Form **990-PF** 

EXTENDED TO NOVEMBER 16, 2020 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.

1912

2019

- '			ndar year 2019 or tax yea		11, 2019	, and ending	DEC 31, 2019	Open to Public Inspection
		_				, and onling	A Employer identification	
•	Name of foundation —REGENT PHILANTHROPIC FOUNDATION INC						Employer lucium caudi	i ildilibei
	C/O ACADIA FAMILY OFFICE					84-3343778		
	Number and street (or P O box number if mail is not delivered to street address)  Room/suite					B Telephone number	<del></del>	
	EP 1, 11350 MCCORMICK RD 702					410-595-22		
	City		own, state or province, co		postal code		C if exemption application is p	<del></del>
			T VALLEY, MI				- " exemption approaches to p	
					D 1. Foreign organizations	s, check here		
				Final return	Amended return			
				Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, imputation
	H C	hecl	type of organization:	X Section 501(c)(3) e		al	E If private foundation sta	tus was terminated
	<u>L</u>	J S€	ection 4947(a)(1) nonexem	npt charitable trust	Other taxable private found	ation 09	under section 507(b)(1)	
			arket value of all assets at		ing method: L Cash	Accrual	F If the foundation is in a	60-month termination
			Part II, col. (c), line 16)		ther (specify) MODIFI		under section 507(b)(1)	(B), check here
	<b>→</b>				mn (d), must be on cash bas	SIS.)		
	Ŗā	IŢ	Analysis of Revenue ar (The total of amounts in colunecessarily equal the amount	imns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
		_			<u> </u>	111COTTE	Income	(cash basis only)
3/		1	Contributions, gifts, gran		6,000,000.	100 - 100 -		
1		2	Interest on savings and temporals investments	in is not required to attach Sch. B. orary	58.	58.	Missing and American Control of the	COMPANY 194
9		4	cash investments  Dividends and interest from			30.		STATEMENT 1
			Gross rents	Jili Seculides			-	The State of the S
			Not roptol incomo or (loca)			STATES STATES STATES STATES AND STATES AND STATES OF STATES AND ST		
	-	68	Net gain or (loss) from sale of	assetsmet on line 10	CHANGE WALLE WAS A ABOX TORSE.	AND SELECTION OF THE PROPERTY	A STATE OF THE STA	
	Jue -	t	Net gain or (loss) from sale of Gross sales price for all assets on line 6a	Receive Herenu	Service			2
	Revenue		Capital gain net income (from		IK: USB	0.	100 170 170 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	æ	8	Net short-term capitaliga	m - 1/2			200-77, 5000003, 180007 a.a. 2700-000,00000000 c. 180	Description of the second seco
		9	Income modifications	NOV REAL 2	VALUE OF THE PARTY			
		10a	Gross sales less returns and allowances		CARONIA SECULIAR AND	Asia Asia Asia Asia Asia Asia Asia Asia	The state of the s	
		t	Less Cost of goods sold		Solling State Control State State State	The Sales Start Charles	The Marie Marie Marie Marie No.	Line of the State
			Gross profit or (loss)	Ogden, U	<b>"</b>			The State of the S
		11	Other income		9,004.	1,826.	0.	STATEMENT 2
	_	12	Total. Add lines 1 throug	jh 11	6,009,062.	1,884.	0.	
~	<b>、</b>	13	Compensation of officers, dire		0.	0.	0.	0.
$\sim$	5	14	Other employee salaries a					
Bato	2 2		Pension plans, employee	Denetits				
hing	Sus		Legal fees Accounting fees					
90.0	Expenses		Other professional fees	STMT 3	1,199.	0.	0.	1,199.
Received In atching Ogden	<u>е</u>	17	Interest	DIMI 3	1,155.			1,199.
	aţį	18	Taxes					
¥	ist	19	Depreciation and depletio	n				4434582445074450935653
Z	Administrative	20	Occupancy					95. T. S. 1989 - 1879   T. 1889   V.
4	Ad	21	Travel, conferences, and	meetings		,		
,23	and	22	Printing and publications					
Š	g.	23	Other expenses					5
≱	Operating	24	Total operating and adm	inistrative				-
Ź	be		expenses. Add lines 13 t	-	1,199.	٠0٠	0.	1,199. 3,129,848.
JAN 0 4 2025 ANNED	٦	25	Contributions, gifts, grant	•	3,129,848.			3,129,848.
		26	•	ursements.	] 111 11	_		2 424 24=
MAY			Add lines 24 and 25	40.	3,131,047.	0.	0 •	3,131,047.
~		27	Subtract line 26 from line		2 979 015			
			Excess of revenue over expen		2,878,015.	1,884.	CANAL SALES	<u> </u>
<b>4</b>			Net investment income (if no Adjusted net income (if no	=		1,884.	0.	CONTRACTOR STATE OF THE STATE O
2021	02350			egative, enter -0-) work Reduction Act Notic	e see instructions	17/1000035441117.h		Form <b>990-PF</b> (2019) 922
	J. J.J.		is Ling torraper	WORK HOUSENING FOR HOUSE	e, ese mondellone.	1		101111 000-1 1 (2019)
					0040 0500			

C/O ACADIA FAMILY OFFICE

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D	**************************************	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	=
<b>%</b> T	aıږلا	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	,	2,878,015.	2,878,015.
	2	Savings and temporary cash investments	-		,
	3	Accounts receivable			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	ł	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			_
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	The first state of the state of		
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
		Other assets (describe )			
	16	Total assets (to be completed by all filers - see the	*	2	
		instructions. Also, see page 1, item I)	0.	2,878,015.	2,878,015.
	ı	Accounts payable and accrued expenses			70.7
	18	Grants payable			22.00
ies	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			6179
Liabilities	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			**************************************
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow FASB ASC 958, check here	0.	0.	
(A)		and complete lines 24, 25, 29, and 30.			
ces	24	· · · · · · · · · · · · · · · · · · ·			
alar	25	Net assets with donor restrictions			
Ä	-	Foundations that do not follow FASB ASC 958, check here			4 4 4 4 4
Š		and complete lines 26 through 30.			
卢	26	Capital stock, trust principal, or current funds	0.	0.	
ts	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
3881	28	Retained earnings, accumulated income, endowment, or other funds	0.	2,878,015.	S 3400 S 3 No.
Net Assets or Fund Balan	29	Total net assets or fund balances	0.	2,878,015.	
Ž	_				
	30	Total liabilities and net assets/fund balances	0.	2,878,015.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
			<u> </u>	- <b></b>	<del>,</del>
		net assets or fund balances at beginning of year - Part II, column (a), line	29		_
		t agree with end-of-year figure reported on prior year's return)		- 1	2,878,015.
		amount from Part I, line 27a r increases not included in line 2 (itemize)		2	2,070,013.
		ines 1, 2, and 3	· · · · · · · · · · · · · · · · · · ·	3	2,878,015.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29		2,878,015.
Ť		The state of the s			Form <b>990-PF</b> (2019)

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(a) List and describe	the kind(	osses for Tax on Ir s) of property sold (for exa	mple, real est		<u></u> (Б)	How a	cquired		acquired	(d) Date sold
2-story brick w	arehouse;	or common stock, 200 sha	s. MLC Co.)		D	- Don	ation	(mo., c	lay, yr.)	(mó., day, yr.)
<u>1a</u>										
	NE									<del></del>
C					├					
<u>d</u>		<u> </u>	<del>.</del>	<u> </u>	$\vdash$	-				<del>_</del>
<u>e</u>	(4)	Depreciation allowed	(a) Co	ect or other bacic				/b\ C	ar (lace)	
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale						iain or (loss) s (f) minus (			
<u>a</u>	ļ				_					<u> </u>
b c					_				_	<u> </u>
<u>d</u>		<del></del>			-					
e										
Complete only for assets shown	ng gain in	column (h) and owned by	the foundation	n on 12/31/69.			(	1) Gains (C	Col. (h) gain	minus
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		xcess of col. (1) r col. (j), if any				l. (k), but	not less than (from col. (I	ı -0-) or
a	$\vdash$	···			$\dashv$					
b	-									
С		·					_		<del></del>	
d	Ì									· · · · · · · · · · · · · · · · · · ·
e										
2 Capital gain net income or (net ca	apıtal loss	If gain, also enter  If (loss), enter -0	n Part I, line In Part I, line	7	}	2				
3 Net short-term capital gain or (lo		`		, ,	7					
If gain, also enter in Part I, line 8,			u (0).		J					
If (loss), enter -0- in Part I, line 8	•	<i>,</i>				3				
PartiV Qualification U	Inder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent In	come		
(For optional use by domestic private	e foundati	ons subject to the section 4	1940(a) tax or	n net investment in	come	e.)			•	N/A
If section 4940(d)(2) applies, leave t	his part bl	ank.								
	•									
Was the foundation liable for the sec If "Yes," the foundation doesn't qualif					iod?					Yes No
1 Enter the appropriate amount in					ntries	l.				
(a)	1	(b)			(c)					
Base periód years Calendar year (or tax year beginni	ng in)	Adjusted qualifying dist	tributions	Net value of no			use assets	;	Distribi (col. (b) divi	ùtión ratio ded by col. (c))
2018	<del></del>		-			-		+-	(55.1 (5) 5.11.	
2017										
2016										
2015										
2014		·					•			
2 Total of line 1, column (d)	_							2		
3 Average distribution ratio for the			on line 2 by 5.	0, or by the numb	er of y	ears/		- 1		
the foundation has been in existe	nce if less	than 5 years						3		
4 Enter the net value of noncharitat	ole-use as:	sets for 2019 from Part X, I	ıne 5					4	,	
5 Multiply line 4 by line 3								5		· · · · · · · · · · · · · · · · · · ·
6 Enter 1% of net investment incon	ne (1% of	Part I, line 27b)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from Part XII, line 4							8			
	u	11116 4						0		

Part VI Excise Tax Based on Investment Income (Section 494	40(a), 4940(b), 4940(e), or		- see ins		ns)	
1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) and		Karatin:	3.300 Sec. 3.300			
	ecessary-see instructions)					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	_ +500/2ki_2kin3 6/1	tisti	38.	
of Part I, line 27b				5 - 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-)					0.	
3 Add lines 1 and 2	, , , , , , , , , , , , , , , , , , ,	3	<u> </u>		38.	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)	4	<u> </u>	<u>-</u>	0.	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	· · · · · · · · · · · · · · · · · · ·	5	<del></del>		38.	
6 Credits/Payments:		7/2016	, 79 <b>98</b> 49 ( ) 738		YAKAMIN .	
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a   0					
<b>b</b> Exempt foreign organizations - tax withheld at source	6b 0	-				
c Tax paid with application for extension of time to file (Form 8868)	6c 30,000	-				
d Backup withholding erroneously withheld	6d 0					
7 Total credits and payments. Add lines 6a through 6d		7		30,00	00.	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is att	ached	8			0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9		_		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>&gt;</b>	10		29,96	62.	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	29,962. Refunded ►	11			0.	
<u>Part VII-A</u> Statements Regarding Activities						
1a During the tax year, did the foundation attempt to influence any national, state, or local legi	slation or did it participate or interven	e in	7/10 A	Yes	No	
any political campaign?			[1	a	X	
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purpo		nition		b	X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any materials published or		43			
distributed by the foundation in connection with the activities.	-					
c Did the foundation file Form 1120-POL for this year?				С	X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	· ·					
(1) On the foundation. > \$ 0 . (2) On foundation manager		<u>.</u>	1.7%			
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	diture tax imposed on foundation					
managers. ► \$ 0 •				34,71	36	
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?		74.2°	2	X	
If "Yes," attach a detailed description of the activities.			7.6	763	This .	
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	0		—	3 X	<u>v</u>	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the ye	arz	NT	⊢	a	X	
<ul><li>b If "Yes," has it filed a tax return on Form 990-T for this year?</li><li>5 Was there a liquidation, termination, dissolution, or substantial contraction during the year</li></ul>	a	14	— —	$\rightarrow \rightarrow \rightarrow$	X	
If "Yes," attach the statement required by General Instruction T	•		100	5		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	aither.					
By language in the governing instrument, or	suiei.					
By state legislation that effectively amends the governing instrument so that no mandato	ny directions that conflict with the sta	a law				
remain in the governing instrument?	Ty uncouons that connect with the sta	C IGVV	2	6 X		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	niete Part II col (c) and Part XV		<u> </u>	<del></del>		
sid the fourtainer of the section of	plote i art ii, ooi. (o), and i art xv			2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(250)	
8a Enter the states to which the foundation reports or with which it is registered. See instruction	ons <b>&gt;</b>					
MD			<b>*</b>			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)					
of each state as required by General Instruction G? If "No," attach explanation	.,		8	b X	Millio Fellillis	
9 Is the foundation claiming status as a private operating foundation within the meaning of si	ection 4942(j)(3) or 4942(i)(5) for cal	endar				<u>}</u> _
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," cor		•	<i>*************************************</i>		X	(J
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	•	TMT	4 1	0 X		
	<del>-</del>		Form 9	90-PF (2	2019)	

P	art 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	7//42		111
	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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<b></b>
	Website address ► N/A	بت		·
14	The books are in care of ► ACADIA FAMILY OFFICE  Telephone no. ► 410-59	<del>95-2</del>	<del>266</del>	
	Located at ►EP1, 11350 MCCORMICK RD. STE 702, HUNT VALLEY, MD ZIP+4 ►23			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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 name of the	1000000	C. Sulfa	
	foreign country			
ĮΡε	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	a During the year, did the foundation (either directly or indirectly);	Grisslety.	s Silveria	
	(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?	10 11		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		11/15	
_	(5) Transfer any income or assets to a disqualified person (or make any of either available			2.
	for the benefit or use of a disqualified person)?	1	v. 566 <b>3</b> 672	100
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	messagger .		
	if the foundation agreed to make a grant to or to employ the official for a period after	14000		
	termination of government service, if terminating within 90 days.)			
b	olf 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		X
	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 were not corrected		77. 13.47.	14/241 5/10-241
	before the first day of the tax year beginning in 2019?	1c		Х
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)):			
а	a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	14 12 18 18 18 18 18 18 18 18 18 18 18 18 18		
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b	w 644A4.00	N. ( 1911 1st part
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
٥.	Delth for data hald we show 200 data had a large state of the state of			
Ja	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?  Yes X No			
U	of "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 boldings acquired by gift or begins to (3) the lapse of the 10, 15, or 20 year first place believe period 2 (les Form 4730).			
	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,			
Ac	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Y. A. H. S.	X
υ	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?			WA V
		4b	DE	(2010)
	F0.	rm <b>990</b>	-rr (	(ZU 19)

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	<b>Required</b> (contin	ued)	-	
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	- T	es 🗶 No 🥻	iningiaim indibitation	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	• •			
any voter registration drive?			es 🔀 No 🥻		11 1/4 11/4 1 2011
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	<u></u>			
4945(d)(4)(A)? See instructions		X Y	es 📖 No 📗		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			es 🗶 No 🚪		100
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	·	n Regulations	<u> </u>		
section 53.4945 or in a current notice regarding disaster assistance? See instru				5b	X
Organizations relying on a current notice regarding disaster assistance, check h					1000
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it maintai				
expenditure responsibility for the grant?		X Y	es 🔛 No 📗		1000
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					3:25
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es 🗶 No		
a personal benefit contract?	oroanal hanefit contrast0	¥(	es 🔼 NO 🏻		7.7
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b. file Form 8870.	ersonal benefit contract?		A.	6b	X
	h-14 4	$\Box_{\mathbf{v}}$	es 🗶 No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		14		75	111 111
<ul> <li>b If "Yes," did the foundation receive any proceeds or have any net income attribuse</li> <li>ls the foundation subject to the section 4960 tax on payment(s) of more than \$</li> </ul>			N/A	7b	11 1 Ve 2 26
excess parachute payment(s) during the year?	r,000,000 in remuneration of		es 🗶 No		
Part VIII Information About Officers, Directors, Trusto	ees Foundation Ma			1,0 200	1 / 1
Paid Employees, and Contractors	oco, i odiladiloli ivid	inagers, riigin	•		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.		<del></del> -		
A New York Address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exp account	ense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account	, otner nces
	TREASURER, SE	CRETARY,	DIRECTOR		
EP1 11350 MCCORMICK RD. STE 702					
HUNT VALLEY, MD 21031	2.00	0.	0.		0.
	PRESIDENT, DI	RECTOR			
500 5TH AVE, 14TH FLOOR					
NEW YORK, NY 10020	1.00	0.	0.		0.
				1	
				<u></u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contabutance		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	other
NOVE	devoted to position		compensation	allowai	nces
NONE					
	<del></del>				
				ļ <del></del>	
				<u> </u>	
		İ			
Total number of other employees paid over \$50,000	<u></u>				0
Total number of other employees paid over \$50,000			Enem	990-DE	_ <u> </u>

Page 7

Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
	$\dashv$	
,		
<del></del>		
	<b>_</b>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the duced, etc.	Expenses
37/3		
1N/A	<del></del>	-
·····		4
2		1
	·	
3		
		-
4		j
		1
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		· · · · · ·
3	· · · · · · · · · · · · · · · · · · ·	-
		4
	<del></del> -	4
	<del></del>	4
Total. Add lines 1 through 3	<b>&gt;</b> _	0.
		Form <b>990-PF</b> (2019)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 1a b Average of monthly cash balances 3,106,127. 1b c Fair market value of all other assets 1c d Total (add lines 1a, b, and c) 1d 3.106.127e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 3,059,535. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 34,368. 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.) Minimum investment return from Part X, line 6 34,368. 2a Tax on investment income for 2019 from Part VI, line 5 2a 38. b Income tax for 2019. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2c 38. 34.330. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 34,330. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 34 ,330. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 3,131,047. 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 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За **b** Cash distribution test (attach the required schedule) 3Ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 3,131,047 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2019)

Form 990-PF (2019)

4940(e) reduction of tax 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 Part XI,		. ,		
line 7				34,330.
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				
<b>b</b> From 2015				
c From 2016				
<b>d</b> From 2017				
e From 2018				
f Total of lines 3a through e	0.	·		
4 Qualifying distributions for 2019 from		"		
Part XII, line 4: ►\$ 3,131,047.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior			_	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				34,330.
e Remaining amount distributed out of corpus	3,096,717.		·	
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:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,096,717.			,
b Prior years' undistributed income. Subtract	3,030,717			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
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.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	,	:		
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014	ا ۸			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.	2 006 717			
Subtract lines 7 and 8 from line 6a	3,096,717.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018 e Excess from 2019 3,096,717.				
e Excess from 2019 3,096,717.				

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

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

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c Any submission deadlines:

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C/O ACADIA FAMILY OFFICE

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Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year GENERAL SUPPORT BELEV ECHAD INC.C/O JOSEPH BALISOK N/A ₽C 1650 EASTERN PARKWAY STE 303 BROOKLYN, NY 11233 10,000. SPEYER LEGACY SCHOOL N/A ₽C GENERAL SUPPORT 211 WEST 61ST ST NEW YORK, NY 11023 15,000. NC SEE ATTACHED EUROPEAN FOUNDATION FOR SUPPORT OF N/A EXPENDITURE CULTURE 6 C/O, THE WESTIN DRAGONARA RESORT RESPONSIBILITY ST. JULIANS, MALTA STJ 3143 STATEMENT NO. 1, 2, 3 2,719,411. MUSIC FOR FUTURE CULTURAL FOUNDATION N/A NC SEE ATTACHED 3, ABOVYAN ST. EXPENDITURE YEREVAN, ARMENIA RESPONSIBILITY STATEMENT NO. 4 385,437. ➤ 3a 3,129,848. Total b Approved for future payment EUROPEAN FOUNDATION FOR SUPPORT OF SEE ATTACHED N/A NC EXPENDITURE CULTURE 6 C/O, THE WESTIN DRAGONARA RESORT RESPONSIBILITY ST. JULIANS, MALTA STJ 3143 STATEMENT NO. 2 1,298,849. Total 1,298,849.

Enter gross amounts unless otherwise indicated.	Unrela	ted business income	Exclud	ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code	.,	Code		
a b			+		
0	— <del>                                      </del>	-	+		<u> </u>
d	_		+		
Δ	_		+		
f			<del>†</del>		
g Fees and contracts from government agencies		-	+		· · · <u> </u>
2 Membership dues and assessments	-	-	+		
3 Interest on savings and temporary cash			+-	, , , , , , , , , , , , , , , , , , ,	
investments	ļ		14	58.	
4 Dividends and interest from securities			+	30.	
5 Net rental income or (loss) from real estate:	- 1- 1, 4°	2002 - 11, 5 17/11 11/12 12 13/15 25 21 17/11 1/12 12 14/1	1341 111	no mue saure sayre eser y may	1994 - 1994 1184 11991 1993 1995 - 19
a Debt-financed property	- 2-21 - Mile in	12 million Mr. Ber Sur	₹ r ×		1980 17 3. 1805 1964
b Not debt-financed property			<del> </del>		
6 Net rental income or (loss) from personal			1	<del></del>	
property					
7 Other investment income			18	9,004.	
8 Gain or (loss) from sales of assets other	-		1	2,0020	
than inventory			1 1		
9 Net income or (loss) from special events			1 1		
10 Gross profit or (loss) from sales of inventory			-		+
I 1 Other revenue:			1		
a					
b	_				
b c					
b c d					
c					
c		0.		9,062.	0
c d e		0.	e an la de a	9,062.	9,062
c d e Subtotal. Add columns (b), (d), and (e)		0.	and the first		
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	S.)			13	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	S.)			13	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
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c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
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c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Relationship of Activitie  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other to	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI:B Relationship of Activitie  Line No. Explain below how each activity for which in the foundation's exempt purposes (other to	es to the Acc	omplishment of E	xemp	13 t Purposes	9,062
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# |RartiXVIII | Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

ו טום נו	ne organization directly or indi	rectly engage in any of the followi	ing with any other organizatio	on described in sec	tion 501(c)	Ye	es No
(othe	r than section 501(c)(3) organ	nizations) or in section 527, relatir	ng to political organizations?				
a Trans	sfers from the reporting found:	ation to a noncharitable exempt o	rganization of:				
(1)	Cash					1a(1)	Х
(2)	Other assets					1a(2)	X
<b>b</b> Other	r transactions;						
(1)	Sales of assets to a noncharita	ble exempt organization				1b(1)	X
(2) 1	Purchases of assets from a no	ncharitable exempt organization				1b(2)	X
(3) 1	Rental of facilities, equipment,	or other assets				1b(3)	X
(4)	Reimbursement arrangements					1b(4)	X
	oans or loan guarantees					1b(5)	X
(6)	Performance of services or me	embership or fundraising solicitati	ions			1b(6)	X
		uling lists, other assets, or paid er	• •			1c	X
		"Yes," complete the following sch					
		oundation. If the foundation receiv		ie in any transactio	n or sharing arrangement	t, show in	
		other assets, or services received					
(a)Line no	(b) Amount involved	(c) Name of noncharitab	le exempt organization	(d) Description	n of transfers, transactions, ar	nd sharing arrange	ements
		N/A					
						_	
					<del></del>		
		<u> </u>					
						_	
				ļ	<del> </del>		
				_ <del></del>			
					<del></del>		
				-			
				_			_
<b>0</b> - 1 - 11 -							
		tly affiliated with, or related to, one	e or more tax-exempt organiz	zations described			77
		n 501(c)(3)) or in section 527?				Yes _	X No
D IT Ye	s," complete the following scho (a) Name of org		(h) Type of organization		(a) December of relation		
	N/A	anization	(b) Type of organization		(c) Description of relation	nsnip ————————————————————————————————————	
	N/A						
		<del></del>				<del></del> -	-
			<del> </del>	_			<del></del>
Tı	Inder penalties of periury. I declare	that I have examined this return, includi	ing accompanying schedules and	statements and to the	host of my knowledge		
Sign	and belief t is true, correct, and con	nplate Declaration of preparer (other the	an taxpayer) is based on all inform	ation of which prepare	v han nau knowledge	May the IRS discus	ss this
Here		f-	1 11/11/60	DIRECT	s	hown below? See	ınstr
	Signature of officer or trustee	<u> </u>	Doto	DIRECT	TOR	X Yes	i No
	// Print/Type preparer's na		Date '	Date	Check   if PTIN		
	JOSHUA N.	ime Preparer's s		/ /	self- employed	V	
Paid	MORGENSTER	N, CPA	Met CIA	11/16/20	· - 1	112257 <i>6</i>	2
Prepar			CE LLC	1190	Firm's EIN ▶ 81-3	0132576	
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300 0	Firm's address ► EX	FC DI.7 1 11250	MCCORMICK R	D, STE 70	<del></del>		
	I	NT VALLEY, MD 2		ν, οι <b>ε</b> /(	1	505 226	6
		MI AWDDEI' MD 7	2 T A 2 T			595-226	
						Form <b>990-P</b>	<b>r</b> (2019)

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#### 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

REGENT PHILANTHROPIC FOUNDATION INC C/O ACADIA FAMILY OFFICE 84-3343778 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private 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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

religious, charitable, etc., contributions totaling \$5,000 or more during the year

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)

Name of organization
REGENT PHILANTHROPIC FOUNDATION INC
C/O ACADIA FAMILY OFFICE

**Employer identification number** 

84-3343778

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
' (a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	YANUSHI, LLC EP1, 11350 MCCORMICK RD, STE 702 HUNT VALLEY, MD 21031	s6,000,000.	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
		\$	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.)
(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

Name of organization
REGENT PHILANTHROPIC FOUNDATION INC
C/O ACADIA FAMILY OFFICE

**Employer identification number** 

84-3343778

Part II	Noncash Property (see instructions). Use duplicate copies of Part	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
(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 **Employer identification number** REGENT PHILANTHROPIC FOUNDATION INC C/O ACADIA FAMILY OFFICE 84-3343778 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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

#### REGENT PHILANTHROPIC FOUNDATION INC C/O ACADIA FAMILY OFFICE

84-3343778

## Form 990-PF. Part VII-B. Line 5c - Expenditure Responsibility Statement

Recipient's Name and Address	NO. 1	Grant Amount	Date of Grant	Amount Expended	Verification Date
EUROPEAN FOUNDATION FOR SUPPORT	CULTURE				
6 C/O THE WESTIN DRAGONARA REPOR					
ST. JULIANS, MALTA, STJ 3143	,	1,335,750.	10/21/19	1,335,750.	04/22/20
Purpose of Grant					
TO SUPPORT THE PERFORMANCE OF TH	E "JESTER'S WEDDING"	ICE SHOW. THE			
PERFORMANCE SUPPORTED AN ARTISTI	C ENDEAVOR TO EDUCAT	E THE PUBLIC REGARDING.			
AND TO DEEPEN THE AUDIENCE'S UND	ERSTANDING OF, CLASS	ICAL MUSIC AND DANCE.			
NOTE - GRANT OF \$1,335,750 WAS S	PLIT INTO TWO PAYMEN	TS - \$668,790 ON			
10/21/19 AND \$666,960 ON 10/24/1	9				
Date of Reports by Grantee	Diversion	ns by Grantee			
4/22/2020	BASE	D ON REPORTS, THE GRANT	WAS USED	FOR ITS INTENDED	)
	PURP	OSES		-	
		<del></del>			
Results of Verification					
THE FOUNDATION REVIEWED THE REPO					
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY O	R RELIABILITY (REG.	53.4945-5(C)),			
	R RELIABILITY (REG.	53.4945-5(C)),			
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY O	R RELIABILITY (REG.	53.4945-5(C)),			
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY O	R RELIABILITY (REG.	53.4945-5(C)),			
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY O	R RELIABILITY (REG.	53.4945-5(C)),			
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY OREQUIRING THE FOUNDATION TO UNDE	R RELIABILITY (REG. RTAKE ANY VERIFICATI	53.4945-5(C)), ON OF THE REPORTS.	Date of Greet	Amount Furnance	Varification Date
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY O	R RELIABILITY (REG.	53.4945-5(C)),	Date of Grant	Amount Expended	Verification Date
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY OREQUIRING THE FOUNDATION TO UNDE	R RELIABILITY (REG. RTAKE ANY VERIFICATI	53.4945-5(C)), ON OF THE REPORTS.	Date of Grant	Amount Expended	Verification Date
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY OREQUIRING THE FOUNDATION TO UNDE	R RELIABILITY (REG. RTAKE ANY VERIFICATI	53.4945-5(C)), ON OF THE REPORTS.	Date of Grant	Amount Expended	Verification Dat
THE FOUNDATION REVIEWED THE REPOREASON TO DOUBT THEIR ACCURACY OREQUIRING THE FOUNDATION TO UNDE	R RELIABILITY (REG. RTAKE ANY VERIFICATI  NO. 2	53.4945-5(C)), ON OF THE REPORTS.	Date of Grant	Amount Expended	Verification Dat

Recipient's Name and Address NO. 2	Grant Amount	Date of Grant	Amount Expended	Verification Date
		I		
		l		
EUROPEAN FOUNDATION FOR SUPPORT CULTURE				
6 C/O THE WESTIN DRAGONARA REPORT, DRAGONARA RD				
ST. JULIANS, MALTA, STJ 3143	664,144.	11/20/19	664,144.	04/22/20

Purpose of Grant

TO SUPPORT THE ARMENIAN STATE SYMPHONY ORCHESTRA PERFORMANCES WITH CELEBRATED VIOLINIST MAXIM VENEGROV. THE PROGRAM WAS PRESENTED IN EIGHT MAJOR EUROPEAN CITIES WHERE THE PERFORMANCES EDUCATED THE PUBLIC AND INCREASED THE APPRECIATION OF CLASSICAL MUSIC.

Date of Reports by Grantee	Diversions by Grantee
4/22/2020	BASED ON REPORTS, THE GRANT WAS USED FOR ITS INTENDED
	PURPOSES

Results of Verification

THE FOUNDATION REVIEWED THE REPORTS UPON RECEIPT. THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY (REG. 53.4945-5(C)) REQUIRING THE FOUNDATION TO UNDERTAKE ANY VERIFICATION OF THE REPORTS.

923661 04-01-19

## REGENT PHILANTHROPIC FOUNDATION INC C/O ACADIA FAMILY OFFICE

84-3343778

### Form 990-PF, Part VII-B, Line 5c - Expenditure Responsibility Statement

Recipient's Name and Address	NO. 3	Grant Amount	Date of Grant	Amount Expended	Verification Date
EUROPEAN FOUNDATION FOR SUPPORT	CULTURE				
6 C/O THE WESTIN DRAGONARA REPOR	r, DRAGONARA RD		}	ł	
ST. JULIANS, MALTA, STJ 3143		719,517.	12/10/19	719,517.	08/06/20
Purpose of Grant				<del></del>	
TO SUPPORT FOUR CONCERT PERFORMA	NCES BY THE MALTESE	PHILHARMONIC ORCHESTRA			
(MPO). THE MPO COLLABORATED WIT	H A PROMINENT MUSIC	IAN FOR EACH OF THE			
PERFORMANCES, INCLUDING WORLD-RE		•			
ALESSANDRO TAVERNA AND SHOMO MIN	-		3		
FAMOUS CONSTANTIN ORBELIAN. SERG	•	•			
CONDUCTED THE FINAL THREE CONCER	•		)		
THE PUBLIC AND INCREASED THE APP	RECIATION OF CLASSI	CAL MUSIC.			
Date of Reports by Grantee	Diversion	ons by Grantee		<del>.</del>	<del> </del>
8/6/2020	BAS	ED ON REPORTS, THE GRANT	WAS USED	FOR ITS INTENDE	)
	PUR	POSES			
Results of Verification					·
THE FOUNDATION REVIEWED THE REPO	RTS UPON RECEIPT. T	HERE HAS NOT BEEN ANY			
REASON TO DOUBT THEIR ACCURACY O	R RELIABILITY (REG.	53.4945-5(C)),			
REQUIRING THE FOUNDATION TO UNDE	RTAKE ANY VERIFICAT	ION OF THE REPORTS.			

Recipient's Name and Address	NO. 4	Grant Amount	Date of Grant	Amount Expended	Verification Date
MUSIC FOR FUTURE CULTURAL FOUNDAY	rion	· ·	ł		
3, ABOVYAN ST.					
YEREVAN, ARMENIA		385,437.	11/13/19	385,437.	01/09/20

#### Purpose of Grant

TO FUND THE "CONTEMPORARY CLASSICS" COMPOSERS' FESTIVAL IN THE ARMENIAN CAPITAL OF YEREVAN. THE AUDIENCES HAD THE UNIQUE OPPORTUNITY TO HEAR MUSIC FROM LEGENDARY MUSICIANS FROM ALL OVER THE WORLD. THE MUSICIANS PERFORMED THE WORKS OF CELEBRATED CONTEMPORARY COMPOSERS WHO HONORED THE PERFORMANCES WITH THEIR PRESENCE AT THE FESTIVAL. THE PERFORMANCES EDUCATED THE PUBLIC AND INCREASED THE APPRECIATION OF CLASSICAL MUSIC.

Date of Reports by Grantee	Diversions by Grantee			
1/9/20	BASED ON REPORTS, THE GRANT WAS USED FOR ITS INTENDED			
	PURPOSES			

#### Results of Verification

THE FOUNDATION REVIEWED THE REPORTS UPON RECEIPT. THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY (REG. 53.4945-5(C)), REQUIRING THE FOUNDATION TO UNDERTAKE ANY VERIFICATION OF THE REPORTS.

923661 04-01-19

FORM 990-PF INTEREST ON SAVI	INGS AND TE	MPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE	REV	A) ENUE BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	
JPM #7006		58.		58.		0.
TOTAL TO PART I, LINE 3		58.		58.		0.
FORM 990-PF	OTHER	INCOME			STATEMENT	2
DESCRIPTION		(A) REVEN PER BO	_	(B) NET INVEST- MENT INCOME		
UNREALIZED GAIN FOREIGN CURRENCY EXCHANGE GAIN/(LOSS)	_		7,178. 1,826.			0.
TOTAL TO FORM 990-PF, PART I, LINE		9,004.		1,826	•	0.
FORM 990-PF (	OTHER PROFE	SSIONAL	FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	NET II				
FILING FEES	1,199	•	0	•	0. 1,19	99.
TO FORM 990-PF, PG 1, LN 16C	1,199	•	0	•	0 1,19	99.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	4
NAME OF CONTRIBUTOR	ADDRESS		
YANUSHI LLC	EP1, 11350 MCCORMICK RD,	STE 702	