Form **990-PF** 

### **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.

De	nartme	ent of the Treasury	▶	Do not enter	r social security numbers o	n this form as	it may be m	ade public.	LU   J
Inte	ernal R	evenue Service		Go to www	.irs.gov/Form990PF for ins			formation.	Open to Public Inspection
Fo	r cale	ndar year 2019 or	tax year beginning			, and <u>e</u>	nding		
N	ame o	of foundation						A Employer identification	n number
	<u>RMI</u>	FOUNDAT	NOI	<del></del>	· · · · · · · · · · · · · · · · · · ·			82-3745711	<u> </u>
N L	umber	and street (or P O box	x number if mail is not d	elivered to stree	et address)		Room/sulte	B Telephone number	
<u> </u>	<u>613</u>	<u>JEFFERS</u>	ON AVENUE	2				504-250-02	212
C	ty or	town, state or prov	ince, country, and Z	IP or foreign	postal code			C If exemption application is p	pending, check here
_]	MET	TAIRIE, L	A 70001				_		
G	Chec	k all that apply:	Initial retur	'n	Initial return of a	former public o	harity	D 1. Foreign organization	s, check here
			Final return	1	Amended return				
			Address ch	nange	Name change		^ <i>(</i>	Foreign organizations me check here and attach co	eeting the 85% test, proputation
Н	Chec	k type of organizat	ion: X Sectio	n 501(c)(3) e	exempt private foundation		14	E If private foundation sta	
	_		nonexempt charitabl		Other taxable private found	lation	,	under section 507(b)(1	
			ssets at end of year	T	ting method: X Cash	Accr	ual	F If the foundation is in a	
		Part II, col. (c), line	-		Other (specify)			under section 507(b)(1	
	▶\$	,			mn (d), must be on cash ba	sis.)			,(D), 0110011 11010 P
_	art	Analysis of Rev	enue and Expenses		(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		The total of amour	nts in columns (b), (c), ar the amounts in column (	nd (d) may not	expenses per books	(b) Net in		income	for charitable purposes (cash basis only)
_	1		fts, grants, etc., rece	<del></del>	50000.	4010 19 11		N/A	(Cash San
١	2		he foundation is not required t			-		弘道建立大學等	
	3	Interest on savings	•			· · · · · · · · · · · · · · · · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE REAL PROPERTY.
	4		terest from securities	•	54709.		54709.		STATEMENT 1
	1 '	a Gross rents	terest nom securities	3	3=103.	<u> </u>	J = 1 0 J .	-	24 1 (20) 12 (4 4 2 3 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 2 3 4 4 4 4
	1 .	Net rental income or	(lace)		. A	1. 1. 15 St.	14.55 6		Mar. 11 24 12 13 11 20 1 1 1 1 1
	1 -		`		15595.			7	\$25.860 F 869 - 5 - 5 - 5
9	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Gross sales price for	m sale of assets not on rall 5.1	6832.	13333.			4 1 3 4 4 5 4 5 4 5 4 5 4 5 5 5 5 5 5 5 5 5	7, -7 7 -7, 8, 7 0
Revente	7		ome (from Part IV, line 2)		-69 54 3, Fam. 18, 4 . 1		15595.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ď	8	Net short-term ca			7 7 7 7 7 7	1. 125.38.4	13333.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 - 7
	9	Income modifical				72.7		<del></del>	
	"	Gross sales less reti			<del></del>				-
	Ι.	and allowances	<del> </del>		The markets of the	Secretary Con		The state of the state of the state of	[ [ [ ] ] ] [ [ ] [ ] [ ] [ ] [ ] [ ] [
		Less Cost of goods Gross profit or (Id			17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 03 2	- Jane 1	and confir from collecting	Marie Company Company
	11	Other income	255)			47.5 5 .	, 24 VI	<del></del>	THE PROPERTY OF THE PARTY OF TH
	12	•	1 through 11		120304.	<del> </del>	70304.	<del> </del>	C. T. T. C.
	13	Total, Add lines			120304.		0.		0.
	1	•	ficers, directors, trustees calaries and wages	s, etc		-			<u></u>
	14	• •	·			<del>}</del>			
V.	15	Pension plans, er	iipioyee delieliis			<del>                                     </del>			
Expenses	IDa	Legal fees  Accounting fees	cm	MT 2	2643.	<del> </del>	0.		0.
Ž,		•		MT Z	2043.				<del>, 0.</del>
		Other professiona	ai iees		11		11.	RECEIVED	
Administrative	17	Interest	am	мт 3	11. 434.		116 116	T. COLIVE	0.
	18	Taxes		мт. Э	434.			AUCAS	E SO
2	19	Depreciation and	achienou				<del> </del> ≥	AUG 0 3 2020	
	20	Occupancy			<del></del>	<del> </del>			18
ן לַ	21	Travel, conference	•		<u></u>			OGDEN, UT	-J.K.
יול ל מי		Printing and publi		MITS A	0001		0001	- JLIV, U	
	23	Other expenses		MT 4	8801.	ļ	8801.		0.
rat	24		nd administrative		11000		0010		_
Operating			nes 13 through 23		11889.	18 8 17 at	8812.	4.5 \$2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2.5 \ 2	0.
,	25	Contributions, gif	- '		125054.	A. 4. 3. 18 1. 1.	Sec. 25.	in Elgent Ly in the Charles in	125054.
	26	-	nd disbursements.						
	╀	Add lines 24 and			136943.		8812.		125054.
	27	Subtract line 26 fr	rom line 12			<del>                                   </del>	4.		
			er expenses and disbur		-16639.		· · · · · ·		3.18.6.
			ICOME (If negative, ente		ļ		51492.	the top test of the	
	C	Adjusted net inco	me (if negative, enter -	0-)			1 17 54 - 5	N/A	W. 新华·

# Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
	(must agree with end-of-year figure reported on prior year's return)	1	2303673.
2	Enter amount from Part I, line 27a	2	-16639.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	2287034.
5	Decreases not included in line 2 (itemize) PENALTIES	5	12.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	2287022.
×.	Total net assets of fund balances at end of year (inte 4 finities into 5). That it, column (b), into 25		2207

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orm 990-PF (2		FOUNDATION and Losses for Tax on Ir	vestment	t Income				8	2-374	5711	Page 3
	(a) List and describe	the kind(s) of property sold (for exarehouse; or common stock, 200 sh	mple, real esta		ΙP	How ac - Purci - Dona	hase I		acquired lay, yr.)	(d) Dat (mo., d	
la SEE A	TTACHED SO				10			VARI		12/3	
	TTACHED SO		<u> </u>		<u> </u>			VARI		12/3	
	AL GAINS										
d											
<u>e</u>					L.,						
(e) Gros	s sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (	g))	
<u>a</u>	90245.			8899							<u> 1252.</u>
<u>b</u>	455303. 1284.			44224	4.						<u>3059.</u> 1284.
<u>c</u> d	1204.			<del></del>							1404.
e		<del></del>			$\neg$						
	nly for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69.			(1	) Gains (C	ol. (h) gain	minus	
(i) FMV a	s of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			còl.	(k), but i	not less that (from col. (	1 -0-) <b>or</b>	
a											1252.
b					]						3059.
<u>c</u>										:	1284.
<u>d</u>				·							
е		<u> </u>			$\neg$				·	<u>-</u>	<u>_</u>
Capital gain i	net income or (net cap	outal loss) $ \begin{cases} & \text{If gain, also enter} \\ & \text{If (loss), enter -0-} \end{cases} $	in Part I, line i - in Part I, line	7 7	}	2				1	<u>5595.</u>
If gain, also e	enter in Part I, line 8, o	s) as defined in sections 1222(5) an column (c).	d (6):		7						
If (loss), ente	r -0- in Part I, line 8	nder Section 4940(e) for	Dodugod	Tay on Not		3	ont Inc	omo	N/A		·····
		<del></del>					ent mo	OTTIE			
	e by domestic private f)(2) applies, leave thi	foundations subject to the section 4 is part blank.	1940(a) tax on	net investment in	come	-)					
		on 4942 tax on the distributable am	ount of any ye	ear in the base per	ıod?					Yes	X No
		under section 4940(e). Do not com	<del></del>								
	<del></del>	ach column for each year; see the ir	estructions bet	fore making any ei				_		(d)	
	(a) se period years (or tax year beginnin	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchar	itable-u	use assets		Distrib	(d) ution ratio ded by col.	(c))
Caleffual year	2018	9 111/	17086.				05103		(coi. (b) div		53098
	2017	<b>--</b>	2000.				68050				01016
	2016										
	2015										
	2014										
Total of line	I, column (d)							2		.05	54114
_		-year base period - divide the total o ce if less than 5 years	on line 2 by 5.0	), or by the numbe	er of y	ears	•	3		.02	270 <u>57</u>
Enter the net	value of noncharitable	e-use assets for 2019 from Part X, I	ıne 5					4		2223	3968.
		, , , , , , , , , , , , , , , , , , , ,					•				0174.
Multiply line	a uy iine s	•	•					5		0(	
Enter 1% of r	net investment income	(1% of Part I, line 27b)						6	1		615.
Add lines 5 a	nd 6							7	<del></del>	60	789.
, ,	ng distributions from	•						8		125	5054.
	ual to or greater than I /I instructions.	ine 7, check the box in Part VI, line	1b, and compl	lete that part using	a 1%	6 tax ra	nte. 				
23521 12-17-19				_					F	orm <b>990-F</b>	<b>F</b> (2019)

	n 990-PF (2019) RML FOUNDATION		3745			Page 4	,
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see	instru	JCTIO	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.						
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1		,	<b>4</b> F	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🕱 and enter 1%	1	<u> </u>		0	<u> 15.</u>	
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)		1			0	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2	<del> </del>			$\frac{0.}{15.}$	
3	Add lines 1 and 2	3				T2.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	5			-	$\frac{0.}{15.}$	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	- <del>5</del> -			0	13.	
6	Credits/Payments:						
	2019 estimated tax payments and 2018 overpayment credited to 2019	┨ .					
	Exempt foreign organizations - tax withheld at source  6b  0.	┧					
	Tax paid with application for extension of time to file (Form 8868)  6c 0.	-	١.				
	Backup withholding erroneously withheld 6d 0.	-	1			^	
_	Total credits and payments. Add lines 6a through 6d	7	<del> </del>		-	0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8_				<del>17.</del>	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u>32.</u>	
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10					
	Enter the amount of line 10 to be: Credited to 2020 estimated tax	11	L				
	rt VII-A Statements Regarding Activities			T	Vaa	N <sub>1</sub>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	: in			Yes		
	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 defin	nition		1b	<u> </u>	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or					}	
	distributed by the foundation in connection with the activities.						
	Did the foundation file Form 1120-POL for this year?			1c_		<u>X</u>	
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	ĺ		
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.	-				`	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1			
	managers. ► \$0.			1		۰,	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2_		<u>X</u>	
	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	or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		,_	4a		<u>X</u>	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>	
	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:			i			
	By language in the governing instrument, or			-			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	e law					
	remain in the governing instrument?			6_	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	X		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					r	
	LA			•		-	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_		j		
	of each state as required by General Instruction G? If "No," attach explanation SEE STATEM		6	8b		<u>X</u>	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar					7
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		_	9		<u>X</u>	٠
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	<u>TMT</u>	7_	10	X.		
			For	m <b>99</b> 0	)-PF	(2019)	

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had not been removed from jeopardy before the first day of the tax year beginning in 2019?

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

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Part VIII. Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, er	iter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		:
	<del></del>	
<del></del>	<del></del>	
T. J. J. annahar of others are a company of the com		▶ 0
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		
	atistical information such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant standard of organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1 N/A		
2		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A	on miles i dile E.	ranount
1		
)		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must of		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		222222
a Average monthly fair market value of securities	1a	2223828
b Average of monthly cash balances	1b	34008
c Fair market value of all other assets	1c	0055006
d Total (add lines 1a, b, and c)	1d	2257836
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) <u>1e</u>	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0,
3 Subtract line 2 from line 1d	3	2257836
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see if	nstructions) 4	33868
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part	V, line 4 5	2223968
6 Minimum investment return Enter 5% of line 5	6	111198
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(4) foreign organizations, check here ▶ ☐ and do not complete this part.)	5) private operating foundations and certain	
1 Minimum investment return from Part X, line 6	1	111198
2a Tax on investment income for 2019 from Part VI, line 5	615.	
b Income tax for 2019. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	615
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	110583
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	110583.
6 Deduction from distributable amount (see instructions)	6	0 .
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, li	ne 1 7	110583.
Part XII Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>125054</u> .
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc	c., purposes 2	
Amounts set aside for specific charitable projects that satisfy the:	`	
a Suitability test (prior IRS approval required)	. 3a	
b Cash distribution test (attach the required schedule)	3b	<u></u>
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Par	t XIII, line 4	125054
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investmen	t	
income. Enter 1% of Part I, line 27b	5	615
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	124439.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating whether the foundation qualifies for the	section

4940(e) reduction of tax in those years.

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d)</b> 2019
1 Distributable amount for 2019 from Part XI,		. '	- ,	
line 7			,	110583.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014		•		- 1
<b>b</b> From 2015	-		-	. , ,
c From 2016		- ( )	у.	, w
d From 2017		~ · · · ·	,	
e From 2018 5884.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	46.76	··
f Total of lines 3a through e	5884.	س پردسه		, n
4 Qualifying distributions for 2019 from				7
Part XII, line 4: ►\$ 125054.	, , ,	• •		
a Applied to 2018, but not more than line 2a		- , , , ,	0.	<u> </u>
b Applied to undistributed income of prior	_			, , , ,
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		· '	<u>-</u> - , ,	
(Election required - see instructions)	0.	·	<u> </u>	
d Applied to 2019 distributable amount			· .	110583.
e Remaining amount distributed out of corpus	14471.	, , , , , , , , , , , , , , , , , , , ,		
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	***	,	0.
6 Enter the net total of each column as indicated below:		,		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	20355.		<u> </u>	
b Prior years' undistributed income. Subtract	,			J
line 4b from line 2b	7 × +	_0.	· · · · · · · · · · · · · · · · · · ·	- 
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed	- - -	0.	A CONTRACTOR OF THE PROPERTY O	
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions	· · · · · · · · · · · · · · · · · · ·	0.		, , , , , ,
e Undistributed income for 2018. Subtract line	, ' ' '			• •
4a from line 2a. Taxable amount - see instr.			0.	4, -
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must		,		0
be distributed in 2020	<u> </u>			0.
7 Amounts treated as distributions out of			·	·
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)				1,1/4 125,124
8 Excess distributions carryover from 2014	0.			
not applied on line 5 or line 7	<u>U•</u>	19.		
9 Excess distributions carryover to 2020	20255	·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Subtract lines 7 and 8 from line 6a	20355.			, , , , , , , , , , , , , , , , , , ,
0 Analysis of line 9:		•	• •	
a Excess from 2015				
b Excess from 2016 c Excess from 2017		-		ye.
d Excess from 2018 5884.			•	
		· · · · · · · · · · · · · · · · · · ·		-
e Excess from 2019 14471.			·	

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Form **990-PF** (2019)

	UNDATION		<del></del>		745711 Page 10
Part XIV Private Operating			II-A, question 9)	<u> N/A</u>	<del> </del>
1 a If the foundation has received a ruling	or determination letter the	at it is a private operating			
foundation, and the ruling is effective f	or 2019, enter the date of	f the ruling	<b>&gt;</b>		/
b Check box to indicate whether the four	ndation is a private operat	ing foundation described	in section	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	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					/
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					}
d Amounts included in line 2c not				+ /	
used directly for active conduct of					
•					
exempt activities			<del> </del>	+/	<del> </del>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		<del> </del>	<del> /-</del>		<del> </del>
alternative test relied upon:	1				
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:	·			<del>                                     </del>	<del> </del>
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		<del> </del>	<del> </del>	<del> </del>	<del> </del>
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		<u> </u>	<u> </u>	<u> </u>	<u> </u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see inst	ructions.)			·
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	no have contributed more	than 2% of the total con	tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed i	more than \$5,000). (See :	section 507(d)(2).)			
SEE STATEMENT 8					
b List any managers of the foundation wh			(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha	is a 10% or greater intere	st.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pi	ograms:		
Check here <b>X</b> If the foundation of the foundation makes gifts, grants, etc.					iests for funds. If
a The name, address, and telephone num					
a The hame, address, and telephone hulf	iver of email address Of t	ne person to whom applit	anona anoniu de audies	ooud.	
b. The farm in which and head of the state of		A.a. and make all the col	a culd makedat		
<b>b</b> The form in which applications should l	oe submilleo and imornia	mon and materials they si	iodia niciaae.		
c Any submission deadlines:	·				
d Any restrictions or limitations on award	s. such as hy neggraphic	al areas, charitable fields	kinds of institutions or	other factors	
5 7mg (comonono or miniations on award	o, adam as by goograpillo	ai ai cas, chanabic licius,	ao or montations, or	onioi 1401013.	
<del>-</del>					
23601 12-17-19					Form <b>990-PF</b> (2019)

Total

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3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual,	Faundation	Durance of great ar	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NEW ORLEANS STARTUP FUND INC		501(C)(3)	CREATE JOBS AND	,
1100 POYDRAS STREET, SUITE 3475			ECONOMIC PROSPERITY	
NEW ORLEANS, LA 70163			FOR THE TEN PARISH	
·			REGION OF GREATER NEW	
			ORLEANS BY PROVIDING	25000
SECOND HARVEST FOOD BANK OF NEW		501(C)(3)	PROVIDE FOOD ACCESS,	
ORLEANS		1	ADVOCACY, EDUCATION	
700 EDWARDS AVENUE			AND DISASTER RESPONSE	
NEW ORLEANS, LA 70123				10000
ST CATHERINE OF SIENA		CHURCH	TO FORM AND SEND FORTH	
105 BONNABEL BOULEVARD			A COMMUNITY OF	
METAIRIE, LA 70005			DISCIPLES OF JESUS	
			CHRIST WHO WITNESS BY	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	JOYFULLY LIVING THE	18000
ST JUDE CHILDREN'S RESEARCH HOSPITAL		501(C)(3)	ADVANCE CURES, AND	
262 DANNY THOMAS PLACE			MEANS OF PREVENTION,	
MEMPHIS, TN 38105	,	1	FOR PEDIATRIC	
			CATASTROPHIC DISEASES	
<del></del>			THROUGH RESEARCH AND	15000
TIGER ATHLETIC FOUNDATION		501(C)(3)	SUPPORT LOUISIANA	
PO BOX 711			STATE UNIVERSITY AND	
BATON ROUGE, LA 70821			ITS ATHLETIC AND	
		-04 (-) (0)	EDUCATION PROGRAMS	10000
THE PLEASE FOUNDATION		501(C)(3)	TO INSPIRE AT-RISK	
30 MARYLAND DRIVE			CHILDREN TO A FUTURE	
NEW ORLEANS, LA 70124			OF EXCELLENCE THROUGH	
			EDUCATIONAL,	2554
LEUKEMIA AND LYMPHOMA SOCIETY		501(C)(3)	TO CURE LEUKEMIA,	2554
3636 SOUTH I-10 SERVICE RD. SUITE 304		501(0)(3)	LYMPHOMA, HODGKIN'S	
METAIRIE, LA 70001			DISEASE AND MYELOMA,	
adiatiti, in 70001			AND IMPROVE THE	
			QUALITY OF LIFE OF	2500
CHRISTIAN BROTHERS FOUNDATION INC		501(C)(3)	TO ASSIST IN	2300
8 FRIEDRICHS AVENUE			OPERATIONS OF THE	
NEW ORLEANS, LA 70124			SCHOOL, SUPPORT THE	
illi onderio, di rossi			NEEDS OF THE BROTHERS	
			AND SUPPORT THE LOCAL	1000
UNIVERSITY OF NEW ORLEANS FOUNDATION	<del></del>	501(C)(3)	TO PROMOTE THE	
2021 LAKESHORE DRIVE, SUITE 420			WELL-BEING AND	
NEW ORLEANS, LA 70122			ADVANCEMENT OF THE	
,			UNIVESITY OF NEW	
			ORLEANS AND ALL THE	1000
	<del></del>			
Total from continuation sheets	<del></del>		<del></del>	85054

. . . .

Part XVI-A	Analysis of Income-Producing Activities
------------	-----------------------------------------

Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code		
ab	-		<del>                                     </del>		
c	<del> </del>		<del>                                     </del>		
d			1		· · · · · · · · · · · · · · · · · · ·
e			1 -		<u> </u>
			<del>  </del>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	.		11		
4 Dividends and interest from securities			14	54709.	
5 Net rental income or (loss) from real estate:		- ', ',	-; ,	and the second	* 1
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			1 1		
than inventory			14	15595.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	-				·
b	_		<u> </u>		
C	-		<del>  - </del>		
d	_		l — l		
e			<del> </del> -	70204	
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		70304.	70304.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.	<b>,</b>			13	70304.
		- 1' - 1 C			<del></del>
Part XVI-B Relationship of Activities	to the Accom	plishment of Ex	cempt P	urposes	
Line No. Explain below how each activity for which in	come is reported in co	olumn (e) of Part XVI-A	contribute	d importantly to the accomp	olishment of
the foundation's exempt purposes (other the					
N/A					
				·	<del></del>
					<del></del>
		_ <del></del>		<del></del>	
				<del></del>	
	<del></del>		<del> </del>		
				<del></del>	5 000 DE :
923621 12-17-19					Form <b>990-PF</b> (2019)

P00737425

Firm's EIN ightharpoonup 72 - 1178850

Phone no. 504-835-4419

Paid

Preparer

**Use Only** 

Title

Check

13/2 self- employed

Signature of officer or trustee

Print/Type preparer's name

Firm's name ► MURPHY

MURPHY

Firm's address ► 110 VETERANS BLVD.

METAIRIE,

& WARREN

TIMOTHY G.

SUITE 370

Date

Preparer's signature

LA 70005

### 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

82-3745711 RML FOUNDATION Organization type (check one). Filers of: Section: Form 990 or 990-F7 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II. 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2019) LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

RML	F	0	U.	ND	AT	'IC	N

82-3745711

	OUNDATION		<u> </u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed.	<b></b>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT AND MADELEINE LEITHMAN 613 JEFFERSON AVENUE METAIRIE, LA 70001	\$50000.	Person X Payroll
(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 Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions.)
3452 11-06	19	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

RML	F	OUND	ATI	ON

82-3745711

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space 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
		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b>\$</b>	
(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

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Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2019)		Page 4			
Name of or	ganization		Employer identification number			
RML F	DUNDATION		82-3745711_			
Part III	Exclusively religious, charitable, etc., contributio from any one contributor. Complete columns (a) to completing Part III, enter the total of exclusively religious, chuse duplicate copies of Part III if additional s	hrough (e) and the following line en aritable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yea			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift	t			
	Transferee's name, address, and	1 ZIP + 4	Relationship 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) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift					
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee			
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	(e) Transfer  Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECUR	ITIES ST	CATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
JPMORGAN CHASE	55993.	128	4. 54709.	54709.	
TO PART I, LINE 4	55993.	128	54709.	54709.	
FORM 990-PF		ACCOUNTI	NG FEES	ទា	PATEMENT 2
DESCRIPTION		EXPENSES	(B) NET INVEST- MENT INCOME		
LEGAL AND ACCOUNTING	<del></del> -	2643.	0.		0.
TO FORM 990-PF, PG 1,	LN 16B	2643.	0.		0.
FORM 990-PF		TAX	ES	Sī	'ATEMENT 3
DESCRIPTION		EXPENSES	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES AND LICENSES	<del></del>	434.	0.	· · · · · · · · · · · · · · · · · · ·	0.
TO FORM 990-PF, PG 1,	LN 18	434.	0.		0.
FORM 990-PF		OTHER E	XPENSES	ST	'ATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISORY F	EES	8801.	8801.		0.
TO FORM 990-PF, PG 1,	LN 23	8801.	. 8801.		0.

FORM 990-PF O	THER INVESTMENTS		STATEMENT	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	ľ
BROKERAGE ACCOUNT INVESTMENTS	OKERAGE ACCOUNT INVESTMENTS COST 2174973			
TOTAL TO FORM 990-PF, PART II, L	2174973.			
FORM 990-PF EXPLANATION CONCE	RNING PART VII-A,	LINE 8B	STATEMENT	6
EXPLANATION  NOT REQUIRED TO FILE BY THE STATE	E OF LOUISIANA			
· · · · · · · · · · · · · · · · · ·	BSTANTIAL CONTRIB VII-A, LINE 10	UTORS	STATEMENT	7
NAME OF CONTRIBUTOR	ADDRESS			
ROBERT AND MADELEINE LEITHMAN	613 JEFFERSON METAIRIE, LA			

NAME OF MANAGER

ROBERT LEITHMAN MADELEINE LEITHMAN