## **Return of Private Foundation**

r Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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

Fo	r calen	dar year 2017 or tax year be	eginning		7, and			, 20
	ame of fo					A Employe	er identification number	er
Ly	meTV						82-3920846	
		d street (or P O box number if mail is	not delivered to street address)	Rooi	n/suite	<b>B</b> Telephor	ne number (see instruct	
	) BOX 1						561-212-2166	
		n, state or province, country, and ZIP omE 04101	or foreign postal code			C If exemp	tion application is pend	ing, check here ▶ ☐
G	Check	all that apply: 🗹 Initial reti	urn   Initial return	of a former publi	c charity	D 1. Foreig	n organizations, check	here . ▶□
		☐ Final retu		•			•	_
		☐ Address	change	nge			n organizations meeting here and attach compl	
H	Check	type of organization: 📝 So	ection 501(c)(3) exempt p	rivate foundation	20		foundation status was	
	Section	n 4947(a)(1) nonexempt chard	table trust 🔲 Other tax	kable private foun	dation	section a	607(b)(1)(A), check here	▶ [_]
ı		narket value of all assets at	J Accounting method	l 🗹 Cash 🗌 A	Accruál	F If the fou	ndation is in a 60-mont	h termination _
		f year (from Part II, col. (c),	☐ Other (specify)			under se	ction 507(b)(1)(B), chec	k here ▶ 🗌
_	line 16	<del>`</del>	(i dit i, coldilli (d) ilidet be	on cash basis.)				<del></del>
Li	art i	Analysis of Revenue and Examounts in columns (b), (c), and (d) the amounts in column (a) (see institute amounts).	may not necessarily equal	(a) Revenue and expenses per books		investment icome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
_	1	Contributions, gifts, grants, etc.,		1879.86	<b>***</b> ******			
5	2	Check ► ✓ if the foundation is n			1 10 10 10 10 10 10 10 10 10 10 10 10 10	m · · · · · · · · · · · · · · · · · · ·	an english talah da an da a	ranting in a titu titu. Wadan da 8 [[] [] [] [] [] [] [] [] [] [] [] [] []
/	3	Interest on savings and temp	•	C	1	<u>0, 00, 00, 00, 00, 00, 00, 00, 00, 00, </u>	0	
	4	Dividends and interest from s		C	1	0	0	
1	5a	Gross rents		C	,	0	0	
	b	Net rental income or (loss)	0		14:40	Marin Market		
် <u>စ</u>	6a	Net gain or (loss) from sale o	f assets not on line 10	C				
Revenue	b	Gross sales price for all assets on	line 6a0					
Š	7	Capital gain net income (fron	n Part IV, line 2)			0		
ď	8	Net short-term capital gain .			<b>%</b> ,%%.		0	
	9	Income modifications					0	
	10a	Gross sales less returns and allo			<b>%%</b> %.			
	b	Less: Cost of goods sold .	0		10 10 10 10 10 10 10 10 10 10 10 10 10 1	<u> </u>	Marie Brief St. Marie St. St.	
	C	Gross profit or (loss) (attach s				<u> </u>		
n E	111	Other income (attach schedu		1879.86	<del>'</del>	<del>- 0</del>	0	
(f.	12	Total. Add lines 1 through 11 Compensation of officers, dir		187 9.80			0	Millimitation The Millimit
PS:C	14	Other employee salaries and				0	0	- 0
Expenses	15	Pension plans, employee ber		FD o	1	0	0	0
įĝ	16a	Legal fees (attach schedule)		70 0	<del>                                     </del>	0	0	0
	Ь	Accounting fees (attach sche	dule R APR 1 A	2018	1	0	0	0
Ş	c	Accounting fees (attach sche Other professional fees (attach	ch schedule)	\( \oldsymbol{O} \)		0	0	0
rat	17	Interest	L			0	0	0
St	18	Taxes (attach schedule) (see ins	structions) OGDEN.	0	<u> </u>	0	0	0
n E	19	Depreciation (attach schedule	e) and depletion .			0	0	
þ	20	• •		0	1	0	0	0
Q.	21	Travel, conferences, and mee	<del>-</del>	576.20	1	0	0	0
a	22	Printing and publications .	l de la companya de	1303.66	<del> </del>	0	0	0
gu	23	Other expenses (attach sche		1303.66	<del> </del>	0	0	0
Operating and Administrative	24	<b>Total operating and adm</b> Add lines 13 through 23		1879.86		0	0	0
ğ	25	Contributions, gifts, grants pa	aid	0				0
	26	Total expenses and disbursem		1879.86		0	0	0
	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expen		0				
	b	Net investment income (if n				0		3.1 3.87
_	c_	Adjusted net income (if neg			18 2	<u> </u>	0	000 PF ***
For	raper	work Reduction Act Notice, see	instructions.	Cat N	o 11289X		Fo	m <b>990-PF</b> (2017)

Pa	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	0	0	0
	2	Savings and temporary cash investments	0	U	0
	3	Accounts receivable ▶ 0  Less: allowance for doubtful accounts ▶	and the state of t	and the second s	Miralline ( dillier and linearan linear stillier)
	[	Less: allowance for doubtful accounts ►  Pledges receivable ►  0	0	0	0
	4	Pledges receivable ▶ 0	Marini		and all all and an area and a second
		Less: allowance for doubtful accounts ▶	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other	_	_	
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule) ▶ 0		the same that the same and the same that	Millionaletico Missonia Milletto metrologico
		Less. allowance for doubtful accounts ▶ 0	0	0	0
ts	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
Ž,	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	b	Investments—corporate stock (attach schedule)	0	0	0
	С	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment. basis ▶ 0			
		Less: accumulated depreciation (attach schedule) ▶	0	0	0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment: basis ► 0			
		Less accumulated depreciation (attach schedule) ▶ 0	0	0	0
	15	Other assets (describe ▶ 0	0	0	0
	16	Total assets (to be completed by all filers-see the		1.	
		ınstructions. Also, see page 1, item l)	0	( ~ 0	X 0
	17	Accounts payable and accrued expenses	0	0	
w	18	Grants payable	0	0	
Ë	19	Deferred revenue	0	0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
iat	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe ► 0 )	0	0	
	23	Total liabilities (add lines 17 through 22)	0	0	
<i>'</i> ^		Foundations that follow SFAS 117, check here ▶ ☑			
ĕ		and complete lines 24 through 26, and lines 30 and 31.			
ğ	24	Unrestricted	0	0	
Balances	25	Temporarily restricted	0	0	
d E	26	Permanently restricted	0	0	
_		Foundations that do not follow SFAS 117, check here ▶ □			
ΓĒ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	N/A	N/A	
Net Assets or Fur	28	Paid-in or capital surplus, or land, bldg., and equipment fund	N/A	N/A	
SS	29	Retained earnings, accumulated income, endowment, or other funds	N/A	N/A	
t A	30	Total net assets or fund balances (see instructions)	0	0	
۷e	31	Total liabilities and net assets/fund balances (see			
		ınstructions)	0	0	
	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colu			
		-of-year figure reported on prior year's return)		<u> </u>	0
2		er amount from Part I, line 27a			0
3	Othe	er increases not included in line 2 (itemize) ►		3_	0
4	Add	lines 1, 2, and 3		4	0
5	Decr	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—l		5	0
6	Tota	Il net assets or fund balances at end of year (line 4 minus line 5) $-1$	Part II, column (b), li	ne 30   <b>6</b>	0

Part	IV Capital Gains and	Losses for Tax on Invest	ment Income			
		d(s) of property sold (for example, real e, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<u>1</u> a	NONE					
b						
с						
<u>d</u>						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	or other basis ense of sale		n or (loss) f) minus (g))
a					<del>-</del>	
<u>b</u>			<del>                                     </del>		<del></del>	
c						
d					<del></del>	
е	Complete only for posets show	and account of the and author	l by the farmdeter	2 22 10/01/60		
	Complete only for assets snow	ring gain in column (h) and owned	T			(h) gain minus :less than -0-) <b>or</b>
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) ol (j), if any		rom col (h))
a			<u> </u>			
b			-			
<u>c</u>						
<u>d</u>	<del>-</del>					
е		( If coin	oloo enter in D	art Llina 7		
2	Capital gain net income or	inot canital inee) {	, also enter in Pa i), enter -0- in Pa	3	2	(
3		or (loss) as defined in section, line 8, column (c). See instr				
	5			~ }	3	(
Part	V Qualification Unde	r Section 4940(e) for Red	uced Tax on I	Net Investment	Income	
Was t		this part blank ection 4942 tax on the distrib- ialify under section 4940(e). D			pase period?	☐ Yes ☐ No
1		ant in each column for each ye		<del>_</del>	akıng anv entries	
	(a)	<del></del>	ear, see the man		aking any entires.	(d)
Cale	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value o	(c) of noncharitable-use as		ribution ratio divided by col. (c))
	2016					
	2015	<del></del>				
	2014					
	2013					
	2012			<u>-</u>		
2	Total of line 1, column (d)				. 2	
3		or the 5-year base period—d undation has been in existenc			·	
4	Enter the net value of noncl	haritable-use assets for 2017	from Part X, line	5	. 4	
5	Multiply line 4 by line 3 .	<u> </u>	<u></u>	<u>.</u>	5	=
6	Enter 1% of net investment	t income (1% of Part I, line 27)	b)		. 6	
7	Add lines 5 and 6 .				. 7	
8		is from Part XII, line 4 er than line 7, check the box			. 8 that part using a 1	% tax rate. See th

Part '		instructions)					
	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)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	0					
	here ► and enter 1% of Part I, line 27b						
С	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	0					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	0					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	0					
6	Credits/Payments:						
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0						
b	Exempt foreign organizations—tax withheld at source 6b 0						
С	Tax paid with application for extension of time to file (Form 8868) . 6c 0						
đ	Backup withholding erroneously withheld	haladdin a llain a fall a fair a					
7	Total credits and payments. Add lines 6a through 6d	0					
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	0					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0					
10	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 2018 estimated tax ▶ 0 Refunded ▶ 11	0					
11 Part							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No					
	participate or intervene in any political campaign?	1a v					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	· · · · · · · · · · · · · · · · · · ·					
	instructions for the definition	1b /					
	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						
С	Did the foundation file Form 1120-POL for this year?	1c /					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(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 managers. > \$0						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2 /					
3							
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 V					
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b v					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 V					
	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:						
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6 4					
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 /					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶						
	MAINE						
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	8b					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or						
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"						
	complete Part XIV	9 /					
10		10 1					
_	names and addresses	10 V					

Part	t VII-A Statements Regarding Activities (continued)	_			
			)	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity will	thin the		_	
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions		11		~
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disc	jualified			
	person had advisory privileges? If "Yes," attach statement See instructions	-	12		·
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption appl	cation?	13	~	
	Website address ▶				
14	The books are in care of ▶ Adina Bercowicz Telephone no. ▶	561-	212-2	166	
	l ocated at ▶ 9 Brown Street #3A, Portland, ME		4101		<del>-</del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here.		<b>-</b>		<b>N</b>
		15	• •	•	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other a			Yes	No
	over a bank, securities, or other financial account in a foreign country?	· -	16		~
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the				11/40 n In
	the foreign country ▶				
Part	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		· w m		i vaqqqqq,
· arc	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	. % 1	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	-	6 7 8		
Id	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .   Yes	☑ No		- 1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	I No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	V NO			
	the benefit or use of a disqualified person)?	<b>ⅣNo</b>		- :	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days.)	✓ No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Reg				
b	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1 "	//////////////////////////////////////		
	Organizations relying on a current notice regarding disaster assistance, check here		1B	· ////////////////////////////////////	<i>*************************************</i>
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted ac	te that			
С	were not corrected before the first day of the tax year beginning in 2017?	19.46	//////////////////////////////////////	'nthis Mi	Mit Million.
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a	L	266	11/11/16/16/16	3 (W 1) W
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	private			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and				
a	6e, Part XIII) for tax year(s) beginning before 2017?	✓ No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	E ING			
<b>h</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 49	42(0)(2)		41.7	
D	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)				
	all years listed, answer "No" and attach statement—see instructions.)	1-00	2b		
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 he	_	20 2002	Mh . Z.	<u> </u>
C	$\blacktriangleright$ 20 , 20 , 20 , 20	,10			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
oa	at any time during the year?	<b>☑</b> No			
		133			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation of the foundati	39.2			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the late 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine				
	foundation had excess business holdings in 2017)	· ·	2h	All San	
4-		<u> </u>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpling the foundation make any investment in a prior year (but after December 31, 1969) that could jeopar	ļ	4a	. <i>"116,161</i> 11	~
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in	~~~~	.22.	. Michille	
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in	12017: 1	4b		

	_
_	-

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	Require	ed (contil	nued)			
5a	During t	he year, did the foundation pay or incur	any am	ount to:						<b>38</b> 3	Yes	No
	(1) Carr	y on propaganda, or otherwise attempt t	o influe	ence legislati	on (sec	tion 4945(e	))? .	☐ Yes	✓ No		W/W/4	
	(2) Influ	ence the outcome of any specific publi	c elect	on (see sect	ion 495	55); or to c	arry on					
	direc	ctly or indirectly, any voter registration dr	ive?					☐ Yes	☑ No			
	(3) Prov	ide a grant to an individual for travel, stu	dv. or	other sımılar	purpos	es? .		Yes	☑ No			
		ide a grant to an organization other than					rıbed ır		_			
		ion 4945(d)(4)(A)? See instructions						☐ Yes	✓ No			
	<b>(5)</b> Prov	ide for any purpose other than religious	, charit	able, scientif	ic, liter	arv. or edu	cationa	_				
		oses, or for the prevention of cruelty to						Yes	<b>☑</b> No			1
b		nswer is "Yes" to 5a(1)-(5), did any of the				under the	excepti	_				
		ons section 53 4945 or in a current notice								5b	Willia illir	Uh Alliele
		ations relying on a current notice regardi	-	-					▶□	1 . g	? - M/M.	
С		swer is "Yes" to question 5a(4), does t						(		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
		e it maintained expenditure responsibility				•			□No		3.7	
	If "Yes."	attach the statement required by Regula	ations s	-								
6a		foundation, during the year, receive any					emiums	<b>,</b>		1		
		sonal benefit contract?						Yes	₩ No		, · **	
b	Did the t	foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefi	t contract	? .	6b	-,295.,71111/3	3111131 rd V
		to 6b, file Form 8870.		•	•	•					24,711	
7a	At any tır	ne during the tax year, was the foundation	a party	to a prohibited	tax sh	elter transac	ction?	☐ Yes	✓ No			
b	If "Yes,"	did the foundation receive any proceed	s or ha	ve any net in	come a	ttributable	to the t	ransaction	ነ? .	7b		
Part	VIII	Information About Officers, Direc	tors, 1	Γrustees, F	ounda	tion Mana	agers,	Highly F	aid E	mploy	ees,	
		and Contractors										
_1_	List all	officers, directors, trustees, and found								i.		
		(a) Name and address	(b) Titl hou	e, and average rs per week		mpensation not paid,	(d) (	Contribution: byee benefit	s to plans	(e) Expe		
0 4	Washad 0.	should Dod VIII	devot	ed to position	er	ter -0-)	and def	erred compe	nsation	otner a	allowand	ces
See A	tached Si	chedule Part VIII										
	·											
									i			
	Compo	nsation of five highest-paid employed	- /ath	ou than tha		نا جمل المحادي	4	!		-) I6		
2	"NONE.		:5 (OUI	er man mo	se inci	uaea on II	ne ı—:	see instr	uctions	s). IT no	one, e	enter
						Γ		(d) Contrib				
	(a) Name an	d address of each employee paid more than \$50,00	in.	(b) Title, and a hours per v	iverage veek	(c) Comper	nsation	(d) Contribu employee	benefit	(e) Expe		
	( <b>-</b> )	a dadrood of odor omproject para more trial (cooper		devoted to p		(0, 00		plans and c		other a	allowand	ces
NONE	<del></del>	<del></del>				<del> </del>						
		•					-					
		-										
						<u> </u>						
										_		
Total	number o	f other employees paid over \$50,000 .				'		·	<b></b>			
									I	orm <b>99</b>	0-PF	(2017)

Par	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
_		
Tota	number of others receiving over \$50,000 for professional services	
Day		
Fal	t IX-A Summary of Direct Charitable Activities	<del></del> _
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of janizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Production of Documentary for Awareness and Prevention	
		901.15
	O. L. J. O. A. L. J. E. L.	
2	School Outreach and Educational Programs	32.76
		52.70
3	Establishing Website for Awareness and Prevention	<del></del>
		239
4	Public Outreach Programs	
		20
		<u></u>
_	Summary of Program-Related Investments (see instructions) scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	NONE	- Amount
•		
2		
_	other program-related investments. See instructions	
3		
Tota	. Add lines 1 through 3	
		orm <b>990-PF</b> (2017)

Part		ign fou	ndations,
1	see instructions.)  Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	Whishu.	
	1c (attach detailed explanation)	3030500500	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part		oundat	ions
1		1	
2a	Minimum investment return from Part X, line 6	Michielle	
b	Income tax for 2017 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	<del></del>
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
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.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		<del></del>
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		<del> </del>
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g wheth	ner the foundation
	<del></del>		200 55

Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
-	line 7				0
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only			0	
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2017	20,000,000,000	o as and "conor" conor marks no	and the second s	Land of the second states and
a	From 2012				
C C	From 2014				
d	From 2015				
e	From 2016 0		changing that the street of		
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$0		g and a special angular god	aloren, en fillettillettesmoons säällettille alohalletis	
a	Applied to 2016, but not more than line 2a.				
b	Applied to undistributed income of prior years (Election required—see instructions)	Something and Consultation	0	erana diana	Taine Turk you noughbour alley
С	Treated as distributions out of corpus (Election	<u> (Al-lingulationalistic (1 Mire Sub</u>			<u> </u>
	required—see instructions)	0			
d	Applied to 2017 distributable amount	Mary gapa ng mary ng mag Mary gapa ng mag	I to more sugar mount 'soll	Marillandida Marillandida	0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2017			i i dada Kalabida (2)	
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:	E South Community of South			America de Artales antico
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
•					
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)	and there is not a group and			of their persons a some one of
	tax has been previously assessed		0'		
ď	Subtract line 6c from line 6b. Taxable				and an artist of the second
	amount—see instructions			ania Frankiana Company	
C	4a from line 2a. Taxable amount—see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines		400		
	4d and 5 from line 1. This amount must be		Lithuide 18. 11 Timine 1995, at many		•
_	distributed in 2018	Anna kan markin kan kan kan kan kan kan kan kan kan ka	Million of the second second		U ar:158ar addalos oro, eloro, azer aris
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		normalist from the first of the same	surversement seeds brownsame	Samura analysis y Strategy
	required—see instructions)	0		197	
8	Excess distributions carryover from 2012 not		a communication and many many	· maggamman, ·	m again ar mainte seagain maragaigh a an ai F
	applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2018.		34		
40	Subtract lines 7 and 8 from line 6a	0	The second secon	Componential Singuistic Construction of the Co	Maria Maria Mala Maria M
10	Analysis of line 9.  Excess from 2013   0	= total traday (the free free by affect to	Fire a fire free of the fire	San	
a b	Excess from 2014 0		ar A samong a grape are said to		
C	Excess from 2015				
ď	Excess from 2016				
е	Excess from 2017 0			*	

art	XIV Private Operating Foundat	ions (see instruct	ions and Part	VII-A, question 9)		
_	If the foundation has received a ruling foundation, and the ruling is effective for	or determination le 2017, enter the date	tter that it is a of the ruling.	private operating		NONE
b	Check box to indicate whether the foun	dation is a private o	perating founda	tion described in sec	tion 🗸 4942	(j)(3) or /4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum [ investment return from Part X for ]	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
	each year listed	0				0
b	85% of line 2a	0				0
С	Qualifying distributions from Part XII, line 4 for each year listed	o				0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .	0				0
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	0				0
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
_	Part X, line 6 for each year listed .			<del>                                     </del>		<del></del>
С	"Support" alternative test—enter:	1				
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	1879.86				1879.86
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	1879.86				1879.86
	(3) Largest amount of support from	<del></del>		<del> </del>		
	an exempt organization .	o				0
	(4) Gross investment income	0		<del>                                     </del>		0
art		n (Complete this	part only if t	he foundation ha	d \$5,000 or i	more in assets at
	any time during the year-					
1	Information Regarding Foundation N					
а	List any managers of the foundation w	-	d more than 29	% of the total contril	outions receive	ed by the foundation
	before the close of any tax year (but or					•
b	List any managers of the foundation vownership of a partnership or other en					large portion of the
2	Information Regarding Contribution, Check here ▶ ☐ if the foundation of unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See ins	only makes contrib oundation makes git	utions to prese	elected charitable o	-	•
а	The name, address, and telephone nur	mber or email addre	ess of the perso	n to whom applicat	ions should be	addressed.

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

c Any submission deadlines:

factors:

Part		nueu)	<del></del>	<del></del>	
3	<b>Grants and Contributions Paid During t</b>	he Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Continuation	
a	Name and address (home or business)  Paid during the year	or substantial contributor	recipient		
		<u> </u>		L <u> </u>	
	Total	<u> </u>		▶ 3a	
b	Approved for future payment				
	Total			26	

_	rt XVI				<del></del>		
≣nte	r gros	s amounts unless otherwise indicated	(a)	usiness income (b)	(c)	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Prog	ram service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
•	a	idin service revenue	ļ	f			
	b						
	c _						
	d _						<del></del>
	e _			<u> </u>	<del>                                     </del>	· <u> </u>	<u> </u>
	, <u> </u>	- and an include from any amount against		<del></del>	<del> </del>		
2	-	ees and contracts from government agencies bership dues and assessments	<del> </del>	<del></del>			
3		est on savings and temporary cash investments				<del></del>	
4		ends and interest from securities					
5		ental income or (loss) from real estate:		e saladiana a an editar Allia			
		ebt-financed property					
	b N	ot debt-financed property					
6	Net r	ental income or (loss) from personal property					
7		r investment income				<u> </u>	
8		or (loss) from sales of assets other than inventory	<u></u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>
9		ncome or (loss) from special events	<b></b>	<del> </del>		<del>   </del>	<del> </del>
10		s profit or (loss) from sales of inventory revenue a	<del> </del>			<del> </del>	
11	<b>b</b>					<del> </del>	
	ь С		<u> </u>	<del> </del>		<del>                                     </del>	
	ď		<del> </del>	<del> </del>		<del> </del>	
	e					<del></del>	
12	Subte	otal. Add columns (b), (d), and (e)	Marian illa	0	o in similar militaria in con	0	0
		······································	7 1, 24/17 12 17 17 14/14/17 14/14	L	come acm achiminal district		
13	Total	LAdd line 12, columns (b), (d), and (e)				13	0
<b>13</b> See	Total works	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	 ns.)			13	0
13 See Pa	Total works	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		0
13 See Pa	Total works	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Pa	Total works it XV e No.	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		mportantly to the

Part	XVII	Information Organization		nsfers to and Trans	sactions and	Relationsh	ps With	Nonchar	ritable E	xempt
1	in so	he organization of ection 501(c) (on nizations?	directly or indirectly other than section	engage in any of the f 501(c)(3) organization	ons) or in sec	tion 527, re			Y	es No
а	Tran:		orting foundation to	o a noncharitable exer	mpt organizatio	n of.			1a(1)	
		Other assets .							1a(2)	V
b		r transactions:								
			a noncharitable exe	· ·					1b(1)	
				able exempt organizat er assets					1b(2) 1b(3)	1
	-		· ·					• •	1b(4)	+-
		oans or loan gua	~						1b(5)	1
		_		nip or fundraising solic					1b(6)	~
С				sts, other assets, or pa					1c	~
d				s," complete the follo						
				ces given by the repo						
	$\overline{}$			ement, show in colum						
(a) Line	no	(b) Amount involved	(c) Name of nonc	haritable exempt organization	on (a) Des	cription of transfe	ers, transact	ions, and sna	ring arrang	ements
					<del></del>					
	$\dashv$			·	<del>-</del>					
			 		<del></del>					
			<del> </del>							
			<del></del>							
			<del> </del>							
			<del> </del>							
	-+	<del></del>	<u> </u>	<del></del>	<del></del>			<del></del>		
	-+	<del></del>	<del></del>	<del></del>				<del></del>		
									<del></del>	
	$\dashv$	<del></del>								
2a				filiated with, or relate		ore tax-exem	pt organi	zations		
				ction 501(c)(3)) or in s	ection 527? .			[	]Yes 🖸	∄ No
b	If "Ye		following schedule			<del>,</del>				
		(a) Name of organ	ızatıon	(b) Type of orga	anization	<del></del>	(c) Descript	tion of relation	nship	
						<del> </del>				
		<del></del>				+				
				<del></del>		<del> </del>				
						<del>                                     </del>				
				ed this return, including accom				of my knowled	lge and belie	ef, it is true,
Sign	corre	ect, and complete Decl	aration of preparer (other th	an taxpayer) is based on all inf	formation of which pro	eparer has any kno	wledge	May the IF	RS discuss t	his return
Here	_	CX -		14/6/2018	·	last			reparer show	
	Sigr	nature of officer or trus		Date	Title	<del></del>	·			
Paid		Print/Type preparer	's name	Preparer's signature		Date		eck [_] If [	TIN	
Prep		<u> </u>	<del>=_===</del>	<del> </del>			┰	f-employed		
Use (						<u> </u>				

## Schedule for Other Expenses for line 23 of 990-PF

PO Box Fees	\$	272.00
Corporate Registration	\$	90.00
Website Fees	\$	239.00
Corporate Trademark Filing	\$	324.95
Movie Title Trademark Filing	\$	324.95
Brochure Purchase	\$	20.00
Tick Tube Purchase	\$	32.76
TOTAL:	\$ 3	1,303.66

## PART VIII SCHEDULE

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Adina Bercowicz PO BOX 15369 Portland, ME 04112	President 10	0	0	0
Tracy Lockwood 1379 Dilworthtown Xing Unit 146 West Chester, PA 19382	Secretary 1	0	0	0
Alison Cargo 5391 Trentham Drive Dunwoody, GA 30338	Treasurer 1	0	0	0
Yan Zelener PO BOX 15369 Portland, ME 04112	Director of Science and Research 5	0	0	0
Anisha Robinson Keeys 1424 Pine Street Norristown, PA 19401	Director of Marketing 1	0	0	0
Rebecca Vitsmun 5449 Dahl Drive Tacoma, WA 98406	Board Member 1	0	0	0