SCANNED MAY 2 0 2021

4 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.

Open to Public Inspection

OMB No 1545-0047

_		lendar year 2019 or tax year beginning		U 4	1/U⊥ , 2019	<u>, and endin</u>				12/31, 2	019
, N		f foundation								cation number	
_		NA USA FOUNDATION, INC.				·			79600		 .
Ν	umber	and street (or P O box number if mail is not delivered to	stree	t address)		Room/suite	B Te	lephone	e numbe	er (see instructions)	
_		THIRD AVENUE, 12TH FLOOR			·· · · ·	<u> </u>		(212) 69	2-1009	
С	ity or t	own, state or province, country, and ZIP or foreign posta	l code								/
							C If e	exemptio nding, ch	n applicat eck here	lion is	▶└┴
_		YORK, NY 10022		· 1	<u> </u>		_				"
G	Che	eck all that apply Initial return	}	Initial return		oublic charit		•	-	ons check here I	
		Final return		Amended re						ions meeting the ere and attach	
_		Address change		Name chang		////					-
Н		eck type of organization X Section 501(c)(3)			UY	E if p	rivate fo	undation	status was terminated	
1		Section 4947(a)(1) nonexempt charitable trust	٢	Other taxable pr			un	der secti	on 507(b)	(1)(A) check here .	-
ı				g method 🔀 C		crual				in a 60-month termination	1 1
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(specify)			un	der secti	on 507(b)	(1)(B) check here .	
			colum	nn (d), must be on c	ash basis)					(d) Disbursem	onle
L	alt	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)		a) Revenue and expenses per	(b) Net invi	estment	(c) Adju	usted r	net	for charitab	le
		may not necessarily equal the amounts in		books	incon	ne	inc	ome		purposes (cash basis o	
-	Τ_	column (a) (see instructions))		13,350,000.						(5351, 56313 0	,,
	1 2	Contributions gifts, grants, etc., received (attach schedule). Check In the foundation is not required to		_2,200,000.							
		attach Sch B									
	3	Interest on savings and temporary cash investments. Dividends and interest from securities						1	RE	CEIVED	
	5a	Gross rents						1			निश्चा
		Net rental income or (loss)						8	ii i	2 4 2020	İŸİi
a)	1	Net gain or (loss) from sale of assets not on line 10						圖		L # I FULU	121
2	Ъ	Gross sales price for all		****							
Revenue	7	Capital gain net income (from Part IV, line 2) .				0.			00	DEN, UT	
ď	8	Net short-term capital gain,					••				1
	9	Income modifications									ı
	10 a	Gross sales less returns and allowances									1
	Ь	Less Cost of goods sold .									1
	c	Gross profit or (loss) (attach schedule)									
	11	Other income (attach schedule)								-	
_	12	Total. Add lines 1 through 11		13,350,000.		0.					<u> </u>
v.	13	Compensation of officers directors, trustees, etc		0.							
Se	1.7	Other employee salaries and wages									
ē	15	Pension plans employee benefits		110 101	······					110	3,121
Administrative Expen	16a	Legal fees (attach schedule) ATCH 1		118,121.						116	, 1 Z I
نة	b	Accounting fees (attach schedule)		44,444.						A /	1,444
ţ	_ C	Other professional fees (attach schedule).[2]		77,777.						4.	.,
stra	17	Interest	_								
ij	18	Taxes (attach schedule) (see instructions)									. 1
E	19	Depreciation (attach schedule) and depletion.									
Ac	20 21	Occupancy		14,799.						14	1,799
and	22	Travel, conferences, and meetings Printing and publications		.,							
2	22	Other expenses (attach schedule) ATCH .3.		45,157.						4.5	5,157
ţ	23 24 25	Total operating and administrative expenses.									
2		Add lines 13 through 23		222,521.							2,521
Ö	25	Contributions, gifts, grants paid		12,925,990.	,					12,925	5,990
_	26	Total expenses and disbursements Add lines 24 and 25		13,148,511.		0.			0.	13,148	3,511
_	27	Subtract line 26 from line 12									1
		Excess of revenue over expenses and disbursements		201,489.						<u>-</u>]
		Net investment income (if negative, enter -0-)				0.					<u> </u>
	1	Adjusted net income (if negative, enter -0-).									1

Part I	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-beari	ng	173,254.	374,743.	374,743.
2	Savings and temporary	cash investments			
3	Accounts receivable ▶		. * .		
	Less allowance for dou	btful accounts ▶			
4	Pledges receivable ▶			·	
	Less allowance for dou	btful accounts ▶			
5	Grants receivable				
6	Receivables due from	officers, directors, trustees, and other			
	disqualified persons (at	tach schedule) (see instructions)			
7	Other notes and loans r	eceivable (attach schedule) 🕨			
	Less allowance for dou	btful accounts >			
8 13	Inventories for sale or us	e			
ssets 6 %		eferred charges			
	•	e government obligations (attach schedule)			
ь	Investments - corporate	stock (attach schedule)			
c	Investments - corporate	bonds (attach schedule)			
11	Investments - land buildings and equipment basis	▶			
	Less accumulated deprecia (attach schedule)	ation >			
12	• •	loans			
13	Investments - other (atta	ach schedule)			
14	Land, buildings and equipment basis	>		5	
	Less accumulated deprecia (attach schedule)	ation >			
15	Other assets (describe	·)			
16		completed by all filers - see the			
	instructions Also, see p	age 1, (tem I)	173,254.	374,743.	374,743
17	Accounts payable and a	ccrued expenses			
18					ļ
S 19	• •				ļ
Liabilities 20 21 22		ers, trustees, and other disqualified persons			
Q 21	Mortgages and other no	ites payable (attach schedule)			
그 ₂₂	Other liabilities (describe	e -)			1
					·
23	Total liabilities (add line	s 17 through 22)	0.	0.	,
တ္ထ	Foundations that follow	v FASB ASC 958, check here			
2	and complete lines 24,	25, 29, and 30.			
24	Net assets without done	or restrictions			1
Net Assets or Fund Balances 24 25 26 27 28 29 30	Net assets with donor re	estrictions			
힏	Foundations that do not for	ollow FASB ASC 958, check here 🕒 🔀			<u> </u>
괴	and complete lines 26 thre	ough 30			
ි 26	Capital stock, trust prine	cipal, or current funds			
S 27	Paid-in or capital surplus of	r land, bldg , and equipment fund			,
<u>س</u> 28	Retained earnings, accumi	ulated income, endowment, or other funds	167,154.	374,743.	
Q 29		d balances (see instructions)	167,154.	374,743.	
<u>a</u> 30	Total liabilities and	net assets/fund balances (see	1.55 1.51		
			167,154.	374,743.	
		nges in Net Assets or Fund Bala			T
		palances at beginning of year - Part			1.67 154
	-	ed on prior year's return)			167,154
		line 27a			201,489
		ded in line 2 (itemize) ► ATCH 4		3	6,100
					374,743
	creases not included in			5	274 742
6 To	al net assets or fund b	palances at end of year (line 4 minus	s line 5) - Part II, column ((b), line 29 6	374,743

Pa	t IV. Capital Gains	and Losses for Tax on Inv	estment Income			
		scribe the kind(s) of property sold (for erick warehouse, or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a						
b						
С						
d						
е						·····
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
a				ļ		
b						
С						
d						
e	***************************************		h. th - for a data 12/21/60			
	Complete only for assets s	howing gain in column (h) and owned	I .		Gains (Col (h) ga (k), but not less t	
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	
a						
b						
<u>C</u>						
d						
<u>e</u>				 		
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		
3		gain or (loss) as defined in sections				
	•	Part I, line 8, column (c) See ins				
				3		
Pai	rt V Qualification l	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
Was		the section 1912 tax on the distrib	outable amount of any year in the h	ase perio	qs [] Yes 💢 No
		n't qualify under section 4940(e)				
1	Enter the appropriate a		ar, see the instructions before maki	ing any er T	tries (d)	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2018	1,563,284.	1.60 006	-		1 505035
	2017	1,844,957.	160,082.	ļ		1.525075
	2016	1,075,715.	190,175. 275,776.	 		5.656448
	2015	1,634,269.	292,324.			5.926074 5.704266
	2014	4,590,734.	292,324.	 		5.704266
2	Total of line 1, column ((d)		2		8.811863
3		io for the 5-year base period - divid				
	•	foundation has been in existence	-	3		7.762373
4	Enter the net value of n	oncharitable-use assets for 2019	from Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investm	nent income (1% of Part I, line 27b)		6		······································
7	Add lines 5 and 6			7		
8	Enter qualifying distribution in the structure of grant VI instructions	itions from Part XII, line 4 greater than line 7, check the box	on Part VI, line 1b, and complete	that part		148,511. x rate See the

Page	4
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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	5)	
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			0.	
	here X and enter 1% of Part I, line 27b			- 1	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
3	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.	
6	Credits/Payments				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a				
b	Exempt foreign organizations - tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c			}	
d	Backup withholding erroneously withheld			, 0.	
7	Total credits and payments Add lines 6a through 6d			<u> </u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ► Refunded ► 11				
	t VII-A Statements Regarding Activities	T	V	N.	
Та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	Yes	No X	
_	participate or intervene in any political campaign?	10			
ь		1 _b		Х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		•		
	published or distributed by the foundation in connection with the activities]	
	Did the foundation file Form 1120-POL for this year?	1c		X	
d	the state of the s				
ŭ	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
•	on foundation managers \$	1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Χ	
_	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Χ	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X	
	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		Ì.		
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	ļ			
	FL,				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	${x}$		
٥	(or designate) of each state as required by General Instruction G? If "No," attach explanation	155		1	
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,"	1			
	complete Part XIV	9		Х	
4.0		۲	-		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х	

Par	t.VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12		-		
-	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13		13	Х	
13	Website address ► N/A	<u> </u>		L
14	The books are in care of ▶ ANA LUCIA DEMATTOS BARRETTO VI Telephone no ▶ 212-692	-1009		
14	Located at \$80 THIRD AVENUE, 12TH FLOOR NEW YORK, NY ZIP+4 \$10022			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			T
13	. Land	• • •		
16	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16		16		Х
	over a bank, securities, or other financial account in a foreign country?		L	
	the foreign country ▶			
Par	t.VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
u cu	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	T	Yes	No
1.	•	<u> </u>		1
ıa	During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	Single-si			
	(c) runnish goods, services, or racinities to (c) decept them from a disquantied person			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			1
	the benefit or use of a disqualified person)?	1		
	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)			
_	termination of government out thee, in terminating within our days)			li
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	1b		
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	10		ļi
_	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		X
2	were not corrected before the first day of the tax year beginning in 2019?	10		
2				
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
a	6d and 6o) for tax year (c) had principled before 20102			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
J	(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		X
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·				
3~	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
h	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or]
D	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		
Дa	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	†	X
	Did the foundation mives during the year any amount in a mariner that would jeopardize its charkable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Par	VILE: Statements Regarding Activities	for Which Form	4720 May Be Red	uired (con	tinued)			- 5 -
5a	During the year, did the foundation pay or incur any am	ount to		· · · · · · · · · · · · · · · · · · ·			Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	on 4945(e))?	. Yes	X No		,	• •
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or	n,			, ,	:
	directly or indirectly, any voter registration drive?			. Yes	X No		١,	
	(3) Provide a grant to an individual for travel, study, or			1 1	X No	1.		
	(4) Provide a grant to an organization other than a	charitable, etc., ord	anization described i	n		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	٠ ا	' '
	section 4945(d)(4)(A)? See instructions				XNo		١, ٦	
	(5) Provide for any purpose other than religious, c						 	1
	purposes, or for the prevention of cruelty to children				XNo			l' i
b	If any answer is "Yes" to 5a(1)-(5), did any of the				scribed in	-	ľ	3
	Regulations section 53 4945 or in a current notice rega-					5b		
	Organizations relying on a current notice regarding disa				_			
С	If the answer is "Yes" to question 5a(4), does the				_	_		,
_	because it maintained expenditure responsibility for the		•		X No		,	7
	If "Yes," attach the statement required by Regulations s	_		• —				
6a	Did the foundation, during the year, receive any ful	, ,	ectly to hav premili	ms				
	on a personal benefit contract?	•			X No			
b	Did the foundation, during the year, pay premiums, dire					6b		X
	If "Yes" to 6b, file Form 8870	,	•					····
7a	At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	Yes	X No			,
b	If "Yes," did the foundation receive any proceeds or ha					7b		
8	Is the foundation subject to the section 4960 tax on pa	vment(s) of more tha	an \$1.000.000 in				· .	
	remuneration or excess parachute payment(s) during the	•	·	. Yes	X No			
Par	Information About Officers, Directo	rs, Trustees, Foo	undation Manager	s, Highly F	aid Empl	oyees,		
1	and Contractors List all officers, directors, trustees, and foundat	ion managers and	their compensation	See instru	ctions			
•		(b) Title, and average	(c) Compensation	(d) Contrib	utions to	(e) Expens	se acco	unt.
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee be and deferred or	nefit plans ompensation	other all		
TCF	. 5		0.		0.			0.
		1						
	Compensation of five highest-paid employees	(other than thos	se included on lin	e 1 - see	Instruction	ns). If n	one,	ente
	"NONE."	I	Γ	(d) Contrib	utions to			
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee	benefit	(e) Expens		
		devoted to position	, , .	plans and compen		Other an	owanc	
	NONE	<u></u>						
			1	1				

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3 Five highest-paid independen	t contractors for professional services. See	instructions. If none, enter "NONE	
	of each person paid more than \$50,000	(b) Type of service	(c) Compensation
A TOUL C		_	160 565
ATCH 6			162,565
		-	
		_	
		_	
		-	
	r \$50,000 for professional services		
	Charitable Activities		
	ritable activities during the tax year. Include relevant stati conferences convened, research papers produced, etc.	stical information such as the number of	Expenses
1 N/A			
2			
			
3			
			
4			
· · · · · · · · · · · · · · · · · · ·			
	am-Related Investments (see instructions	<i>'</i>	
Describe the two largest program-related in NONE	ivestments made by the foundation during the tax year on line	es 1 and 2	Amount
HONE			•
2			
All other program-related investments. See in	nstructions		
3	-		
NONE			

Form **990-PF** (2019)

ALANA USA FOUNDATION, INC. 39-2079600 Form 990-PF (2019) Page 8 Part X. Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a 1b 1c Reduction claimed for blockage or other factors reported on lines 1a and 2 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations, check here > and do not complete this part) 2a Tax on investment income for 2019 from Part VI, line 5 Income tax for 2019 (This does not include the tax from Part VI). . 2b 2c Distributable amount before adjustments Subtract line 2c from line 1. 3 4 5 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

			. [
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	13,148,511.
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	13,148,511.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,148,511.
	Note The amount on line 6 will be used in Part V column (b) in subsequent years when co	alculat	iting whether the foundation

will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2019)

Par	t XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
	`` `				0.
	line 7				· · · · · · · · · · · · · · · · · · ·
	Undistributed income, if any, as of the end of 2019				ļ
	Enter amount for 2018 only				
b	Total for pnor years $20\underline{17}$, $20\underline{16}$, $20\underline{15}$				1
3	Excess distributions carryover, if any, to 2019				
а	From 2014 4,576,118.				
b	From 2015 1,620,480 .				
С	From 2016 1,066,206.				1
d	From 2017 1,836,953.				İ
e	From 2018 1,563,284.				
	Total of lines 3a through e	10,663,041.			1
	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$13,148,511.				
	Applied to 2018, but not more than line 2a Applied to undistributed income of prior years				· · · · · · · · · · · · · · · · · · ·
	(Election required - see instructions)				,
	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2019 distributable amount				
е	Remaining amount distributed out of corpus	13,148,511.			l
	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
	Enter the net total of each column as indicated below:		:		1
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	23,811,552.			
ь	Prior years' undistributed income Subtract				ŀ
	line 4b from line 2b				1
	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				!
	Subtract line 6c from line 6b Taxable				
	amount - see instructions				l i
	Undistributed income for 2018 Subtract line				1
	4a from line 2a Taxable amount - see				i
	instructions				,
	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2020				
				·	1
	Amounts treated as distributions out of corpus				l i
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	<u> </u>			<u> </u>
	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	4,576,118.			
9	Excess distributions carryover to 2020.		-		
	Subtract lines 7 and 8 from line 6a	19,235,434.			
0	Analysis of line 9			·- ·-	1
	Excess from 2015				
	Excess from 2016 1,066,206.				
	Excess from 2017 1,836,953.				
	Excess from 2018 1,563,284.				1
	Excess from 2019 13,148,511.				
				, - +	<u>'</u>

NOT APPLICABLE

1 a	If the foundation has	•		· ·	ating			
	foundation, and the rulin	•			▶∟		, , , , , , , , , , , , , , , , , , ,	
	Check box to indicate		is a private operating	_	n section [4942(j)	(3) or 4942	<u>(j)(5)</u>
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	T	<u>/</u>	(e) Total	
	justed net income from Part I or the minimum investment	(a) 2013	(b) 2018	(c) 2017	(d)/2	016	A	
	return from Part X for each							
	year listed							
b	85% of line 2a							
С	Qualifying distributions from Part							
	XII, line 4 for each year listed .							
d	Amounts included in line 2c not used directly for active conduct of exempt activities							
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line	1						
,	2d from line 2c							
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)				<u> </u>			
b	"Endowment" afternative test- enter 2/3 of minimum invest-							
	ment return shown in Part X.							
	line 6 for each year listed							
С	"Support" alternative test - enter							
	Total support other than gross investment income,							
	(interest, dividends rents	1						
	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 sup- port from an exempt							
	organization							\
	(4) Gross investment income .			h ambail falsa farrad		¢= 000 -		
.Fa	rt XV Supplemer any time d	ntary Information (luring the year - see	instructions.)	conly if the found	ation nad	\$5,000 O	r more in asse	ets at
1	Information Regardin	-						
а	List any managers of						red by the found	dation
	before the close of any	y tax year (but only if tr	ney nave contributed	more than \$5,000) (S	see section t	007(0)(2))		
		DE MATTOS VILLEI	<u>-</u>					
b	List any managers of					an equally	y large portion o	of the
	ownership of a partner	rsnip or other entity) of	wnich the foundatio	n nas a 10% or greate	rinterest			
	/-							
	N/A	0	0.6.1					
2	Information Regardin	_						
	Check here ► X if the unsolicited requests from the complete items 2a, b,	or funds If the found	ation makes gifts, gr	to preselected cha ants, etc, to individu	rıtable orga als or orgar	nizations a lizations ui	and does not a nder other condi	iccept itions,
a	The name, address, a			he person to whom ap	pplications sh	ould be add	Iressed	
	T. 6							
Œ	The form in which app	dications should be su	omitted and informati	on and materials they	/ snould incil	ıae		
	Any submission deadle	lines						
d	Any restrictions or lifactors	ımıtatıons on awards	, such as by geog	raphical areas, charit	able fields,	kinds of	institutions, or	other

Supplementary Information (continued)									
Part XV. Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual,	Foundation	1						
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount					
a Paid during the year	or substantial contributor	recipient	1						
a value canning and your									
ATCH 7									
			1						
]								
	1								
	1								
				,					
]							
		1							
	·								
				10.005.000					
Total	 			12,925,990.					
b Approved for future payment		_							
		1							
	;								
				•					
		,							
•									
•									
	L	<u></u>	<u>.</u>						
Total			► 2h						

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
Enter gross	amounts unless otherwise indicated		ated business income		y section 512, 513, or 514	(e) Related or exempt
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
а						
				1		
f				1		
	and contracts from government agencies			1		"
_	ship dues and assessments					
	n savings and temporary cash investments •					
	s and interest from securities					
	al income or (loss) from real estate					J
	financed property					
	ebt-financed property					
	income or (loss) from personal property					
	vestment income					
	oss) from sales of assets other than inventory					
•	me or (loss) from special events					
	ofit or (loss) from sales of inventory.					
	venue a					
е						
12 Subtotal	Add columns (b), (d), and (e)					
	ld line 12, columns (b), (d), and (e)				13	
	eet in line 13 instructions to verify calc					
Part XVI-	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	
Line No.	Explain below how each activit	v for whic	h income is reported i	ın column (e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	-			•	
				-,	,	
			·			
						

Form 99	U-PF (2			A FOUNDATION, INC			33 201300		ye i J
Part	XVII	Information Ro Organizations	egarding Trar	nsfers to and Trans	actions an	d Relationships Wi	th Noncharitab	le Ex	emp
1 D	id the	organization direct	ly or indirectly	engage in any of the fo	ollowing with	any other organization	n described	Yes	No
ın	sec	tion 501(c) (other	than section	501(c)(3) organization	ns) or in se	ection 527, relating	to political	1	İ
		ations?							
a T	ransfe	ers from the reportin	ng foundation to	a noncharitable exemp	ot organization	of:			
)	<u> </u>
(2	2) Oth	er assets					<u>1a(2</u>	3	ļ
		ransactions [.]							
				mpt organization					ļ
				able exempt organization					<u> </u>
				assets					ļ
(4	l) Rei	mbursement arrang	ements				<u>1b(</u> 4	<u>)</u>	
									<u> </u>
(€	i) Per	formance of service	s or membersh	nip or fundraising solicita	itions		<u>1b(</u> (<u>)</u>	ļ
				ts, other assets, or paid					
				es," complete the follow					
				ices given by the repor					
V	alue II	n any transaction of	r sharing arrang	gement, show in colum	n (d) the val	ue of the goods, other	assets, or service	es rec	eived
(a) Line	no	(b) Amount involved	(c) Name of r	nonchantable exempt organiza	tion (d)	Description of transfers, trans	actions, and shanng a	rangeme	ents
		N/A			N/	Α			
						-			
		<u> </u>							
				· ·					
				-					
					1				
d-	escrib) (other than se	filiated with, or related ction 501(c)(3)) or in se				Yes _] No
		(a) Name of organization	n .	(b) Type of organ	ization	(c) Descr	iption of relationship		
						ļ			
									
									
				ined this return, including accom- axpayer) is based on all information			it of my knowledge and	belief, i	t is true
Sign		MILLO	•		.		May the IRS disc	uss this	retum
Here		Mull		06/19/2020	PR PR	ESIDENT	with the preparer	shown	below?
пете	Sign	ature of officer or trustee		Date	Title		See instructions.	X Yes	Nto
Paid		Print/Type preparer's na	ime	Preparer's signature	00		Check X if PTIN		
		STEPHEN P ERB		mentes	K.Br.	06/19/2020	· · · · · · · · · · · · · · · · · · ·	0134	32
Prepa			rephen P. E			Firm's E	EIN ▶26-0845	921	
Use C	Only	Firm's address > 39	9 CAVEN ROA	D					

Form 990-PF (2019)

724-593-6048

15658-2010 Phone no

LIGONIER, PA

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

ALANA USA FOUNDATIO	N,INC.	39-2079600			
Organization type (check on	e)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a priv	vate foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private	foundation			
	501(c)(3) taxable private foundation				
Note: Only a section 501(c)(instructions	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule See			
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, or property) from any one contributor. Complete Parts I and II. See inscontributions.				
Special Rules					
regulations under s 13, 16a, or 16b, ar	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form that received from any one contributor, during the year, total contributor, during the year, total contributor amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	rm 990 or 990-EZ), Part II, line ibutions of the greater of (1)			
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-E. I the year, total contributions of more than \$1,000 exclusively for religional purposes, or for the prevention of cruelty to children or animals.	ious, charitable, scientific,			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
Caution: An organization tha 990-EZ, or 990-PF), but it mu	it isn't covered by the General Rule and/or the Special Rules doesn't foust answer "No" on Part IV, line 2, of its Form 990, or check the box of to certify that it doesn't meet the filing requirements of Schedule B (Fo	file Schedule B (Form 990, on line H of its Form 990-EZ or on its			

Employer identification number 39-2079600

Part I	Contributors (see instructions) Use duplicate copies	s of Part I if additional space is ne	eded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANA LUCIA DEMATTOS BARRETO VILLELA C/O 670 UNIVERSITY AVENUE LOS ALTOS, CA 94022	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ANA LUCIA DEMATTOS BARRETO VILLELA C/O 670 UNIVERSITY AVENUE LOS ALTOS, CA 94022	\$100,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ANA LUCIA DEMATTOS BARRETO VILLELA C/O 670 UNIVERSITY AVENUE LOS ALTOS, CA 94022	\$ \$	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
44	ANA LUCIA DEMATTOS BARRETO VILLELA C/O 670 UNIVERSITY AVENUE LOS ALTOS, CA 94022	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

39-2079600

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is nee	ded
(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 organization ALANA USA FOUNDATION, INC.

Employer identification number 39-2079600

Pårt III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additional and the second	the year from any ons completing Par e year (Enter this in	one contributor. On till, enter the total of formation once.	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I				
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	fer of gift	
	Transferee's name, address, an	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	-	
	Transferee's name, address, a	na ZIP + 4	Relatio	nship of transferor to transferee

2019 FORM 990-PF 39-2079600	ATTACHMENT 1		D NET ADJUSTED CHARITABLE SES INVESTMENT NET CHARITABLE OOKS PURPOSES	118,121.	110 101
ALANA USA FOUNDATION, INC.		FORM 990PF, PART I - LEGAL FEES	REVENUE AND AND EXPENSES PER BOOKS	DUANE MORRIS	C TRECE

ATTACHMENT

39-2079600

- OTHER PROFESSIONAL FEES

PART I

FORM 990PF,

DESCRIPTION .

CONSULTING

REVENUE AND EXPENSES PER BOOKS

44,444.

44,444.

TOTALS

CHARITABLE PURPOSES

44,444.

44,444.

ALANA USA FOUNDATION, INC.

CHMENT

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EXPENSES
OTHER
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PART
990PF,
FORM

	REVENUE
	AND
	EXPENSES
DESCRIPTION	PER BOOKS
OFFICE EXPENSES	18,090
PUBLIC RELATIONS	999
ADVERTISING	25,840
CONTRACT LABOR	550

	PER BOOKS	18,090.	. 899	25,840.	559.	
1	ц					

45,157.

TOTALS

,157.
 45

18,090. 668. 25,840. 559.

CHARITABLE PURPOSES

ATTACHMENT	4

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

6,100. PRIOR YEAR ADJUSTMENT

> 6,100. TOTAL

ALANA USA FOUNDATION, INC.

EXPENSE ACCT ALLOWANCES AND OTHER ATTACHMENT 5 CONTRIBUTIONS BENEFIT PLANS 0 0 0 0 TO EMPLOYEE 0 0 0 . COMPENSATION 2019 FORM 990-PF TITLE AND AVERAGE HOURS PER - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES WEEK DEVOTED TO POSITION PRESIDENT/DIRECTOR GRAND TOTALS DIRECTOR DIRECTOR DIRECTOR ANA LUCIA DEMATTOS BARRETTO VILLELA ISABELLA VIEIRA MACHADO HENRIQUES 880 THIRD AVENUE, 12TH FLOOR NEW YORK, NY 10022 880 THIRD AVENUE, 12TH FLOOR 880 THIRD AVENUE, 12TH FLOOR NEW YORK, NY 10022 880 THIRD AVENUE, 12TH FLOOR FORM 990PF, PART VIII NEW YORK, NY 10022 MARCOS BESSI NISTI NEW YORK, NY 10022 WILLIAM HEUSELER NAME AND ADDRESS

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2019 FORM 990-PF ALANA USA FOUNDATION, INC.

39-2079600

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

	ATTACHM	ENT 6
NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
DUANE MORRIS LLP 1540 BROADWAY NEW YORK, NY 10036-4086	LEGAL	118,121.
JULIE DE BARBAYREC 21 HOWELL AVENUE LARCHMONT, NY 10538	CONSULTING	44,444.
	TOTAL COMPENSATION	162,565.

ATTACHMENT 7

FORM 990PE, PART VV - GRANTS AND CONTRIBUTIONS PAID DUKING THE YEAR

	PELATIONSHIP TO SUBSTANTIAL CONTKIBUTOR PAD		
RECIPIENT NAME AND ADDPESS	FOUNDATION STATUS OF RECIPIENT	PURFOSE OF GRAWT OR CONTRIBUTION	AMOUNT
ZPRIZE FOUNDATION 800 CORPORATE POINTE, SUITE 350 CULVER CITY, CA 90230	NONE PC	TO SPONSOF A COMPETITION THROUGH APRIZE FOUNDATION IN ORDER TO ENHANCE THE UNDERSTANDING OF THE RAINFOREST ECOSISTEM FOR PRESERVATION PURPOSES	, 500, 000 دي.
DOWN SYNDROME INTERNATIONAL 7-9 CHAPEL STREET EXMOUTH DEVON UNITED KINGDOM EX81HR	NONE PC	TO SUFFORT OPERATIONAL COSTS KELATED TO DOWN SYBDROME DAY IN NEW YOPK, NY	066
MASSACHUSSETTS GENERAL HOSPITAL 55 FRUIT STREET BOSTON, MA 02114	NONE PC	TO ESTABLISH THE DOWN SYNDROME PROGRAM ENDOWNENT FUND AT MASSACHUSSETTS GENERAL HOSPITAL THE PROGRAM WILL HELP ADVANCE ACTIVITIES AINED AT IMPROVING THE HEALTH AND QUALITY OF LIFE FOR INDIVIDUALS WITH DOWN SINDROME	1, 000, 000
MASSACHUSSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSSETTS TVENUE CANBRIDGE, 14 02139	NONE PC	TO ESTABLISH A DOWN SYNDROME RESEARCH CENTER BUILDING	9,400,000
THIRD SECTOP NEW ENGLAND 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111	NONE PC	TO SUPPORT THE CAMPAIGN FOR A COMMERCIAL-FREE CHILDHOOD	25,000

12,925,990

TOTAL CONTRIBUTIONS PAID