizations—tax withheld at source  6a  6b		, , , , , , , , , , , , , , , , , , ,	ં નંદ	ا تا ا	
b	Exempt foreign organizations—tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c	-48% A	La Salata	\$ "		
c d	Backup withholding erroneously withheld  6d	(S)			r	
7	Total credits and payments Add lines 6a through 6d	7			0	
8	Enter any penalty for underpayment of estimated tax. Check here	8			<u>_</u>	
9	-Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0	
10	· · · · · · · · · · · · · · · · · · ·	10			0	
11	Enter the amount of line 10 to be Credited to 2020 estimated tax	11			0	
Part '	VII-A Statements Regarding Activities			<b></b> ,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		F. Co	Yes	No	
	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	5	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	\$	14.	1,27	3,2	
_	published or distributed by the foundation in connection with the activities  Did the foundation file Form 1120-POL for this year?		1c	3.4	X	
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		10	52). V	<u>^</u>	
u	(1) On the foundation ►\$ (2) On foundation managers ►\$		100	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	ed	—   <u>                                  </u>	1 3		
-	on foundation managers ►\$	-	70.c	A. 77	13	
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	. 13.	X	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		ريق منا	¥4.		
-	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	N/A		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X	
	If "Yes," attach the statement required by General Instruction T			اشد اوارعا		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		">	93	12.4	
	By language in the governing instrument, or		$t_{\gamma}$			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that     and the state legislation that effectively amends the governing instrument?	I		<u> </u>	لتـــ	
-	conflict with the state law remain in the governing instrument?		6 <sub>-</sub>	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.  Enter the states to which the foundation reports or with which it is registered. See instructions.		. 72		- (p-	
8a	DE, VT		126	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1/3	
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	 al	(Fr)	3.4	<b>.</b> ]	
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	<b>.</b> ,	8b	X	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	)	1 P. 100	J. #33	المادين	_
•	or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If				. لشعببجر	1
	"Yes," complete Part XIV		9		X_	_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	eır				
	names and addresses		10	Х		
			22	N_PF		

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		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	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ www maliasili org			
14	The books are in care of ► Fred Nelson Telephone no ► (301) 95	6-4/4	3	
	Located at ▶ 4 Carmichael Street, Suite 111-193 Essex Junction VT ZIP+4 ▶ 05452			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here and enter the amount of tax-exempt interest received or accrued during the year		Į	<b>▶</b> ∟
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	-	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			<u> </u>
	name of the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   X Yes No	١.		]
	(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)?  Yes X No			1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			•
	termination of government service, if terminating within 90 days )  Yes X 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	1b		×
	Organizations relying on a current notice regarding disaster assistance, check here			1
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 2019?	1c		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))			1
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?  Yes X No			
	If "Yes," list the years ► 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions )	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			1
	<b>▶</b> 20, 20, 20			1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
þ	If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Χ

	VIES Statements Regarding Activities				.u,			<del> </del>			
5a	During the year, did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to i			section	4945(e))?		☐ Yes	X No	,	Yes	No
	(2) Influence the outcome of any specific public ele	ection (						_			, ,
	directly or indirectly, any voter registration drive						∐ Yes	X No	-   '		
	(3) Provide a grant to an individual for travel, study		charitable, etc., organization described in				∐ Yes	X No	<b>'</b>		;
	section 4945(d)(4)(A)? See instructions	Chanta	ible, etc , orga	mzalioi	i described	111	☐ Yes	X No			
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil					nal	Yes	X No	,   ,		
b	If any answer is "Yes" to 5a(1)–(5), did any of the t Regulations section 53 4945 or in a current notice		· · · · · · · · · · · · · · · · · · ·					d in	- 5b	 N/A	
	Organizations relying on a current notice regarding	_	_			ii dolloi i		▶ □	100	14//	
С	If the answer is "Yes" to question 5a(4), does the for because it maintained expenditure responsibility for	oundati	on claım exer				☐ Yes	_ No	,		
	If "Yes," attach the statement required by Regulation								· ·		
6a	Did the foundation, during the year, receive any fur on a personal benefit contract?	nds, dire	ectly or indire	ctly, to p	oay premiui	ns	☐ Yes	X No			
b	Did the foundation, during the year, pay premiums,	directly	y or indirectly,	on a po	ersonal ber	efit con	tract?		6b		X
_	If "Yes" to 6b, file Form 8870						ш.,	ю	1,		1
7a b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the t					e transa	☐ Yes action?	X No	7b	N/A	
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?					n	☐ Yes	X No	4	٠.	
Part	VIII Information About Officers, Directo	ors, Tr	ustees, Fo	undati	on Manag	gers, F				es,	
	and Contractors		•		· · · · · ·						
1	List all officers, directors, trustees, and foundat		e, and average		mpensation		Contribution		(-) F		
	(a) Name and address	hou	irs per week ted to position	(If n	ot paid, ter -0-)	emplo	yee benefit	plans	(e) Expe	inse aci allowan	
See A	ttached Statement			0	(61 -0-)	and det	erred comp	ensation			
			00	0	0	and der	erred comp	ensation			
			00		•	and der	erred comp	ensation			
			00		•	and der	erred comp	ensation			
				<b>v.</b>	0	and det	erred comp	ensation			
			00		0	and der	erred comp	ensation			
2	Compensation of five highest-paid employees (	other t	00		0 0					er	
2	Compensation of five highest-paid employees (	other t	00		0 0		struction	s). If no		er	
2		<u> </u>	00	<b>Cluded</b> verage eek	0 0	see ins		s). If no	ne, ent		
2 Jessie	"NONE."	<u> </u>	00 00 han those ind (b) Title, and a	cluded verage eek ssition	0 0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no	ne, ent	nse ac	
316 S	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209	<u> </u>	00 00 han those inc (b) Title, and a hours per widevoted to po	verage eek esition ector 40 00	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no	ne, ent	nse ac	
316 S Steph	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209 anie Sheldon-Watrous	<u> </u>	00 00 han those ind (b) Title, and a hours per widevoted to po	verage eek sitton ector 40 00 ce and .	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no utions to benefit deferred sation 2,700	ne, ent	nse ac	
316 S Steph	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209	<u> </u>	00 00 han those inc (b) Title, and a hours per widevoted to po	verage eek esition ector 40 00	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no utions to benefit deferred sation	ne, ent	nse ac	
316 S Steph	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209 anie Sheldon-Watrous	<u> </u>	00 00 han those inc (b) Title, and a hours per widevoted to po	verage eek sitton ector 40 00 ce and .	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no utions to benefit deferred sation 2,700	ne, ent	nse ac	
316 S Steph	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209 anie Sheldon-Watrous	<u> </u>	00 00 han those inc (b) Title, and a hours per widevoted to po	verage eek esition ector 40 00 ce and 32 00	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no utions to benefit deferred sation 2,700	ne, ent	nse ac	
316 S Steph	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209 anie Sheldon-Watrous	<u> </u>	00 00 han those inc (b) Title, and a hours per widevoted to po	verage eek sistion ector 40 00 ce and 32 00	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no utions to benefit deferred sation 2,700	ne, ent	nse ac	
316 S Steph	"NONE."  (a) Name and address of each employee paid more than \$50,000  Davie outh Pearl Street, Denver, CO 80209 anie Sheldon-Watrous	<u> </u>	00 00 han those inc (b) Title, and a hours per widevoted to po	verage eek esition ector 40 00 ce and 32 00	0 0 0 on line 1—	see ins	etruction  (d) Contrib employee	s). If no utions to benefit deferred sation 2,700	ne, ent	nse ac	

Form **990-PF** (2019)

Part VIII Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Paid En	iployees,
3 Five highest-paid independent contractors for professional services. S	ee instructions. If none, enter "NON	Ē."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Cara Scott		
PO Box 2493, Arusha, Tanzania	Senior Portfolio Manager	59,749
Karıne Nuulimba		
91 nelson Mandela Ave, Klein Windhoek, Namibia	Portfolio Mgr and Conservation Lead	79,420
Anna Davis		
PO Box 11977, Windhoek, Namibia	Leadership Program Coordinator	67,231
Total number of others receiving over \$50,000 for professional services	<b>•</b>	3
Part IX-A Summary of Direct Charitable Activities		<del></del>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nformation such as the number of	Expenses
1 Supporting long-term, locally driven, and collaborative approaches that achiev	e the sustainable use and	
conservation of natural resources and ecosystem services in Africa, while gen	erating opportunities for both	
social and economic development and enterprise		2,159,010
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instru		<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 None		
•••••		
2		
2		
All other program-related investments. See instructions		<del></del>
3		
· · · · · · · · · · · · · · · · · · ·		
Total. Add lines 1 through 3	<b>•</b>	0
		000 DE (0040)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundat	tions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	<u> </u>	
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	
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		tions	
	and certain foreign organizations, check here   and do not complete this part )		
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)		
С	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	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		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,854,194
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	1,854,194
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,854,194
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when calculating when the column (b) is a subsequent years when the column (b) is a subsequent years when the column (b) is a subsequent year.	nether the fou	undation
	gualifies for the section 4940(e) reduction of tay in those years		

Part	XIII Undistributed Income	(see instructions	)			
	-		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from line 7	Part XI,		-		
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 [				
3	Excess distributions carryover, if a	ny, to 2019	·			
а	From 2014	416,024				
b	From 2015	556,521				
С	From 2016	607,561				
đ	From 2017	819,006				
е	From 2018	1,272,578				
f	Total of lines 3a through e		3,671,690	1 (14) (10) (11)	11.500	
4	Qualifying distributions for 2019 fro	om Part XII,				
	line 4 <b>\$</b> 1,854,194					
a	Applied to 2018, but not more than					
b	Applied to undistributed income of	•				
_	(Election required—see instruction	· ·				
С	Treated as distributions out of corp required—see instructions)	us (Election				
d	Applied to 2019 distributable amou	nt -				
e	Remaining amount distributed out	r	1,854,194			
5	Excess distributions carryover app	· .	1,001,101			<del></del>
•	(If an amount appears in column (c					
	amount must be shown in column	·				
6	Enter the net total of each colum	· · ·				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e S	ubtract line 5	5,525,884	1		1 1
b	Prior years' undistributed income	Subtract				
	line 4b from line 2b			0		
С	Enter the amount of prior years' un					
	income for which a notice of deficie	· .				
	been issued, or on which the section	on 4942(a)				
	tax has been previously assessed Subtract line 6c from line 6b Taxat	-la	· · · · · · · -			
-	amount—see instructions			· · · · · · · · · · · · · · · · · · ·		
е	Undistributed income for 2018 Sul	1				
	4a from line 2a Taxable amount—	see			0	
- f	Instructions Undistributed income for 2019 Sul	atract lines				
ī	4d and 5 from line 1. This amount					
	distributed in 2020	ilust be				0
7	Amounts treated as distributions of	ut of cornus				
•	to satisfy requirements imposed by	-				
	170(b)(1)(F) or 4942(g)(3) (Election					
	required—see instructions)	,				
8	Excess distributions carryover from	n 2014 not	_			
	applied on line 5 or line 7 (see inst		416,024			
9	Excess distributions carryover to	r			*	
	Subtract lines 7 and 8 from line 6a		5,109,860			
10	Analysis of line 9					,
а	Excess from 2015	556,521				
b	Excess from 2016	607,561				
С	Excess from 2017	819,006				
d	Excess from 2018	1,272,578			·	
_	Eycess from 2019	1 854 1941			İ	1

Form 9	Maliasili Initiatives, Inc				27-318	3146 Page <b>10</b>
Part	XIV Private Operating Foundat	ions (see instru	uctions and Part	VII-A, question 9)		N/A
1a	If the foundation has received a ruling o	r determination le	etter that it is a priva	ate operating		
	foundation, and the ruling is effective for	2019, enter the	date of the ruling	•		
b	Check box to indicate whether the foundation	n is a private oper	ating foundation desc	cribed in section	4942(j)(3	3) or 4942(J)(5)
2a		Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed	<u>`</u>				0
ь	85% of line 2a		<del></del>			0
	Qualifying distributions from Part XII,					
С	line 4, for each year listed			/		0
_	<b>∀</b>		<del> </del>	<del>                                     </del>		
a	Amounts included in line 2c not used directly					0
	for active conduct of exempt activities			<del>                                     </del>		
е	Qualifying distributions made directly					
	for active conduct of exempt activities					•
	Subtract line 2d from line 2c	· · · · · · · · · · · · · · · · · · ·				0
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		/			0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed					0
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,/dividends, rents, payments on			ŀ		
	securities loans (section					
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt organizations/ás provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization					0
	(4) Gross investment income					0
Part		(Complete th	is part only if th	ne foundation ha	d \$5,000 or mor	e in assets at
	any time during the year—					
1	Information Regarding Foundation M	anagers:				
а	List any managers of the foundation wh	o have contribute	ed more than 2% of	the total contributio	ns received by the f	foundation
	before the close of any tax year (but only	y if they have cor	ntributed more than	\$5,000) (See secti	on 507(d)(2) )	
b	List any managers of the foundation wh	o own 10% or mo	ore of the stock of a	corporation (or an	equally large portion	n of the
	ownership of a partnership or other entit	ty) of which the fo	oundation has a 109	% or greater interest	İ .	
2	Information Regarding Contribution,	Grant, Gift, Loar	n, Scholarship, etc	., Programs:		
	Check here ► X if the foundation on				ations and does no	t accept
	unsolicited requests for funds If the fou					
	conditions, complete items 2a, b, c, and	d See instructio	ns			
a	The name, address, and telephone num	ber or email add	ress of the person t	to whom application	s should be addres	sed
a		2. 2. 33 000		· · · · · · · · · · · · · · · · · · ·		
b	The form in which applications should b	e submitted and	information and ma	terials they should i	nclude	<del></del>
	com at the approach of oriotic b					
c	Any submission deadlines					
-						
d	Any restrictions or limitations on awards	, such as by geo	graphical areas, ch	arıtable fields, kınds	of institutions, or o	ther
	factors					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Ap

3 Grants and Contributions Paid During t	he Year or Approve	d for Fut	ure Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
The Pastoral Women's Council	N/A	PC	Support for community natural	25,000
PO Box 72			resource management in Northern	
Arusha Tanzania			i	
The Honeyguide Foundation	N/A	PC	Support for community natural	125,000
PO Box 8271			resource management in Northern Tanzania	
Arusha Tanzania Ujamaa Community Resource Team	N/A	PC	Support for community natural	30,000
PO Box 15111	l N/A		resource management in Northern	30,000
Arusha Tanzania			Tanzania	
The Honeyguide Foundation	N/A	PC	Support for community natural	75,000
PO Box 8271		. •	resource management in Northern	. 5,255
Arusha Tanzania			Tanzania	
Maasai Mara Wildlife Conservancies Association	N/A	PC	Promoting integrated conservancy	303,500
PO Box 984-20500			management and sustainable	
Maasai Mara Kenya			livestock production in the Maasai	
Ujamaa Community Resource Team	N/A	PC	Advancing the land rights of	112,500
PO Box 15111			pastoral women in northern	
Arusha Tanzania			1	
The Pastoral Women's Council	N/A	PC	Advancing the land rights of	82,500
PO Box 72			pastoral women in northern Tanzania	
Arusha Tanzania	N/A	PC	Support for building community	8,558
Soralo Portion of Kenya Fundraiser PO Box 15289-00509	I IN/A		support for conservation to	0,550
Nairobi Kenya			maintain the movement of lions	
Tanzania Expenses	N/A	PC	Support the Organizations mission	43,484
PO Box 8372				•
Arusha Tanzania			-	
Total	I	l	<b>▶</b> 3a	805,542
b Approved for future payment				
	ļ			
•				
·				
Total	·		<b>▶</b> 3b	0
				000-PF (2010)

	rt XV						
⊏nt(	er gros	s amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	
	J		(a)	(b)	(c) Exclusion code	(d)	(e) Related or exempt function income
1	Prog	ram service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
	-	Service provision					108,712
	_	Other Income					2,484
	c <sup></sup>						
	d –						
	е –						
	f -		· · · · · · · · · · · · · · · · · · ·	···			
	 g F	Fees and contracts from government agencies					
2	_	bership dues and assessments					
_		est on savings and temporary cash investments				<del>-</del>	
3		- · · · · · · · · · · · · · · · · · · ·					
4		lends and interest from securities			1		
5		rental income or (loss) from real estate	<del></del>				
		Debt-financed property			<del>-</del>	·	
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	r revenue a					
	<b>L</b> .						
	c _						
	ď						
	е —						
12	Subt	otal Add columns (b), (d), and (e)		0		0	111,196
13	Tota	I. Add line 12, columns (b), (d), and (e)				13	111,196
(Se	e work	sheet in line 13 instructions to verify calculations	;)				
	rt XVI			ent of Exemp	Purposes		
	e No.	Explain below how each activity for which incom			· · · · · · · · · · · · · · · · · · ·	importantly to the	
	▼	accomplishment of the foundation's exempt pur	poses (other than	by providing fund	s for such purpos	es) (See instruction	ons )
	1a	Service provision to African conservation organ	izations for orga	anızatıonal devel	opment support		
			izations for orga	anızatıonal devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anızatıonal devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anızatıonal devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anızatıonal devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anızatıonal devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
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	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		
	1a	Service provision to African conservation organ	izations for orga	anizational devel	opment support		

Part	XVII		n Regarding Trans ganizations	sters to and Transact	ions and Re	lationship	s Wit	h Nor	nchari	itable		
1	Did th			ngage in any of the followi	ng with any otl	her organiza	ition de	scribe	-d		Yes	No
•		-	•	)(3) organizations) or in se	•	-		301100	·u	,	103	
		izations?	cr triair section 50 f(c)	(O) Organizations) or in se	5011011 021, 1016	iting to point	cai					
а	_		norting foundation to:	a noncharitable exempt or	ranization of							
•	(1) Ca	•	borting loundation to t	a nononantable exempt of	garnzation or					1a(1)		
		her assets								1a(1)		
b		transactions								18(2)		
U			a nancharitable aver	nnt organization						1b(1)		
			a noncharitable exer	ole exempt organization						1b(1)		
	• •		, equipment, or other	•						1b(2)		
	• •	eimbursement a		assets						1b(4)		
		ans or loan gua								1b(5)		
		-		p or fundraising solicitation	ne					1b(6)		
С				s, other assets, or paid er						1c		
d				nplete the following schedule		hould always	show t	he fair	market			
u				iven by the reporting founda								
				nt, show in column (d) the v								
(a) Line		b) Amount involved	<del>,                                      </del>	haritable exempt organization		cription of transf	-				naemen	ts
(4) 2		S, , , , , , , , , , , , , , , , , , ,	(0) (10)		(0, 000				,	<u> </u>		
	<u></u>											
											-	
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	<u></u>											
	<u> </u>											
			<del></del>	u.e.								
	1			****								
2a b	descr	bed in section 5		ted with, or related to, one tion 501(c)(3)) or in section		exempt orga	nızatıoı	ns		Yes	X N	0
		(a) Name of organ	nization	(b) Type of organiza	ition		(c) De	scription	of relation	nship		
			<u></u>	·						_		
				turn, including accompanying schedules yer) is based on all information of which			nowledge	and belief	, it is true,			
Sign	Correct	, and complete Declarat	uon ocpreparer (omer man taxpa							RS discuss		
Here	1/		-un	7 13/2020	Executive Dir	ector			with the pi See instru	reparer sho	Yes	_
	Sign	ature of officer or tru			ītle 	12.						
Paid		Print/Type preparer	's name	Preparer's signature		Date		Check	ıf	PTIN		
r aid Prepa	rer	Kirk Wisehart	<u>.</u>	Kirk Wisehart	<del></del>	7/9/20:	20	self-em		P0053	3236	
Use O		Firm's name	Wisehart Wimette A			•••	Fırm's	EIN ►		46110		
	,	Firm's address	159 River Road, Ess	sex Junction, VT 05452			Phone	no	(802)	879-10	55	

### 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

2019

Employer identification number

Maliasili	Initiatives, Inc		27-3183146
Organiz	ation type (check one)		
Filers o	f:	Section:	
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private found	dation
		527 political organization	
Form 99	0-PF	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	חמ
		501(c)(3) taxable private foundation	
Note: O	nly a section 501(c)(7),	vered by the <b>General Rule</b> or a <b>Special Rule</b> . (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
instruction	ons		
General	Rule		
		g Form 990, 990-EZ, or 990-PF that received, during the year, contribution operty) from any one contributor. Complete Parts I and II. See instructions outlions	
Special	Rules		
	regulations under section 13, 16a, or 16b, and that	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 9 ins 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or t received from any one contributor, during the year, total contributions of amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Cor	990-EZ), Part II, line the greater of (1)
	contributor, during the y	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece ear, total contributions of more than \$1,000 exclusively for religious, charif urposes, or for the prevention of cruelty to children or animals. Complete	table, scientific,
	contributor, during the y contributions totaled mo during the year for an ex	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received, contributions exclusively for religious, charitable, etc., purposes, but rethan \$1,000. If this box is checked, enter here the total contributions the columbia contributions the columbia contributions that contributions is the part this organization because it received nonexclusively religious, charitable during the year.	no such at were received arts unless the

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

Employer identification number

Maliasili Ini	itiatives, Inc		27-3183146
Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is r	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Linden Trust for Conservation  156 West 56th Street  New York  NY  10019  Foreign State or Province  Foreign Country	\$5,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Friends of Kenya Wildlife Trust PO Box 86 - 00502  Foreign State or Province Nairobi Foreign Country Kenya	\$ 75,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	The Nature Conservancy 4245 North Hailfax Dr Arlington VA 22203 Foreign State or Province Foreign Country	\$ 113,803	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Sall Family Foundation  201 Vineyard Lane  Cary NC 27513  Foreign State or Province  Foreign Country	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Band Foundation  1723 Hoban Rd NW  Washington DC 20007  Foreign State or Province  Foreign Country	\$ 741,000	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Liz Claiborne Art Ortenberg Foundation  1385 Broadway, 23rd Floor  New York NY 10018  Foreign State or Province	\$ 358,333	Person X Payroll

Name of organization
Maliasili Initiatives, Inc

Employer identification number
27-3183146

Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is r	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Silicon Valley Community Foundation  2440 W El Camino Real Ste 300  Mountain View CA 94040  Foreign State or Province  Foreign Country	\$ 60,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Fidelity Investments Charitable Gift Fund 200 Seaport Blvd Boston MA 02210 Foreign State or Province Foreign Country	\$ 200,000	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Jed Nussdorf 4835 Cordell Ave Apt 1223 Bethesda MD 20814 Foreign State or Province Foreign Country	\$5,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Wellspring Philanthropic Trust  10 Times Square, Suite 1600  New York NY 10018  Foreign State or Province  Foreign Country	\$ 388,771	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Carla and David Crane Foundation  121 Steuart St  San Francisco CA 94105  Foreign State or Province  Foreign Country	\$20,000	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	Mulago Foundation 2435 Polke, Suite 21 San Francisco CA 94109 Foreign State or Province Foreign Country	\$ 150,000	Person X Payroll

Name of organization Employer identification number Maliasili Initiatives, Inc 27-3183146

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	The Lucy Foundation c/o BDO LLP - 55 Baker Street  Foreign State or Province London Foreign Country United Kingdom	\$50,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	International Land Coalition Via Paolo di Dona 44  Foreign State or Province Rome Foreign Country Italy	\$9,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	Cobalt Trust  17-18 New Row  Foreign State or Province London Foreign Country United Kingdom	\$61, <u>060</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
. (a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	Anonymous 4 Carmichael Street Essex Junction VT 05452 Foreign State or Province Foreign Country	\$10,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	Markus Kant 40 W 20th Street New York NY 10011 Foreign State or Province Foreign Country	\$5,345	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupation (Complete Part II for noncash contributions )

Name of organization Employer identification number
Maliasili Initiatives, Inc 27-3183146

Part II	Noncash Property (see instructions) Use duplicate co	opies of Part II if additional spa	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	,	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of org			<del></del>		Employer identification number	
	tratives, Inc			h a al ! a a	27-3183146	_
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the ye					
	the following line entry For organizations of	-				
	contributions of \$1,000 or less for the year					0
	Use duplicate copies of Part III if additional	•			- /	Ξ.
(a) No.						_
from Part I	(b) Purpose of gift	(c)	Use of gift	(c	d) Description of how gift is held	
						_
			- : -	_i		_
		(e) T	ransfer of gift			
	Transferee's name, address, and Z	IP + 4	Relations	snip of	transferor to transferee	_
	For Prov Country					
(a) No.						
from Part i	(b) Purpose of gift	(C	Use of gift	(0	d) Description of how gift is held	
					<del>.</del>	
					•	
		(a) T	ronofor of gift			_
		(e) i	ransfer of gift			
	Transferee's name, address, and Z	IP + 4	Relations	ship of	transferor to transferee	
	Transferee s name, address, and 2			<u>р С.</u>		_
	For Prov Country					_
(a) No. from	(b) Purpose of gift	(c	Use of gift	(6	d) Description of how gift is held	
Part I	(1,7)		· · · · · · · · · · · · · · · · · · ·	`		_
		(e) T	ransfer of gift			
					•	
	Transferee's name, address, and Z	IP + 4	Relations	ship of	transferor to transferee	
					·	
	For Proy Country				•••••	
(a) No.	For Prov Country					-
from	(b) Purpose of gift	(c	Use of gift	(c	d) Description of how gift is held	
Part !				+		-
						_
		(e) T	ransfer of gift			
			<b></b>		A	
	Transferee's name, address, and Z	IP + 4	Relations	snip of	transferor to transferee	_
				·		
	For Prov Country					

Part I, Line 11 (990-PF) - Other Income

		111,196	0	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	Other Income	2,484	0	
2	Program Service Income	108,712	0	

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

		11,084	0		0 0
					Disbursements
İ		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
ĺ	Description	Books	Income	Income	(Cash Basis Only)
1	Legal fees	11,084			0

Part I, Line 16b (990-PF) - Accounting Fees

		8,725	0	(	0
					Disbursements
1		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
	Accounting Fees	8,725			0

Part I, Line 16c (990-PF) - Other Professional Fees

		531,973	0	C	471,219
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net	Disbursements for Charitable Purposes (Cash Basis Only)
1	MCDI Technical Support Communications	36,063	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		36,063
2	Subcontractors	485,910			425,156
3	Facilitators/Lecturers	10,000			10,000

Part I, Line 18 (990-PF) - Taxes

		35,061	0	C	24,415
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
$\vdash$	1 Payroll taxes	35,061	mome	Net moone	24,415

### Part I, Line 19 (990-PF) - Depreciation and Depletion

Maliasili Initiatives, Inc.

							0	0	0
L						Beginning	Revenue	N N	Adjusted
		Dete	Method of		Cost or	Accumulated	and Expenses	Investment	NA NA
	Description	Acquired	Computation	Asset Life	Other Basis	Deprecation	per Books	Income	Income
	Macbook Pro and Case	1/3/2015	정	6)	2,190	2,190			

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

		158,065	0	0	105,322
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
1	Insurance	6,098	0		C
2	Bank fees	10,515	0		65
3	Board meetings	50,783	0		50,329
4	Office expense	38,038	0		16,111
5	Networking	11,419	0		11,289
6	Permits and fees	8,716	0		1,380
7	Miscellaneous	357	0		43
8	Professional development	9,064	0		9,045
9	Stipends	23,075	0		17,060
10	Workshops	0	0		

## Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

Maliasılı Initiatives, Inc

	2,190	2,190	2,190	0	0	0
		Accumulated	Accumulated			
	Cost or	Depreciation	Depreciation	Book Value	Book Value	FMV
Asset Description	Other Basis	Beg of Year	End of Year	Beg of Year	End of Year	End of Year
Equipment	2,190	2,190	2,190	0	0	

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### Part II, Line 15 (990-PF) - Other Assets

	0	668,333	668,333
	Book Value	Book Value	FMV End
Asset Description	Beg of Year	End of Year	of Year
Restricted cash		668 333	668 333

Maliasili Initiatives, Inc

## Part VII-A, Line 10 (990-PF) - Substantial Contributors

		Check "X"						
	Name	if Business	Street	Cıty	State	Zıp Code	Foreign Country	_
1	Fidelity Investments Charitable Gift	×	200 Seaport Blvd	Boston	MA	02210		_
7	Carla and David Crane Foundation	×	121 Steuart St	San Francisco	CA	94105		
ဗ	Renaissance Charitable Foundation	×	8910 Purdue Rd Ste 555	Indianapolis	N	46268		
4	John D. and Catherine T MacArthu	×	140 South St - Suite 1200	Chicago	7	60909		_

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

													1
										275,820	27,527	0	01
		Check"X"							AgHs			Expanse	
	Name	fBusness	Sheet	Oħy	State	ZpOcce	FaagnCurtry	Tible	Perweek	Compensation	Benefits	Account	-1
	FredNetson		POBx 233	Underfull	5	05489		Beathe	8	133680	23,263	,	•
	_							Drector					_
L	Bizabeth Sngleton		27922th Sheet	Sanfransco	8	94131		œ	4000	742,140	4284	0 <u>°</u>	<b>0</b> *
8													_
<u> </u>	Mchael Beradii		POBox 1630	HoodRver	g	97034		President,	8	0	0		0
ო	<b>&gt;</b>							}					
	Statt OOarrell		9West 57th Sheet, Sufe 5000	NewYOR	ž	100/2-61001		Treasurer	8	0	0	U	0
4								}					Т
	Peter Vert	_	10GStreet, N.E. Suite 800	Weshington	8	20002		Dredor	ā	0	0	U	0
9													
	Mrainter		350 14th Sheet, No. 508	Sanfranosco	ð	94103		Dredtor	ā	0	0	U	-0-
9													
	Catherne DrandBaut		40WZQth Street	NewYork	ž	1001		Chedor	8	O	0	J	0
_													