

**Return of Private Foundation**

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

**2019**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

For calendar year 2019 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation <b>THE VIBRANT VILLAGE FOUNDATION</b>		<b>A Employer identification number</b> 27-0745672
Number and street (or P.O. box number if mail is not delivered to street address) <b>1737 NE ALBERTA STREET</b>	Room/suite 207	<b>B Telephone number</b> 503-206-4859
City or town, state or province, country, and ZIP or foreign postal code <b>PORTLAND, OR 97211</b>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>85,870,169.</b>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	
<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>		

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received	2,000,423.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,480,313.	1,480,313.		STATEMENT 1
	4 Dividends and interest from securities	1,103,582.	1,103,582.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,592,459.			
	b Gross sales price for all assets on line 6a	12,887,376.			
	7 Capital gain net income (from Part IV, line 2)		1,592,459.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	-250,677.	0.		STATEMENT 3	
12 <b>Total.</b> Add lines 1 through 11	5,926,100.	4,176,354.			
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	93,021.	0.		93,021.
	14 Other employee salaries and wages	158,436.	0.		158,436.
	15 Pension plans, employee benefits	35,798.	0.		35,798.
	16a Legal fees	STMT 4 3,116.	1,558.		1,558.
	b Accounting fees	STMT 5 13,500.	6,750.		0.
	c Other professional fees	STMT 6 1,553,815.	1,118,246.		6,219.
	17 Interest				
	18 Taxes	STMT 7 42,701.	42,147.		204.
	19 Depreciation and depletion	38,760.	0.		
	20 Occupancy	40,138.	0.		40,138.
	21 Travel, conferences, and meetings	46,180.	0.		46,180.
	22 Printing and publications				
	23 Other expenses	STMT 8 1,027,004.	1,063.		1,025,941.
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	3,052,469.	1,169,764.		1,407,495.
	25 Contributions, gifts, grants paid	2,576,385.			2,576,385.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	5,628,854.	1,169,764.		3,983,880.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	297,246.				
b <b>Net investment income</b> (if negative, enter -0-)		3,006,590.			
c <b>Adjusted net income</b> (if negative, enter -0-)			N/A		

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing .....	4,227,428.	6,081,072.	6,081,072.
	2 Savings and temporary cash investments .....			
	3 Accounts receivable ▶ .....			
	Less: allowance for doubtful accounts ▶ .....			
	4 Pledges receivable ▶ .....			
	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 ▶ .....			
	8 Inventories for sale or use .....	10,432.	56,949.	56,949.
	9 Prepaid expenses and deferred charges .....	3,265.	2,759.	2,759.
	10a Investments - U.S. and state government obligations .....			
	b Investments - corporate stock ..... <b>STMT 9</b>	57,888,093.	19,230,655.	19,230,655.
	c Investments - corporate bonds .....	1,925,775.	0.	0.
	11 Investments - land, buildings, and equipment: basis ..... ▶			
Less: accumulated depreciation ..... ▶				
12 Investments - mortgage loans .....				
13 Investments - other ..... <b>STMT 10</b>	12,804,141.	60,332,502.	60,332,502.	
14 Land, buildings, and equipment: basis ..... ▶ <b>291,961.</b>				
Less: accumulated depreciation ..... ▶ <b>125,729.</b>	188,318.	166,232.	166,232.	
15 Other assets (describe .....)				
16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) .....	77,047,452.	85,870,169.	85,870,169.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	8,052.	84,644.	
	18 Grants payable .....			
	19 Deferred revenue .....			
	20 Loans from officers, directors, trustees, and other disqualified persons .....			
	21 Mortgages and other notes payable .....			
	22 Other liabilities (describe .....)			
	23 <b>Total liabilities</b> (add lines 17 through 22) .....	8,052.	84,644.	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ..... ▶ <input type="checkbox"/>			
	<b>and complete lines 24, 25, 29, and 30.</b>			
	24 Net assets without donor restrictions .....			
	25 Net assets with donor restrictions .....			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ..... ▶ <input checked="" type="checkbox"/>			
	<b>and complete lines 26 through 30.</b>			
	26 Capital stock, trust principal, or current funds .....	0.	0.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund .....	0.	0.	
28 Retained earnings, accumulated income, endowment, or other funds .....	77,039,400.	85,785,525.		
29 <b>Total net assets or fund balances</b> .....	77,039,400.	85,785,525.		
30 <b>Total liabilities and net assets/fund balances</b> .....	77,047,452.	85,870,169.		

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

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) .....	1	77,039,400.
2 Enter amount from Part I, line 27a .....	2	297,246.
3 Other increases not included in line 2 (itemize) ▶ <b>UNREALIZED GAIN ON INVESTMENTS</b>	3	8,448,879.
4 Add lines 1, 2, and 3 .....	4	85,785,525.
5 Decreases not included in line 2 (itemize) ▶ .....	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 .....	6	85,785,525.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; 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.)
1a PUBLICLY TRADED SECURITIES	P	01/01/18	12/31/19
b CAPITAL GAINS FROM PASSTHROUGH ENTITIES	P	01/01/18	12/31/19
c CAPITAL GAIN DISTRIBUTIONS		01/01/18	12/31/19
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 219,150.		802,415.	-583,265.
b 12,591,499.		10,492,502.	2,098,997.
c 76,727.			76,727.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			-583,265.
b			2,098,997.
c			76,727.
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 .....	2	1,592,459.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 .....	3	N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	3,454,021.	81,227,972.	.042523
2017	3,449,248.	77,622,067.	.044436
2016	2,996,270.	67,985,871.	.044072
2015	3,433,255.	67,819,317.	.050624
2014	3,157,280.	75,763,429.	.041673

2 Total of line 1, column (d) .....	2	.223328
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years .....	3	.044666
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 .....	4	80,343,998.
5 Multiply line 4 by line 3 .....	5	3,588,645.
6 Enter 1% of net investment income (1% of Part I, line 27b) .....	6	30,066.
7 Add lines 5 and 6 .....	7	3,618,711.
8 Enter qualifying distributions from Part XII, line 4 .....	8	3,983,880.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.  
 See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	30,066.
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-)	2	0.
3	Add lines 1 and 2	3	30,066.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	30,066.
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	62,150.
b	Exempt foreign organizations - tax withheld at source	6b	0.
c	Tax paid with application for extension of time to file (Form 8868)	6c	50,000.
d	Backup withholding erroneously withheld	6d	0.
7	Total credits and payments. Add lines 6a through 6d	7	112,150.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	82,084.
11	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> 82,084. <b>Refunded</b>	11	0.

**Part VII-A Statements Regarding Activities**

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a	X	
4b	X	
5		X
6	X	
7	X	
8b	X	
9		X
10		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, website address, books in care, and foreign country interests.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and excess business holdings.

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<b>5a</b> During the year, did the foundation pay or incur any amount to:		<b>Yes</b>	<b>No</b>
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		<b>5b</b>	<b>X</b>
Organizations relying on a current notice regarding disaster assistance, check here <span style="float:right">▶ <input type="checkbox"/></span>			
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <span style="float:right"><b>SEE STATEMENT 13</b></span>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		<b>6b</b>	<b>X</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	<b>7b</b>	
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, and foundation managers and their compensation.

(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
SEE STATEMENT 12		84,717.	8,304.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(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 compensation	(e) Expense account, other allowances
MARIEME DAFF - 1737 NE ALBERTA ST., STE 207, PORTLAND, OR 97211	SENIOR PROGRAM OFFICER 40.00	70,863.	8,364.	0.
PAUL MURTHA - 1737 NE ALBERTA ST., STE 207, PORTLAND, OR 97211	PROGRAM MANAGER 40.00	68,031.	4,688.	0.

**Total** number of other employees paid over \$50,000 ▶ 0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
VIBRATO CAPITAL, LLC 1737 NE ALBERTA ST, #207, PORTLAND, OR 97211	PORTFOLIO MANAGEMENT	150,227.

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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>SEE STATEMENT 14</u>	239,796.
2 <u>SEE STATEMENT 15</u>	350,000.
3 <u>SEE STATEMENT 16</u>	403,908.
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ..... 0.

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 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	77,128,446.
b	Average of monthly cash balances .....	1b	4,439,065.
c	Fair market value of all other assets .....	1c	
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	81,567,511.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	81,567,511.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) .....	4	1,223,513.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	5	80,343,998.
6	<b>Minimum investment return.</b> Enter 5% of line 5 .....	6	4,017,200.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

1	Minimum investment return from Part X, line 6 .....	1	4,017,200.
2a	Tax on investment income for 2019 from Part VI, line 5 .....	2a	30,066.
b	Income tax for 2019. (This does not include the tax from Part VI.) .....	2b	28,586.
c	Add lines 2a and 2b .....	2c	58,652.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	3,958,548.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	3,958,548.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	7	3,958,548.

**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	3,983,880.
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	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 .....	4	3,983,880.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b .....	5	30,066.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 .....	6	3,953,814.

**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 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
<b>1</b> Distributable amount for 2019 from Part XI, line 7				3,958,548.
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only			2,038,683.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014				
<b>b</b> From 2015				
<b>c</b> From 2016				
<b>d</b> From 2017				
<b>e</b> From 2018				
<b>f</b> Total of lines 3a through e	0.			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 3,983,880.				
<b>a</b> Applied to 2018, but not more than line 2a			2,038,683.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2019 distributable amount				1,945,197.
<b>e</b> Remaining amount distributed out of corpus	0.			
<b>5</b> Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<b>c</b> 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.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				2,013,351.
<b>7</b> 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.			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7	0.			
<b>9</b> Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015				
<b>b</b> Excess from 2016				
<b>c</b> Excess from 2017				
<b>d</b> Excess from 2018				
<b>e</b> Excess from 2019				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**KENNETH E. DE LASKI**

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

**Part XV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
ACTION FOR ENVIRONMENTAL SUSTAINABILITY (AFES) PO BOX 3415 BLANTYRE, MALAWI. BLANTYRE, MALAWI 00265-265		FOREIGN NGO	BUILD CLEAN WATER SOURCES AND PROVIDE WATER SANITATION & HYGIENE (WASH) EDUCATION IN MALAWI.	53,245.
AFRICA BRIDGE P.O. BOX 115 MARYLHURST, OR 97036		PC	PROMOTE CO-OPS AND SOCIAL SERVICES FOR HOUSEHOLDS WITH VULNERABLE CHILDREN IN TANZANIA.	47,209.
ANDANDO FOUNDATION PO BOX 542 JEFFERSON, OR 97352		PC	SUPPORT COOPERATIVE GARDENS, SCHOOL INFRASTRUCTURE & MEALS FOR SCHOOL CHILDREN IN CENTRAL, SENEGAL.	327,801.
ARTICHOKE MUSIC 3130 SE HAWTHORNE BLVD PORTLAND, OR 97214		PC	PROVIDE MUSIC EDUCATION FOR MIDDLE SCHOOL STUDENTS IN PORTLAND, OREGON.	10,516.
BEGA KWA BEGA PO BOX 5731, 28009 KAMPALA, UGANDA 28009		FOREIGN NGO	SUPPORT AGRICULTURAL AND BUSINESS TRAINING, NUTRITION PROGRAMS AND MOBILE HEALTH CLINICS IN UGANDA.	21,346.
<b>Total</b> .....			<b>SEE CONTINUATION SHEET(S)</b> ▶ <b>3a</b>	<b>2,576,385.</b>
<b>b Approved for future payment</b>				
<b>NONE</b>				
<b>Total</b> .....			<b>3b</b>	<b>0.</b>





**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CREATE! 132 EAST BROADWAY SUITE 416 EUGENE, OR 97401		PC	PROMOTE WOMEN'S GARDEN AND SAVING GROUPS, REFORESTATION, AND IMPROVED COOK STOVES IN CENTRAL SENEGAL	152,200.
DESEA PERU SECTOR LIMACPAMPA LAMAY, CUSCO, PERU		FOREIGN NGO	INSTALL BIOSAND WATER FILTERS IN HOMES, TRAIN COMMUNITY HEALTH WORKERS IN THE HIGHLANDS OF PERU.	239,588.
FOCUS INTERNATIONAL 4930 E TEXAS ROAD ALLENTOWN, PA 73072		PC	SUPPORT FOR AN ORGANIZATION THAT FABRICATES PROTESTHICS AND PROVIDES REHABILITATION TRAINING IN IMBABURA PROVINCE, ECUADOR.	2,000.
FONKOZE 1718 CONNECTICUT AVE NW, #201 WASHINGTON, DC 20009		PC	SUPPORT FOR WOMEN IN NORTHERN HAITI TO LIFT THEMSELVES OUT OF ULTRA-POVERTY THROUGH AN 18-MONTH GRADUATION MODEL PROGRAM. THE PROGRAM INCLUDES A CASH TRANSFER AND INTENSIVE COACHING TO LAUNCH A PRODUCTIVE ACTIVITY.	150,564.
GREEN EMPOWERMENT 140 SW YAMHILL ST. PORTLAND, OR 97204		PC	INSTALL SOLAR WATER PUMPS AND DOMESTIC WATER SERVICE, AND ENGAGE THE COMMUNITY IN BEE KEEPING IN THE COMMUNITY OF EL JAZMIN, NICARAGUA	25,000.
GROUNDSWELL INTERNATIONAL 1875 CONNECTICUT AVE NW, 10TH FL WASHINGTON, DC 20009		PC	HELPING DRYLAND FARMERS IN WEST AFRICA BUILD RESILIENCE TO CLIMATE CHANGE AND OTHER SHOCKS AND TO ACHIEVE SUSTAINABLE FOOD AND NUTRITION SECURITY USING AGROECOLOGICAL APPROACHES.	200,000.
HAITI HEMP-FEED 504 EAST FAYETTE STREE SYRACUSE, NY 13202		PC	SUPPORT FOR A SCHOOL LUNCH PROGRAM IN NORTHERN HAITI	57,000.
<b>Total from continuation sheets</b>				2,116,268.

**Part XV** Supplementary Information (continued)

**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LOCAL INITIATIVES IN DEVELOPMENT AGENCY CORNER MERSEY/OXFORD ROAD, HIS, PRIVATE BOX 2799 GWERU, ZIMBABWE, ZIMBABWE 263		FOREIGN NGO	BUILD CLEAN WATER SOURCES, PROMOTE COMMUNITY GARDENS AND IMPROVED CROP STORAGE PRACTICES IN ZIMBABWE	92,289.
PUMP AID 90-92 GREAT PORTLAND STREET LONDON, UNITED KINGDOM W1W 7NT		FOREIGN NGO	BUILD CLEAN WATER SOURCES AND IMPROVED SANITATION FACILITIES IN MALAWI.	140,491.
SHANTA FOUNDATION PO BOX 1603 DURANGO, CO 81302		PC	SUPPORT A MULTI-SECTOR COMMUNITY DEVELOPMENT PROGRAM IN PAUK, MYANMAR.	72,147.
SONJE AYITI ORGANIZATION, INC 4171 ROARING RUN RD GOODE, VA 24556		PC	SUPPORTING SUSTAINABLE, COMMUNITY-LED PROGRAMS IN HEALTH, EDUCATION, LEADERSHIP, LIVELIHOOD, AND INFRASTRUCTURE IN MYANMAR	89,112.
SPARK MICROGRANTS 118 WEST 22ND ST FLOOR 12 NEW YORK, NY 10011		PC	ENABLE COMMUNITIES TO DESIGN AND LAUNCH THEIR OWN SOCIAL IMPACT PROJECTS IN RURAL UGANDA.	98,117.
SURFAID 530 SECOND STREET ENCINITAS, CA 92024		PC	PROVIDE CLEAN WATER SOURCES AND TRAIN COMMUNITY HEALTH WORKERS IN INDONESIA.	50,000.
THE BOMA PROJECT 4927 MAIN STREET / PO BOX 1865 MANCHESTER CENTER, VT 05255		PC	EMPOWER WOMEN IN THE DRYLANDS OF KENYA TO ESTABLISH SUSTAINABLE LIVELIHOODS, BUILD RESILIENT FAMILIES, GRADUATE FROM EXTREME POVERTY.	150,680.
<b>Total from continuation sheets</b>				

**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE GARDENS' EDGE P.O. BOX 7758 ALBUQUERQUE, NM 87194		PC	SUPPORT FOR FAMILIES TO IMPROVE HOUSEHOLD NUTRITION THROUGH HOUSEHOLD GARDNES, CLASSES AND SCREENINGS FO CHILDREN UNDER 2 IN GUATEMALA.	91,933.
THE WATER TRUST 81 PROSPECT STREET BROOKLYN, NY 11201		PC	SUPPORT VILLAGES, SCHOOLS, AND HEALTH CENTERS IN RURAL UGANDA TO EQUIP COMMUNITIES TO MINIMIZE PREVENTABLE DISEASE THROUGH IMPROVED WATER, SANITATION, AND HYGIENE.	160,000.
TRICKLE UP 104 W 27TH ST NEW YORK , NY 10001		PC	SUPPORT WOMEN IN GUATEMALA WHO RECEIVE 1:1 COACHING, A SMALL SEED CAPITAL GRANT TO START BUSINESS ACTIVITIES, LEARN TO SAVE, ACCESS CREDIT, BUILD SKILLS AND DEVELOP LIVELIHOOD PLANS FOR THE FUTURE.	38,215.
UPAYA 500 YALE AVE N SUITE 202 SEATTLE, WA 98109		PC	INVEST IN EARLY-STAGE COMPANIES, CREATING DIGNIFIED JOBS FOR THE POOREST OF THE POOR IN INDIA AND OTHER COUNTRIES	50,000.
FOOTSTEPS AFRICA SRDI BUILDING, P O BOX 1891, CHIRIMBA TOWNSHIP, ALONG M1 ROAD BLANTYRE, MALAWI 00265-265		FOREIGN NGO	IMPLEMENT AN INTEGRATED COMMUNITY-BASED PROGRAM IN FIVE VILLAGE IN SOUTHERN MALAWI.	25,000.
ECO-AGRIC PO BOX 31833 CLOCK TOWER KAMPALA, UGANDA 31833		FOREIGN NGO	SUPPORTS ORPHANS AND VULNERABLE FAMILIES THROUGH AGRICULTURAL AND LIVESTOCK COOPERATIVE MEMBERSHIP, EDUCATIONAL SUPPORT AND VOCATIONAL TRAINING FOR TEENAGE GIRLS, AND A SOCIAL SERVICE NETWORK OF COMMUNITY MEMBERS IN UGANDA.	15,000.
ECHO INC. 17430 DURANCE ROAD N FORT MYERS, FL 33917		PC	WORKING WITH LOCAL NGO PARTNERS IN EAST/WEST AFRICA TO PROMOTE THE PROLIFERATION OF GM/CC'S AMONG FARMER GROUPS.	40,000.
<b>Total from continuation sheets</b>				



**Part XV** Supplementary Information (continued)

**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
KENYA DRYLANDS EDUCATION FUND 535 PROSPECT STREET MANCHESTER, VT 05254		PC	DEVELOP A HOLISTIC APPROACH TO REDUCE BARRIERS TO ACCESS TO EDUCATION AND INCREASE SCHOOL ENROLLMENT IN RURAL KENYAN COMMUNITIES	150,000.
RAISING THE VAILLAGE 720 BATHRUST ST SUITE 305 TORONTO, CANADA M5S 2R4		FOREIGN NGO	SUPPORT LAST-MILE COMMUNITIES IN UGANDA LIVING IN EXTREME POVERTY THROUGH COMMUNITY DESIGNED PROJECTS WHICH INCREASE HOUSEHOLD INCOMES.	26,932.
<b>Total from continuation sheets</b> .....				

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

THE VIBRANT VILLAGE FOUNDATION

Employer identification number

27-0745672

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**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KENNETH DELASKI  1737 NE ALBERTA ST., SUITE 207  PORTLAND, OR 97211	\$ 2,000,423.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**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
1	VARIOUS PUBLICLY TRADED STOCKS _____ _____ _____	\$ <u>2,000,423.</u>	<u>04/04/19</u>
1	349 SHARES OF BOEING CO COM _____ _____ _____	\$ <u>138,155.</u>	<u>04/04/19</u>
1	0.01 SHARES OF BROADCOM INC _____ _____ _____	\$ <u>3.</u>	<u>04/04/19</u>
1	618 SHARES OF CSX CORP _____ _____ _____	\$ <u>46,226.</u>	<u>04/04/19</u>
1	345 SHARES OF CADENCE DESIGN SYSTEMS _____ _____ _____	\$ <u>21,966.</u>	<u>04/04/19</u>
1	34 SHARES OF CONSOL ENERGY INC _____ _____ _____	\$ <u>1,123.</u>	<u>04/04/19</u>

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**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
<u>1</u>	39 SHARES OF COSTAR GROUP INC _____ _____ _____	\$ <u>18,630.</u>	<u>04/04/19</u>
<u>1</u>	217 SHARES OF EDWARDS LIFESCIENCES _____ _____ _____	\$ <u>41,078.</u>	<u>04/04/19</u>
<u>1</u>	158 SHARES OF GLOBAL PMTS INC _____ _____ _____	\$ <u>21,439.</u>	<u>04/04/19</u>
<u>1</u>	25 SHARES OF GODADDY INC _____ _____ _____	\$ <u>1,864.</u>	<u>04/04/19</u>
<u>1</u>	132 SHARES OF INTUITIVE SURGICAL INC _____ _____ _____	\$ <u>75,277.</u>	<u>04/04/19</u>
<u>1</u>	296 SHARES OF INTUIT COM _____ _____ _____	\$ <u>77,738.</u>	<u>04/04/19</u>

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**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
1	126 SHARES OF IONIS PHARMACEUTICALS INC _____ _____ _____	\$ 10,351.	04/04/19
1	214 SHARES OF KEYSIGHT TECHNOLOGIES _____ _____ _____	\$ 19,040.	04/04/19
1	1 SHARE OF LAMB WESTON HOLDINGS _____ _____ _____	\$ 70.	04/04/19
1	62 SHARES OF LULULEMON ATHLETICA INC _____ _____ _____	\$ 10,625.	04/04/19
1	132 SHARES OF MSCI INC _____ _____ _____	\$ 27,229.	04/04/19
1	626 SHARES OF MASTERCARD INC _____ _____ _____	\$ 147,774.	04/04/19

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**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
1	32 SHARES OF METTLER-TOLEDO INTL _____ _____ _____	\$ <u>23,270.</u>	<u>04/04/19</u>
1	4817 SHARES OF MICROSOFT CORP _____ _____ _____	\$ <u>574,957.</u>	<u>04/04/19</u>
1	330 SHARES OF NRG ENERGY _____ _____ _____	\$ <u>13,939.</u>	<u>04/04/19</u>
1	297 SHARES OF ONEOK INC _____ _____ _____	\$ <u>20,636.</u>	<u>04/04/19</u>
1	135 SHARES OF PTC INC _____ _____ _____	\$ <u>12,648.</u>	<u>04/04/19</u>
1	177 SHARES OF RED HAT INC _____ _____ _____	\$ <u>32,327.</u>	<u>04/04/19</u>

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**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
<u>1</u>	155 SHARES OF SERVICENOW INC _____ _____ _____	\$ <u>36,740.</u>	<u>04/04/19</u>
<u>1</u>	168 SHARES OF SYNOPSIS INC _____ _____ _____	\$ <u>19,364.</u>	<u>04/04/19</u>
<u>1</u>	49 SHARES OF TABLEAU SOFTWARE _____ _____ _____	\$ <u>6,057.</u>	<u>04/04/19</u>
<u>1</u>	32 SHARES OF TRANSUNION COM _____ _____ _____	\$ <u>2,180.</u>	<u>04/04/19</u>
<u>1</u>	579 SHARES OF TWITTER INC _____ _____ _____	\$ <u>19,929.</u>	<u>04/04/19</u>
<u>1</u>	121 SHARES OF VERISIGN INC _____ _____ _____	\$ <u>22,522.</u>	<u>04/04/19</u>



Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**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
<u>1</u>	124 SHARES OF WORKDAY INC _____ _____ _____	\$ <u>22,998.</u>	<u>04/04/19</u>
<u>1</u>	168 SHARES OF WORLDPAY INC _____ _____ _____	\$ <u>19,313.</u>	<u>04/04/19</u>
<u>1</u>	117 SHARES OF XILINX INC _____ _____ _____	\$ <u>14,955.</u>	<u>04/04/19</u>
<u>1</u>	19944 SHARES OF MORGAN STANLEY INSTITUTIONAL _____ _____ _____	\$ <u>500,000.</u>	<u>05/13/19</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>THE VIBRANT VILLAGE FOUNDATION</b>	Employer identification number  <b>27-0745672</b>
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**Part III** 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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Name **THE VIBRANT VILLAGE FOUNDATION** Employer identification number **27-0745672**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1	Total tax (see instructions) .....	1	30,066.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b	
2c	Credit for federal tax paid on fuels (see instructions) .....	2c	
2d	<b>Total.</b> Add lines 2a through 2c .....	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	3	30,066.
4	Enter the tax shown on the corporation's 2018 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....	4	43,469.
5	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5	30,066.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>		(a)	(b)	(c)	(d)
9	<b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	05/15/19	06/15/19	09/15/19	12/15/19
10	<b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	7,517.	7,516.	7,517.	7,516.
11	Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	62,150.			
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12	Enter amount, if any, from line 18 of the preceding column		54,633.	47,117.	39,600.
13	Add lines 11 and 12 .....		54,633.	47,117.	39,600.
14	Add amounts on lines 16 and 17 of the preceding column				
15	Subtract line 14 from line 13. If zero or less, enter -0- .....	62,150.	54,633.	47,117.	39,600.
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....		0.	0.	
17	<b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....				
18	<b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	54,633.	47,117.	39,600.	

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations:</b> Use 3rd month instead of 4th month. <b>Form 990-PF and Form 990-T filers:</b> Use 5th month instead of 4th month.) See instructions ..... <b>19</b>				
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2019 and before 7/1/2019 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$ ...	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 06/30/2019 and before 10/1/2019 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$ ...	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2019 and before 1/1/2020 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$ ...	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2019 and before 4/1/2020 .....	<b>27</b>			
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$ ...	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2020 and before 7/1/2020 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$ .....	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2020 and before 10/1/2020 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$ .....	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2020 and before 1/1/2021 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$ .....	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2020 and before 3/16/2021 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b> \$			0.

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST FROM INVESTMENTS	1,480,313.	1,480,313.	
TOTAL TO PART I, LINE 3	1,480,313.	1,480,313.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS FROM INVESTMENTS	1,103,582.	0.	1,103,582.	1,103,582.	
TO PART I, LINE 4	1,103,582.	0.	1,103,582.	1,103,582.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
PASSTHROUGH INCOME	-250,677.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	-250,677.	0.	

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	3,116.	1,558.		1,558.
TO FM 990-PF, PG 1, LN 16A	3,116.	1,558.		1,558.

FORM 990-PF

ACCOUNTING FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	13,500.	6,750.		0.
TO FORM 990-PF, PG 1, LN 16B	13,500.	6,750.		0.

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	1,397,369.	1,036,816.		0.
INVESTMENT MANAGEMENT FEES	150,227.	81,430.		0.
PROGRAM CONSULTING	6,219.	0.		6,219.
TO FORM 990-PF, PG 1, LN 16C	1,553,815.	1,118,246.		6,219.

FORM 990-PF

TAXES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	42,147.	42,147.		0.
CITY AND COUNTY	554.	0.		204.
TO FORM 990-PF, PG 1, LN 18	42,701.	42,147.		204.

FORM 990-PF

OTHER EXPENSES

STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	2,125.	1,063.		1,062.
WEB AND COMMUNICATION	7,949.	0.		7,949.
OFFICE EXPENSES	19,667.	0.		19,667.
DUES AND SUBSCRIPTION	1,159.	0.		1,159.
OTHER DIRECT EMPLEMENTATION EXPENSE - ECUADOR	239,796.	0.		239,796.
OTHER DIRECT EMPLEMENTATION EXPENSE - GHANA	403,908.	0.		403,908.
OTHER DIRECT EMPLEMENTATION EXPENSE - KENYA	350,000.	0.		350,000.
STATE CHARITABLE ACTIVITY FEE	2,400.	0.		2,400.
TO FORM 990-PF, PG 1, LN 23	1,027,004.	1,063.		1,025,941.

## FORM 990-PF

## CORPORATE STOCK

## STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
ISHARES RUSSELL 1000 ETF	1,159,730.	1,159,730.
MS ADVANTAGE CL IS	4,919,506.	4,919,506.
OAKMARK INTL FUND INSTL	4,776,978.	4,776,978.
INVESCO LTD SHS (IVZ)	134,886.	134,886.
NOMAD FOODS LIMITED ORD NPV (DI)	240,388.	240,388.
AMERCO COM	296,146.	296,146.
GREAT ELM CAP GROUP INC COM NEW	204,294.	204,294.
HEIDRICK & STRUGGLES INTL INC (HSII)	223,405.	223,405.
IAC INTERACTIVECORP COM (IAC)	463,095.	463,095.
LIVE NATION ENTERTAINMENT INC	291,240.	291,240.
NATURAL GROCERS BY VITAMIN COT COM	44,267.	44,267.
ROBERT HALF INTL INC	148,528.	148,528.
UFP TECH INC	432,798.	432,798.
GAMING & LEISURE P COM USD	246,720.	246,720.
ADIANT PLC COM USD	38,909.	38,909.
AERCAP HOLDINGS N.V. EURO.	185,148.	185,148.
FLEX LTD	122,881.	122,881.
AECOM	121,929.	121,929.
AFFILIATED MANAGERS GROUP	88,130.	88,130.
AIR LEASE CORP	118,990.	118,990.
ALLIANCE DATA SYSTEM COM	127,347.	127,347.
AMERIPRISE FINL	338,491.	338,491.
ARROW ELECTRONICS INC	145,922.	145,922.
ASSURANT INC	147,465.	147,465.
AVIS BUDGET	47,941.	47,941.
BROADCOM	272,409.	272,409.
CELANESE CORP	312,725.	312,725.
CENTENE CORP DEL	316,991.	316,991.
COMMSCOPE HOLDINGS CO INC COM	52,233.	52,233.
CROWN HLDGS INC COM	184,397.	184,397.
EOG RESOURCES	256,138.	256,138.
GOODYEAR TIRE & RUBBER CO.	70,620.	70,620.
HCA HEALTHCARE	441,360.	441,360.
HANESBRANDS INC COM	112,459.	112,459.
HERTZ GLOBAL	26,570.	26,570.
LINCOLN NATIONAL CORP IND	240,053.	240,053.
MICROCHIP TECHNOLOGY INC COM	296,672.	296,672.
O-I GLASS INC COM	36,041.	36,041.
QUANTA SERVICES COM	124,450.	124,450.
QURATE RETAIL INC COM	79,284.	79,284.
SUNCOR ENERGY	279,194.	279,194.
SYNNEX CORP	140,778.	140,778.
TENNECO INC	13,611.	13,611.
UNITED RENTALS INC	279,340.	279,340.
WESTERN DIGITAL CORP	232,491.	232,491.
WHIRLPOOL CORP.	204,034.	204,034.
XPO LOGISTICS INC COM	193,671.	193,671.
TOTAL TO FORM 990-PF, PART II, LINE 10B	19,230,655.	19,230,655.



FORM 990-PF

OTHER INVESTMENTS

STATEMENT 10

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AJO ALL-WORLD MANAGED VOL	FMV	1,580,944.	1,580,944.
AJO EMERGING MARKETS ALL CAP	FMV		
OFFSHORE FUND		4,324,573.	4,324,573.
ANGELES EQUITY PARTNERS I	FMV	831,069.	831,069.
AQR DELTA FUND	FMV	4,953,467.	4,953,467.
BARING INTERNATIONAL SMALL CAP	FMV		
EQUITY FUND		2,751,995.	2,751,995.
BRANDYWINE GLOBAL OPPORTUNISTIC	FMV		
FIXED INCOME		8,877,245.	8,877,245.
CMMT PARTNERS LP	FMV	2,981,168.	2,981,168.
CONTRARIAN OPPORTUNITY FUND II, LP	FMV	106,603.	106,603.
FIERA GLOBAL EQUITY CAPITAL	FMV	10,123,660.	10,123,660.
GEF COMPOST GROUP LLC	FMV	971,991.	971,991.
HARPOON VENTURES FUND II LP	FMV	63,024.	63,024.
LINK VENTUREWSA	FMV	67,098.	67,098.
MORRISON STREET DEBT OPPORTUNITIES	FMV		
FUND		3,201,816.	3,201,816.
OAKTREE ENHANCED INCOME FUND III	FMV	2,873,032.	2,873,032.
POST CREDIT OPPORTUNITIES	FMV	3,673,555.	3,673,555.
SANDS CAPITAL EMERGING GROWTH	FMV	4,577,659.	4,577,659.
SANDS CAPITAL PRIVATE GROWTH FUND	FMV		
II L.P		3,027,569.	3,027,569.
SANDS CAPITAL PRIVATE GROWTH III,	FMV		
LP		996,172.	996,172.
SILVERVIEW CLO II LP	FMV	543,963.	543,963.
TENNENBAUM DIRECT LENDING VII	FMV	2,383,832.	2,383,832.
TENNENBAUM SPECIAL SITUATIONS	FMV	899,482.	899,482.
VESTEDWORLD FUND II LP	FMV	522,585.	522,585.
TOTAL TO FORM 990-PF, PART II, LINE 13		60,332,502.	60,332,502.

FORM 990-PF

NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST

STATEMENT 11

NAME OF COUNTRY

GHANA  
ECUADOR  
KENYA

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
KENNETH E. DE LASKI 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	PRESIDENT, DIRECTOR 20.00	0.	0.	0.
SARAH GORACKE 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	SECRETARY, DIRECTOR 2.00	0.	0.	0.
SANG AHN 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	TREASURER, DIRECTOR 1.00	0.	0.	0.
KATHLEEN DE LASKI GRUBB 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	DIRECTOR 1.00	0.	0.	0.
JEREMY BARNICLE 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	DIRECTOR 1.00	0.	0.	0.
SASHA MUENCH 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	DIRECTOR 1.00	0.	0.	0.
LAURA KOCH 1737 NE ALBERTA ST., #207 PORTLAND, OR 97211	EXECUTIVE DIRECTOR 40.00	84,717.	8,304.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		84,717.	8,304.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT  
PART VII-B, LINE 5C

STATEMENT 13

GRANTEE'S NAME

AFES - ACTION FOR ENVIRONMENTAL SUSTAINABILITY

GRANTEE'S ADDRESS

PO BOX 3415  
BLNTYRE, MALAWI

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
72,549.	10/01/18	53,398.

PURPOSE OF GRANT

IMPROVE THE LIVELIHOODS OF WOMEN AND MEN THROUGH INTEGRATION OF VILLAGE SAVINGS AND LOAN ASSOCIATIONS, LIVESTOCK PASS ON SCHEME AND ECO STOVE PRODUCTION IN MALAWI.

DATES OF REPORTS BY GRANTEE

43987

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

BEGA KWA BEGA

GRANTEE'S ADDRESS

P.O. BOX 28009  
KAMPALA, UGANDA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
122,000.	10/01/17	49,667.

PURPOSE OF GRANT

BEGA KWA BEGA PROMOTES ECONOMIC WELLBEING BY PROVIDING ACCESS TO CLEAN WATER, FARMER TRAINING, AGRICULTURE TRAINING FOR TEACHERS, BUSINESS SKILL DEVELOPMENT, AND A MOBILE HEALTH CLINIC TO SERVE THE COMMUNITY IN UGANDA.

DATES OF REPORTS BY GRANTEE

43769

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

DESEA PERU

GRANTEE'S ADDRESS

SECTOR LIMACPAMPA  
LAMAY, PERU

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
147,616.	01/01/19	147,616.

PURPOSE OF GRANT

DESEA WORKS IN MICROCUENCA CCARAMPA COMMUNITIES TO IMPROVE COMMUNITY HEALTH BY TRAINING HEALTH WORKERS TO BETTER SERVE ISOLATED COMMUNITIES IN THE HIGHLANDS, AND INSTALLING BIOSAND FILTERS TO PROVIDE ACCESS TO CLEAN DRINKING WATER IN PERU.

DATES OF REPORTS BY GRANTEE

43879

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

ECO-AGRIC - ENVIRONMENTAL CONSERVATION AND AGRICULTURAL ENHANCEMENT UGANDA

GRANTEE'S ADDRESS

PO BOX 31833 CLOCK TOWER  
KAMPALA, UGANDA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
15,000.	01/01/19	15,000.

PURPOSE OF GRANT

THIS PROGRAM SUPPORTS ORPHANS AND VULNERABLE FAMILIES THROUGH AGRICULTURAL AND LIVESTOCK COOPERATIVE MEMBERSHIP, EDUCATIONAL SUPPORT AND VOCATIONAL TRAINING FOR TEENAGE GIRLS, AND A SOCIAL SERVICE NETWORK OF COMMUNITY MEMBERS IN UGANDA.

DATES OF REPORTS BY GRANTEE

43993

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

FOOTSTEPS AFRICA

GRANTEE'S ADDRESS

PO BOX 1891, CHIRIMBA TOWNSHIP, ALONG M1 ROAD  
BLANTYRE, MALAWI

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
50,000.	10/01/19	10,385.

PURPOSE OF GRANT

IMPLEMENT AN INTEGRATED COMMUNITY-BASED PROGRAM IN FIVE VILLAGE IN SOUTHERN MALAWI.

DATES OF REPORTS BY GRANTEE

43889

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

LID - LOCAL INITIATIVES IN DEVELOPMENT

GRANTEE'S ADDRESS

CORNER MERSEY/OXFORD ROAD, HIS, PRIVATE BOX 2799  
GWERU, ZIMBABWE

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
235,000.	04/01/18	92,814.

PURPOSE OF GRANT

PROVIDE ORGANIC FARMING TRAINING, CERTIFICATION AND INPUTS TO SMALLHOLDER FARMERS IN CHITORA, ZIMBABWE. CONSTRUCT WATER HARVESTING DAMS; DRILL SOLAR POWERED BOREHOLES; AND PRODUCE STORAGE FACILITY. SUPPORT TWO PRIMARY SCHOOLS IN THE CHITORA COMMUNITY, SHURUGWI DISTRICT, THROUGH IMPROVING EDUCATIONAL SUPPORT SERVICES, INFRASTRUCTURE, ACCESS TO CLEAN WATER, SANITATION SERVICES AND NUTRITION.

DATES OF REPORTS BY GRANTEE

43871

ANY DIVERSION BY GRANTEE

NONE



GRANTEE'S NAME

NOOMAYIANAT COMMUNITY DEVELOPMENT ORGANIZATION

GRANTEE'S ADDRESS

PO BOX 155 LOITOKTOK  
KAJIADO, KENYA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
32,960.	04/01/18	4,151.

PURPOSE OF GRANT

THIS PROGRAM SUPPORTS PASTORALISTS AND THEIR FAMILIES THROUGH IMPROVED LIVELIHOOD OPTIONS BY DIVERSIFYING ECONOMIC ACTIVITIES, IMPROVING CROP HUSBANDRY AND ACCESS TO MARKET SYSTEMS. WOMEN ARE ALSO SUPPORTED THROUGH A VILLAGE SAVINGS AND LOAN VSLA PROGRAM IN KENYA.

DATES OF REPORTS BY GRANTEE

44116

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

PUMP AID

GRANTEE'S ADDRESS

90-92 GREAT PORTLAND ST LONDON  
LONDON, UNITED KINGDOM

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
220,000.	04/01/19	135,649.

PURPOSE OF GRANT

IMPROVE THE WELL-BEING OF SMALL-SCALE FARMING HOUSEHOLDS THROUGH WASH INITIATIVES, AGRICULTURE AND JOB CREATION IN MCHINJI, MALAWI

DATES OF REPORTS BY GRANTEE

43965

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

RAISING THE VILLAGE

GRANTEE'S ADDRESS

720 BATHURST ST. SUITE 305  
TORONTO, CANADA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
175,254.	07/01/18	44,542.

PURPOSE OF GRANT

PROGRAM FOCUSES ON LIVELIHOODS IMPROVEMENT, NUTRITION AND FOOD SECURITY WITH AN EMPHASIS ON IMPROVED AGRICULTURAL DIVERSIFICATION, CROP YIELDS AND LIVESTOCKS WITH A SPECIFIC FOCUS ON VULNERABLE GROUPS NAMELY YOUTHS, WOMEN, AND OVGS IN UGANDA.

DATES OF REPORTS BY GRANTEE

43864

ANY DIVERSION BY GRANTEE

NONE

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 14

ACTIVITY ONE

VIBRANT VILLAGE ECUADOR WORKS WITHIN MULTIPLE COMMUNITIES IN THE NORTHERN HIGHLANDS. OUR OBJECTIVE IS TO ENHANCE AGRICULTURAL PRODUCTIVITY AND INCREASE FAMILIES' INTAKE OF NUTRITIOUS FOODS. BIO-INTENSIVE GARDENING IS EXTENDED ACROSS THE COMMUNITIES BY KNOWLEDGEABLE STAFF. FAMILIES RECEIVE TRAINING IN PLANTING, HARVESTING AND SEED PRESERVATION FOR THEIR BACKYARD/KITCHEN GARDENS. THIS PROGRAM ALSO INCLUDES A LARGE SENIOR CENTER, ARTS EDUCATION FOR AT-RISK YOUTH, AND IRRIGATION PROJECTS TO SUPPORT THE LARGER COMMUNITY.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

239,796.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 15

ACTIVITY TWO

VIBRANT VILLAGE KENYA WORKS IN THE LAKE VICTORIA REGION OF WESTERN KENYA. THIS PROGRAM FOCUSES ON FARM INPUT CREDIT, ADVANCED TEACHER TRAINING, TUTORING PROGRAMS FOR PRIMARY SCHOOL STUDENTS, A FARM COOPERATIVE, ADULT EDUCATION. THE FARM INPUT PROGRAM REACHED ALMOST 1500 PEOPLE, INCREASING THEIR YIELDS AND PROFITS. THE TEACHER TRAINING REACHED 26 TEACHERS IMPACTING OVER 300 PUPILS. THE TUTORING PROGRAM TARGETED 550 UNDER-PERFORMING PRIMARY SCHOOL STUDENTS, AND WAS CONDUCTED BY 89 HIGH SCHOOL STUDENTS WHO GAINED LEADERSHIP SKILLS. THE AGRICULTURAL COOPERATIVE HAS 70 MEMBERS AND IS ON ITS WAY TO BECOMING SELF-SUSTAINING. THE ADULT EDUCATION COMPONENT FOCUSES ON LITERACY AND NUMERACY, IN ADDITION TO BASIC COMPUTER CLASSES.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

350,000.

ACTIVITY THREE

VIBRANT VILLAGE GHANA WORKS IN THE UPPER WEST REGION OF GHANA TO ADDRESS KEY ISSUES OF WATER ACCESS, SANITATION AND HYGIENE, AND ACCESS TO GARDENS. WE WORK TO CONSTRUCT AND REPAIR BOREHOLES, PROVIDING 12,833 (CUMULATIVE) PEOPLE WITH ACCESS TO CLEAN WATER. WE TRAINED COMMUNITIES AND HOUSEHOLDS IN HAND WASHING AND SANITATION PRACTICES. THIS EDUCATION WAS ALSO EXTENDED TO 24 SCHOOLS. WE EXPANDED OUR DRY-SEASON GARDENS TO INCLUDE 4 COMMUNITY GARDENS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

403,908.

Form **990-W**  
(Worksheet)

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

OMB No. 1545-0047

(and on Investment Income for Private Foundations) FORM 990-T

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990W](http://www.irs.gov/Form990W) for instructions and the latest information.  
▶ Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1. See instructions for tax computation .....	2	
3	Alternative minimum tax for trusts. See instructions .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits. See instructions .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes. See instructions .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels. See instructions .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions .....	10a	
b	Enter the tax shown on the 2019 return. See instructions. <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	28,586.
c	<b>2020 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	28,600.

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions .....	11	07/15/20	07/15/20	09/15/20	12/15/20
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization." .....	12	7,150.	7,150.	7,150.	7,150.
13	2019 Overpayment. See instructions .....	13	331.			
14	Payment due (Subtract line 13 from line 12) .....	14	6,819.	7,150.	7,150.	7,150.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2020)

ESTIMATED TAX	28,600.
OVERPAYMENT APPLIED	331.
AMOUNT DUE	28,269.

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

**2019**

For calendar year 2019 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury  
Internal Revenue Service

Open to Public Inspection for  
501(c)(3) Organizations Only

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3) )  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a)</p>	<p>Print or Type</p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>THE VIBRANT VILLAGE FOUNDATION</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>1737 NE ALBERTA STREET, NO. 207</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>PORTLAND, OR 97211</b></p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.)  <b>27-0745672</b></p> <p><b>E</b> Unrelated business activity code (See instructions.)  <b>211110</b></p>
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<p><b>C</b> Book value of all assets at end of year  <b>85,870,169.</b></p>	<p><b>F</b> Group exemption number (See instructions.) ▶</p> <p><b>G</b> Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>
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**H** Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ SEE STATEMENT 17. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? .....  Yes  No  
 If "Yes," enter the name and identifying number of the parent corporation. ▶

**J** The books are in care of ▶ KENNETH E. DE LASKI Telephone number ▶ 503-206-4859

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4a</b> Capital gain net income (attach Schedule D)	<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>		
<b>6</b> Rent income (Schedule C)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>		
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>		
<b>11</b> Advertising income (Schedule J)	<b>11</b>		
<b>12</b> Other income (See instructions; attach schedule) <u>STATEMENT 18</u>	<b>12</b> 221,928.		221,928.
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b> 221,928.		221,928.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)			
<b>14</b> Compensation of officers, directors, and trustees (Schedule K)		<b>14</b>	
<b>15</b> Salaries and wages		<b>15</b>	
<b>16</b> Repairs and maintenance		<b>16</b>	
<b>17</b> Bad debts		<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)		<b>18</b>	
<b>19</b> Taxes and licenses		<b>19</b>	350.
<b>20</b> Depreciation (attach Form 4562)	<b>20</b>		
<b>21</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>	<b>21b</b>	
<b>22</b> Depletion		<b>22</b>	
<b>23</b> Contributions to deferred compensation plans		<b>23</b>	
<b>24</b> Employee benefit programs		<b>24</b>	
<b>25</b> Excess exempt expenses (Schedule I)		<b>25</b>	
<b>26</b> Excess readership costs (Schedule J)		<b>26</b>	
<b>27</b> Other deductions (attach schedule) <u>SEE STATEMENT 19</u>		<b>27</b>	69,327.
<b>28 Total deductions.</b> Add lines 14 through 27		<b>28</b>	69,677.
<b>29</b> Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13		<b>29</b>	152,251.
<b>30</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		<b>30</b>	0.
<b>31</b> Unrelated business taxable income. Subtract line 30 from line 29		<b>31</b>	152,251.

<b>Part III Total Unrelated Business Taxable Income</b>			
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	152,251.
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules) <b>STMT 21 STMT 22</b>	34	15,125.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	137,126.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	137,126.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
39	<b>Unrelated business taxable income.</b> Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39	136,126.

<b>Part IV Tax Computation</b>			
40	<b>Organizations Taxable as Corporations.</b> Multiply line 39 by 21% (0.21)	40	28,586.
41	<b>Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	41	
42	<b>Proxy tax.</b> See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	<b>Tax on Noncompliant Facility Income.</b> See instructions	44	
45	<b>Total.</b> Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	28,586.

<b>Part V Tax and Payments</b>			
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a	
b	Other credits (see instructions)	46b	
c	General business credit. Attach Form 3800	46c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	
e	<b>Total credits.</b> Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	28,586.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48	
49	<b>Total tax.</b> Add lines 47 and 48 (see instructions)	49	28,586.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51a	Payments: A 2018 overpayment credited to 2019	51a	
b	2019 estimated tax payments	51b	
c	Tax deposited with Form 8868	51c	30,000.
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d	
e	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	51g	
52	<b>Total payments.</b> Add lines 51a through 51g	52	30,000.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53	1,083.
54	<b>Tax due.</b> If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	<b>Overpayment.</b> If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	331.
56	Enter the amount of line 55 you want: <b>Credited to 2020 estimated tax</b> 331. <b>Refunded</b>	56	0.

<b>Part VI Statements Regarding Certain Activities and Other Information</b> (see instructions)			Yes	No
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here <b>SEE STATEMENT 20</b>		X	
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.			X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_ Title: **TREASURER**

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**Paid Preparer Use Only**

Print/Type preparer's name: **JAMES KIM** Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check  if self-employed PTIN: **P01718502**

Firm's name: **MCDONALD JACOBS, P.C.** Firm's EIN: **93-0900579**

Firm's address: **520 SW YAMHILL ST., STE 500 PORTLAND, OR 97204** Phone no.: **(503) 227-0581**



**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ► **N/A**

1	Inventory at beginning of year .....	1		6	Inventory at end of year .....	6	
2	Purchases .....	2					
3	Cost of labor .....	3		7	<b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 .....	7	
4a	Additional section 263A costs (attach schedule) .....	4a		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....		Yes No
b	Other costs (attach schedule) .....	4b					
5	<b>Total.</b> Add lines 1 through 4b .....	5					

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 0. (b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) 0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> .....		Enter here and on page 1, Part I, line 7, column (A) 0.		Enter here and on page 1, Part I, line 7, column (B) 0.
<b>Total dividends-received deductions</b> included in column 8 .....				0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
<b>Totals</b> .....			0.	0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
<b>Totals</b> .....		0.		0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 25.
<b>Totals</b> .....		0.	0.			0.

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5)) .....		0.	0.			0.

**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> .....	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b> .....	Enter here and on page 1, Part I, line 11, col. (A). <b>0.</b>	Enter here and on page 1, Part I, line 11, col. (B). <b>0.</b>				Enter here and on page 1, Part II, line 26. <b>0.</b>

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 .....			<b>0.</b>

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY STATEMENT 17

HOLDS INTEREST IN PUBLICLY TRADED PARTNERSHIPS

TO FORM 990-T, PAGE 1

FORM 990-T OTHER INCOME STATEMENT 18

DESCRIPTION	AMOUNT
INCOME FROM PASSTHROUGH ENTITIES	221,928.
TOTAL TO FORM 990-T, PAGE 1, LINE 12	221,928.

FORM 990-T OTHER DEDUCTIONS STATEMENT 19

DESCRIPTION	AMOUNT
TAX PREPARATION FEES AND CONSULTING	6,750.
INVESTMENT MANAGEMENT FEES	62,577.
TOTAL TO FORM 990-T, PAGE 1, LINE 27	69,327.

FORM 990-T NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST STATEMENT 20

NAME OF COUNTRY

GHANA  
ECUADOR  
KENYA

FORM 990-T

CONTRIBUTIONS

STATEMENT 21

DESCRIPTION/KIND OF PROPERTY

METHOD USED TO DETERMINE FMV

AMOUNT

GRATNS TO PUBLIC CHARITIES

N/A

2,576,385.

TOTAL TO FORM 990-T, PAGE 2, LINE 34

2,576,385.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 22

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT  
 QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS  
 FOR TAX YEAR 2014  
 FOR TAX YEAR 2015  
 FOR TAX YEAR 2016  
 FOR TAX YEAR 2017  
 FOR TAX YEAR 2018

TOTAL CARRYOVER		
TOTAL CURRENT YEAR 10% CONTRIBUTIONS	2,576,385	
TOTAL CONTRIBUTIONS AVAILABLE	2,576,385	
TAXABLE INCOME LIMITATION AS ADJUSTED	15,125	
EXCESS CONTRIBUTIONS	2,561,260	
EXCESS 100% CONTRIBUTIONS	0	
TOTAL EXCESS CONTRIBUTIONS	2,561,260	
ALLOWABLE CONTRIBUTIONS DEDUCTION		15,125
TOTAL CONTRIBUTION DEDUCTION		15,125

Name **THE VIBRANT VILLAGE FOUNDATION** Employer identification number **27-0745672**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1	Total tax (see instructions) .....	1	28,586.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b	
2c	Credit for federal tax paid on fuels (see instructions) .....	2c	
2d	<b>Total.</b> Add lines 2a through 2c .....	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	3	28,586.
4	Enter the tax shown on the corporation's 2018 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....	4	
5	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5	28,586.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>		(a)	(b)	(c)	(d)
9	<b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	05/15/19	06/15/19	09/15/19	12/15/19
10	<b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	7,147.	7,146.	7,147.	7,146.
11	Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....				
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12	Enter amount, if any, from line 18 of the preceding column .....				
13	Add lines 11 and 12 .....				
14	Add amounts on lines 16 and 17 of the preceding column .....		7,147.	14,293.	21,440.
15	Subtract line 14 from line 13. If zero or less, enter -0- .....	0.	0.	0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....		7,147.	14,293.	
17	<b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	7,147.	7,146.	7,147.	7,146.
18	<b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....				

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations:</b> Use 3rd month instead of 4th month. <b>Form 990-PF and Form 990-T filers:</b> Use 5th month instead of 4th month.) See instructions ..... <b>19</b>				
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2019 and before 7/1/2019 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$ ...	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 06/30/2019 and before 10/1/2019 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$ ...	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2019 and before 1/1/2020 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$ ...	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2019 and before 4/1/2020 .....	<b>27</b>	<b>SEE ATTACHED WORKSHEET</b>		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$ ...	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2020 and before 7/1/2020 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$ .....	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2020 and before 10/1/2020 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$ .....	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2020 and before 1/1/2021 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$ .....	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2020 and before 3/16/2021 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b> \$			<b>1,083.</b>

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.