

Return of Private Foundation

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

2018

Open to Public Inspection

Form **990-PF**

Department of the Treasury
Internal Revenue Service

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▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2018 or tax year beginning , and ending

Name of foundation THE VIBRANT VILLAGE FOUNDATION		A Employer identification number 27-0745672
Number and street (or P.O. box number if mail is not delivered to street address) 1737 NE ALBERTA STREET	Room/suite 207	B Telephone number 503-206-4859
City or town, state or province, country, and ZIP or foreign postal code PORTLAND, OR 97211		C If exemption application is pending, check here <input type="checkbox"/>
G 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		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H 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		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 77,047,452.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <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)
Revenue	1 Contributions, gifts, grants, etc., received	1,006,797.		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	1,579,543.	1,579,543.		STATEMENT 1
	4 Dividends and interest from securities	1,381,898.	1,381,898.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	2,724,189.			
	b Gross sales price for all assets on line 6a	18,367,955.			
	7 Capital gain net income (from Part IV, line 2)		2,724,189.		
	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	27,378.	27,378.		STATEMENT 3	
12 Total. Add lines 1 through 11	6,719,805.	5,713,008.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages	260,424.	0.		260,424.
	15 Pension plans, employee benefits	61,417.	0.		61,417.
	16a Legal fees	15,918.	7,959.		7,959.
	b Accounting fees	10,000.	500.		5,000.
	c Other professional fees	152,742.	1,350,095.		0.
	17 Interest				
	18 Taxes	100,200.	7,548.		0.
	19 Depreciation and depletion				
	20 Occupancy	38,479.	0.		38,479.
	21 Travel, conferences, and meetings	47,361.	0.		47,361.
	22 Printing and publications				
	23 Other expenses	808,636.	0.		808,636.
	24 Total operating and administrative expenses. Add lines 13 through 23	1,495,177.	1,366,102.		1,229,276.
	25 Contributions, gifts, grants paid	2,268,214.			2,268,214.
26 Total expenses and disbursements. Add lines 24 and 25	3,763,391.	1,366,102.		3,497,490.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	2,956,414.				
b Net investment income (if negative, enter -0-)		4,346,906.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		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
Assets	1 Cash - non-interest-bearing	2,303,078.	4,227,428.	4,227,428.
	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.	10,432.
	9 Prepaid expenses and deferred charges		3,265.	3,265.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock	STMT 9 68,724,426.	57,888,093.	57,888,093.
	c Investments - corporate bonds	STMT 10 1,989,660.	1,925,775.	1,925,775.
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other	STMT 11 9,913,965.	12,804,141.	12,804,141.	
14 Land, buildings, and equipment: basis	275,287.			
Less: accumulated depreciation	86,969.	42,898.	188,318.	
15 Other assets (describe)		127,888.	0.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		83,101,915.	77,047,452.	
17 Accounts payable and accrued expenses		16,252.	8,052.	
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 Total liabilities (add lines 17 through 22)		16,252.	8,052.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds		0.	0.
	28 Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.
	29 Retained earnings, accumulated income, endowment, or other funds		83,085,663.	77,039,400.
30 Total net assets or fund balances		83,085,663.	77,039,400.	
31 Total liabilities and net assets/fund balances		83,101,915.	77,047,452.	

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 30 (must agree with end-of-year figure reported on prior year's return)	1	83,085,663.
2 Enter amount from Part I, line 27a	2	2,956,414.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	86,042,077.
5 Decreases not included in line 2 (itemize) UNREALIZED LOSS ON INVESTMENTS	5	9,002,677.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	77,039,400.

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	01/01/17	12/31/19
b				
c				
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 18,367,955.		15,643,766.	2,724,189.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) 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			2,724,189.	
b				
c				
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	2,724,189.	
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))
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
2013	2,260,363.	75,496,099.	.029940
2 Total of line 1, column (d)			2 .210745
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 .042149
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			4 81,227,972.
5 Multiply line 4 by line 3			5 3,423,678.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 43,469.
7 Add lines 5 and 6			7 3,467,147.
8 Enter qualifying distributions from Part XII, line 4			8 3,497,490.

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	43,469.
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	43,469.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	43,469.
6 Credits/Payments:			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	106,161.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	106,161.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	542.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	62,150.	
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	11	62,150.	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> _____ OR		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		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 interest in foreign countries.

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)

5a During the year, did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 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 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 <input type="checkbox"/>	5b		X
Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>			
c 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? SEE STATEMENT 15 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a 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 Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b		X
If "Yes" to 6b, file Form 8870.			
7a 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 If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b		N/A
8 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 14		0.	0.	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
LAURA L. KOCH - 1737 NE ALBERTA ST., STE 207, PORTLAND, OR 97211	EXECUTIVE DIRECTOR 40.00	78,300.	10,944.	0.
MARIEME DAFF - 1737 NE ALBERTA ST., STE 207, PORTLAND, OR 97211	SENIOR PROGRAM OFFICER 40.00	66,863.	13,125.	0.
PAUL MURTHA - 1737 NE ALBERTA ST., STE 207, PORTLAND, OR 97211	PROGRAM MANAGER 40.00	50,000.	1,500.	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."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1: VIBRATO CAPITAL, LLC, 1737 NE ALBERTA ST, #207, PORTLAND, OR 97211, PORTFOLIO MANAGEMENT, 152,742.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity, Expenses. Rows 1-4: SEE STATEMENT 16 (246,141), SEE STATEMENT 17 (281,000), SEE STATEMENT 18 (226,815).

Part IX-B Summary of Program-Related Investments

Table with 2 columns: Description of investment, Amount. Row 1: N/A. Row 2: (blank). Row 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	76,543,588.
b	Average of monthly cash balances	1b	5,921,358.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	82,464,946.
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	82,464,946.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,236,974.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	81,227,972.
6	Minimum investment return. Enter 5% of line 5	6	4,061,399.

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	4,061,399.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	43,469.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	43,469.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,017,930.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,017,930.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,017,930.

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	3,497,490.
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	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,497,490.
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	43,469.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,454,021.

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 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				4,017,930.
2 Undistributed income, if any, as of the end of 2018:				
a Enter amount for 2017 only			1,518,243.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$ 3,497,490.				
a Applied to 2017, but not more than line 2a			1,518,243.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2018 distributable amount				1,979,247.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				2,038,683.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

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 2018, 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) 2018	(b) 2017	(c) 2016	(d) 2015	
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)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
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
a Paid during the year				
ACTION FOR ENVIRONMENTAL SUSTAINABILITY (AFES) PO BOX 3415 BLANTYRE, MALAWI. BLANTYRE, MALAWI 00265-265		NC	BUILD CLEAN WATER SOURCES AND PROVIDE WATER SANITATION & HYGIENE (WASH) EDUCATION IN MALAWI.	51,964.
AFRICA BRIDGE P.O. BOX 115 MARYLHURST, OR 97036		PC	PROMOTE CO-OPS AND SOCIAL SERVICES FOR HOUSEHOLDS WITH VULNERABLE CHILDREN IN TANZANIA.	76,296.
ANDANDO FOUNDATION PO BOX 542 JEFFERSON, OR 97352		PC	SUPPORT COOPERATIVE GARDENS, SCHOOL INFRASTRUCTURE & MEALS FOR SCHOOL CHILDREN IN CENTRAL, SENEGAL.	285,268.
ARTICHOKE MUSIC 3130 SE HAWTHORNE BLVD PORTLAND, OR 97214		PC	PROVIDE MUSIC EDUCATION FOR MIDDLE SCHOOL STUDENTS IN PORTLAND, OREGON.	18,652.
HAITI COMMUNITY SUPPORT 2927 NE 89TH AVE PORTLAND, OR 97220		PC	SUPPOT FOR COMMUNITY REBUILDING FOLLOWING HURRICANE IN AU CENTRE, HAITI.	5,000.
Total	SEE CONTINUATION SHEET(S)			2,268,214.
b Approved for future payment				
NONE				
Total				0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	1,579,543.	
4 Dividends and interest from securities			14	1,381,898.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	27,378.	
8 Gain or (loss) from sales of assets other than inventory			18	2,724,189.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0.		5,713,008.	0.
13 Total. Add line 12, columns (b), (d), and (e)					5,713,008.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
12	THE ORGANIZATION MAKES LOANS TO FARMERS INCLUDING SEED OR TOOLS WHICH THE ORGANIZATION CHARGES A SMALL AMOUNT OF INTEREST ON TO THE FARMERS. THE INTEREST CHARGED IS USED TO GO BACK INTO THE PROGRAM TO PURCHASE MORE SEED OR TOOLS SO THAT MORE LOANS CAN BE MADE TO ADDITIONAL FARMERS.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. All entries in (b) and (c) are N/A.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No (X)

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. All entries in (a) and (b) are N/A.

Sign Here 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. Signature of officer or trustee: JAMES KIM, Date: [blank], Title: TREASURER. May the IRS discuss this return with the preparer shown below? See instr. (X) Yes [] No

Paid Preparer Use Only Print/Type preparer's name: JAMES KIM, Preparer's signature: [blank], Date: [blank], 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

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

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
BEGA KWA BEGA PO BOX 5731, 28009 KAMPALA, UGANDA 28009		NC	SUPPORT AGRICULTURAL AND BUSINESS TRAINING, NUTRITION PROGRAMS AND MOBILE HEALTH CLINICS IN UGANDA.	88,398.
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	150,000.
DESEA PERU SECTOR LIMACPAMPA LAMAY, CUSCO, PERU		NC	INSTALL BIOSAND WATER FILTERS IN HOMES, TRAIN COMMUNITY HEALTH WORKERS IN THE HIGHLANDS OF PERU.	75,000.
ECOTRUST 721 NW 9TH AVE#200 PORTLAND, OR 97209		PC	SUPPORT FOR ECOTRUST'S WORK TO CREATE MORE RESILIENT COMMUNITIES, ECONOMIES, AND ECOSYSTEMS IN THE	15,000.
EGBOK MISSION 226 NORTH CLINTON STREET CHICAGO, IL 60661		PC	PROVIDE VOCATIONAL TRAINING FOR UNDERPRIVILEGED YOUTH IN THE HOSPITALITY INDUSTRY IN CAMBODIA.	5,000.
FOCUS INTERNATIONAL 4930 E TEXAS ROAD ALLENTOWN, PA 73072		PC	SUPPORT FOR AN ORGANIZATION THAT FABRICATES PROTESTHICS AND PROVIDES REHABILITATION	1,463.
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	115,815.
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	45,637.
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	100,000.
HAITI CHILDREN 1101 VILLAGE RD STE LL4D CARBONDALE, CO 81623		PC	SUPPORT A K-12 SCHOOL IN PORT-AU-PRINCE, AND PROVIDE MEALS FOR VULNERABLE FOLKS IN NORTHERN HAITI.	147,233.
Total from continuation sheets				1,831,034.

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

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
HAITI HEMP-FEED 504 EAST FAYETTE STREE SYRACUSE, NY 13202		PC	SUPPORT FOR A SCHOOL LUNCH PROGRAM IN NORTHERN HAITI	36,690.
LOCAL INITIATIVES IN DEVELOPMENT AGENCY CORNER MERSEY/OXFORD ROAD, HIS, PRIVATE BOX 2799 GWERU, ZIMBABWE 263		NC	BUILD CLEAN WATER SOURCES, PROMOTE COMMUNITY GARDENS AND IMPROVED CROP STORAGE PRACTICES IN ZIMBABWE	146,761.
NOOMAYIANAT COMMUNITY DEVELOPMENT ORG PO BOX 155 -00209 LOITOKITOK, KENYA		NC	TRAIN MAASAI WOMEN ON AGRICULTURAL METHODS, SOIL CONSERVATION, BUSINESS & MARKET ACCESS IN KENYA	32,960.
NTENGWE 169 COURTEY SELOUS CRESCENT VICTORIA FALLS, ZIMBABWE		NC	PROVIDE CLEAN WATER SOURCES & MANAGEMENT TRAINING, & WASH EDUCATION TO REGIONS IN ZIMBABWE.	12,268.
OXFAM AMERICA 101 17TH ST NW, SUITE 1300 WASHINGTON, DC 20036-4710		PC	SUPPORT FARMERS IN HAITI TO IMPROVE THEIR RICE PRODUCTION AND TO DIVERSIFY THEIR INCOME THROUGH POULTRY AND	43,946.
PUMP AID 90-92 GREAT PORTLAND STREET LONDON, UNITED KINGDOM W1W 7NT		NC	BUILD CLEAN WATER SOURCES AND IMPROVED SANITATION FACILITIES IN MALAWI.	36,751.
SHANTA FOUNDATION PO BOX 1603 DURANGO, CO 81302		PC	SUPPORT A MULTI-SECTOR COMMUNITY DEVELOPMENT PROGRAM IN PAUK, MYANMAR.	91,556.
SONJE AYITI ORGANIZATION, INC 4171 ROARING RUN RD GOODE, VA 24556		PC	SUPPORTING SUSTAINABLE, COMMUNITY-LED PROGRAMS IN HEALTH, EDUCATION, LEADERSHIP,	105,406.
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.	51,883.
SURFAID 530 SECOND STREET ENCINITAS, CA 92024		PC	PROVIDE CLEAN WATER SOURCES AND TRAIN COMMUNITY HEALTH WORKERS IN INDONESIA.	50,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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 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,	66,953.
THE GARDENS' EDGE P.O. BOX 7758 ALBUQUERQUE, NM 87194		PC	SUPPORT FOR FAMILIES TO IMPROVE HOUSEHOLD NUTRITION THROUGH HOUSEHOLD GARDNES, CLASSES AND SCREENINGS	58,000.
THE WATER TRUST 81 PROSPECT STREET BROOKLYN, NY 11201		PC	SUPPORT VILLAGES, SCHOOLS, AND HEALTH CENTERS IN RURAL UGANDA TO EQUIP COMMUNITIES TO	149,999.
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	65,993.
FILANTHROPE - LAOS 5530 CREIGHTON CT COLORADO SPRINGS, CO 80918		PC	DISASTER RELIEF FOR FLOODING RELATED TO A HYDROELECTRIC DAM BREAK IN SOUTH EASTERN LAOS.	10,000.
RAISING THE VILLAGE 720 BATHRUST ST SUITE 305 TORONTO, CANADA M5S 2R4		NC	SUPPORT LAST-MILE COMMUNITIES IN UGANDA LIVING IN EXTREME POVERTY THROUGH COMMUNITY DESIGNED	128,322.
Total from continuation sheets				

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - ECOTRUST

SUPPORT FOR ECOTRUST'S WORK TO CREATE MORE RESILIENT COMMUNITIES, ECONOMIES, AND ECOSYSTEMS IN THE PACIFIC NW REGION, USA.

NAME OF RECIPIENT - FOCUS INTERNATIONAL

SUPPORT FOR AN ORGANIZATION THAT FABRICATES PROSTHETICS AND PROVIDES REHABILITATION TRAINING IN IMBABURA PROVINCE, ECUADOR.

NAME OF RECIPIENT - FONKOZE

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.

NAME OF RECIPIENT - GREEN EMPOWERMENT

INSTALL SOLAR WATER PUMPS AND DOMESTIC WATER SERVICE, AND ENGAGE THE COMMUNITY IN BEE KEEPING IN THE COMMUNITY OF EL JAZMIN, NICARAGUA

NAME OF RECIPIENT - GROUNDSWELL INTERNATIONAL

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.

NAME OF RECIPIENT - OXFAM AMERICA

SUPPORT FARMERS IN HAITI TO IMPROVE THEIR RICE PRODUCTION AND TO DIVERSIFY THEIR INCOME THROUGH POULTRY AND OTHER ECONOMIC ACTIVITIES.

NAME OF RECIPIENT - SONJE AYITI ORGANIZATION, INC

Part XV | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

SUPPORTING SUSTAINABLE, COMMUNITY-LED PROGRAMS IN HEALTH, EDUCATION, LEADERSHIP, LIVELIHOOD, AND INFRASTRUCTURE IN MYANMAR

NAME OF RECIPIENT - THE BOMA PROJECT

EMPOWER WOMEN IN THE DRYLANDS OF KENYA TO ESTABLISH SUSTAINABLE LIVELIHOODS, BUILD RESILIENT FAMILIES, GRADUATE FROM EXTREME POVERTY.

NAME OF RECIPIENT - THE GARDENS' EDGE

SUPPORT FOR FAMILIES TO IMPROVE HOUSEHOLD NUTRITION THROUGH HOUSEHOLD GARDNES, CLASSES AND SCREENINGS FO CHILDREN UNDER 2 IN GUATEMALA.

NAME OF RECIPIENT - THE WATER TRUST

SUPPORT VILLAGES, SCHOOLS, AND HEALTH CENTERS IN RURAL UGANDA TO EQUIP COMMUNITIES TO MINIMIZE PREVENTABLE DISEASE THROUGH IMPROVED WATER, SANITATION, AND HYGIENE.

NAME OF RECIPIENT - TRICKLE UP

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.

NAME OF RECIPIENT - RAISING THE VILLAGE

SUPPORT LAST-MILE COMMUNITIES IN UGANDA LIVING IN EXTREME POVERTY THROUGH COMMUNITY DESIGNED PROJECTS WHICH INCREASE HOUSEHOLD INCOMES.

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 for the latest information.

OMB No. 1545-0047

2018

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 (entering "N/A" in column (b) instead of the contributor name and address), 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 THE VIBRANT VILLAGE FOUNDATION	Employer identification number 27-0745672
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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	\$ 1,006,797.	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 THE VIBRANT VILLAGE FOUNDATION	Employer identification number 27-0745672
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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	8,959 SHARES OF VARIOUS PUBLICLY TRADED STOCKS _____ _____ _____	\$ 1,006,797.	01/09/18
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization THE VIBRANT VILLAGE FOUNDATION	Employer identification number 27-0745672
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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
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
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.

Part I Required Annual Payment

1	Total tax (see instructions)	1	43,469.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1		
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		
2c	Credit for federal tax paid on fuels (see instructions)		
2d	Total. Add lines 2a through 2c		
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	43,469.
4	Enter the tax shown on the corporation's 2017 income tax return. See instructions. Caution: 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	59,523.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	43,469.

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.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. 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	9	05/15/18	06/15/18	09/15/18	12/15/18
10 Required installments. 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	10	10,867.	10,868.	10,867.	10,867.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11	6,161.			100,000.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				100,000.
14 Add amounts on lines 16 and 17 of the preceding column	14		4,706.	15,574.	26,441.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	6,161.	0.	0.	73,559.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		4,706.	15,574.	
17 Underpayment. 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	17	4,706.	10,868.	10,867.	
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

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)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions 19				
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2018 and before 7/1/2018	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2018 and before 10/1/2018	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2018 and before 1/1/2019	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2018 and before 4/1/2019	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 6\% (0.06)}{365}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2019 and before 7/1/2019	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2019 and before 10/1/2019	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2019 and before 1/1/2020	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2019 and before 3/16/2020	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. 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	38			\$ 542.

* 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. You can also call 1-800-829-4933 to get interest rate information.

**FORM 990-PF
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s) THE VIBRANT VILLAGE FOUNDATION				Identifying Number 27-0745672	
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/18	10,867.	10,867.			
05/15/18	-6,161.	4,706.	31	.000136986	20.
06/15/18	10,868.	15,574.	92	.000136986	196.
09/15/18	10,867.	26,441.	90	.000136986	326.
12/14/18	-100,000.	-73,559.			
12/15/18	10,867.	-62,692.			
12/31/18	0.	-62,692.	135	.000164384	
Penalty Due (Sum of Column F)					542.

* Date of estimated tax payment, withholding credit date or installment due date.

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	1,579,543.	1,579,543.	
TOTAL TO PART I, LINE 3	1,579,543.	1,579,543.	

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	1,381,898.	0.	1,381,898.	1,381,898.	
TO PART I, LINE 4	1,381,898.	0.	1,381,898.	1,381,898.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
PASSTHROUGH INCOME	27,378.	27,378.	
TOTAL TO FORM 990-PF, PART I, LINE 11	27,378.	27,378.	

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	15,918.	7,959.		7,959.
TO FM 990-PF, PG 1, LN 16A	15,918.	7,959.		7,959.

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	10,000.	500.		5,000.
TO FORM 990-PF, PG 1, LN 16B	10,000.	500.		5,000.

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	152,742.	102,337.		0.
INVESTMENT MANAGEMENT FEES	0.	1,247,758.		0.
TO FORM 990-PF, PG 1, LN 16C	152,742.	1,350,095.		0.

FORM 990-PF

TAXES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL INCOME TAXES	100,000.	0.		0.
FOREIGN TAXES	0.	7,548.		0.
CITY AND COUNTY	200.	0.		0.
TO FORM 990-PF, PG 1, LN 18	100,200.	7,548.		0.

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.	0.		2,125.
WEB AND COMMUNICATION	1,343.	0.		1,343.
OFFICE EXPENSES	15,857.	0.		15,857.
DUES AND SUBSCRIPTION	1,093.	0.		1,093.
PAYROLL SERVICE	3,351.	0.		3,351.
CONSULTING	26,985.	0.		26,985.
SOFTWARE FEES	3,926.	0.		3,926.
OTHER DIRECT EMPLEMENTATION EXPENSE - ECUADOR	246,141.	0.		246,141.
OTHER DIRECT EMPLEMENTATION EXPENSE - GHANA	226,815.	0.		226,815.
OTHER DIRECT EMPLEMENTATION EXPENSE - KENYA	281,000.	0.		281,000.
TO FORM 990-PF, PG 1, LN 23	808,636.	0.		808,636.

FORM 990-PF

CORPORATE STOCK

STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
AECOM	61,454.	61,454.
AERCAP HOLDINGS N.V. EURO.	396,000.	396,000.
AERCAP HOLDINGS N.V. EURO.	100,703.	100,703.
AFLAC INC	270,262.	270,262.
AJO EMERGING MARKETS ALL CAP OFFSHORE FUND	3,567,936.	3,567,936.
AJO GLOBAL MARKET-NEUTRAL FUND, LTD	1,751,695.	1,751,695.
ALASKA AIR GROUP INC COM	547,650.	547,650.
AMERIPRISE FINL	179,725.	179,725.
ANGELES EQUITY PARTNERS I	280,976.	280,976.
ANTHEM INC COM	339,318.	339,318.
AQR DELTA TA XN FUND (9922VC998) - 7,500,000 SHARES	5,519,217.	5,519,217.
ASSURANT INC	82,821.	82,821.
AVIS BUDGET	27,875.	27,875.
BARING INTERNATIONAL SMALL CAP EQUITY FUND	2,198,924.	2,198,924.
BRANDYWINE GLOBAL OPPORTUNISTIC FIXED INCOME BROADCOM	8,177,668.	8,177,668.
CELANESE CORP	249,957.	249,957.
CMMT PARTNERS LP	193,166.	193,166.
COMMSCOPE	2,994,605.	2,994,605.
EOG RESOURCES	50,399.	50,399.
FIERA INTERNATIONAL EQUITY CAPITAL (9923E6998) - 5,000,000 SHARES	226,833.	226,833.
FLEX LTD	7,710,637.	7,710,637.
GEF COMPOST GROUP LLC	61,055.	61,055.
GEN MTRS CO COM	723,806.	723,806.
GOODYEAR TIRE & RUBBER CO.	501,750.	501,750.
HCA HEALTHCARE	76,844.	76,844.
HERTZ GLOBAL	379,324.	379,324.
MORRISON STREET DEBT OPPORTUNITIES FUND (9924FL992) - 160,000 SHARES	16,325.	16,325.
NATIONAL OILWELL VARCO	3,318,464.	3,318,464.
NCR CORP	142,532.	142,532.
OAKTREE ENHANCED INCOME FUND III	44,106.	44,106.
OWENS ILL INC	2,639,741.	2,639,741.
POST CREDIT OPPORTUNITIES	43,462.	43,462.
SANDS CAPITAL EMERGING MARKETS (9922G8994) - 5,000,000 SHARES	3,291,265.	3,291,265.
SANDS CAPITAL PRIVATE GROWTH FUND II L.P	3,576,849.	3,576,849.
SUNCOR ENERGY	3,011,123.	3,011,123.
TENNECO INC	201,664.	201,664.
VERIZON COMMUNICATIONS COM	21,529.	21,529.
WALGREENS BOOTS ALLIANCE INC	562,200.	562,200.
WESTERN DIGITAL CORP	409,980.	409,980.
WESTERN UNION	103,590.	103,590.
WHIRLPOOL CORP.	126,193.	126,193.
INVESCO LTD SHS (IVZ)	126,000.	126,000.
NOMAD FOODS LIMITED ORD NPV (DI)	70,609.	70,609.
AMERCO COM	244,814.	244,814.
GREAT ELM CAP GROUP INC COM NEW	329,094.	329,094.
HEIDRICK & STRUGGLES INTL INC (HSII)	206,741.	206,741.
IAC INTERACTIVECORP COM (IAC)	262,589.	262,589.
	505,007.	505,007.

THE VIBRANT VILLAGE FOUNDATION

27-0745672

LIVE NATION ENTERTAINMENT INC	283,138.	283,138.
NATURAL GROCERS BY VITAMIN COT COM	84,315.	84,315.
ROBERT HALF INTL INC	69,155.	69,155.
UFP TECH INC	320,467.	320,467.
ADIANT PLC COM USD	22,967.	22,967.
JOHNSON CONTROLS INTERNATIONAL PLC	183,178.	183,178.
WILLIS TOWERS WATSON PLC COM	242,369.	242,369.
AFFILIATED MANAGERS GROUP	84,968.	84,968.
ARROW ELECTRONICS INC	99,771.	99,771.
CROWN HLDGS INC COM	87,588.	87,588.
LINCOLN NATIONAL CORP IND	175,532.	175,532.
MICROCHIP TECHNOLOGY INC COM	261,573.	261,573.
TECH DATA CORP COM	48,595.	48,595.
TOTAL TO FORM 990-PF, PART II, LINE 10B	57,888,093.	57,888,093.

FORM 990-PF	CORPORATE BONDS	STATEMENT 10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
VANGUARD BD INDEX FD INC INTER-TERM BD INDEX FD	1,925,775.	1,925,775.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,925,775.	1,925,775.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT 11	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CONTRARIAN OPPORTUNITY FUND II, LP	FMV	189,551.	189,551.
SANDS CAPITAL PRIVATE GROWTH III, LP	FMV	434,423.	434,423.
SILVERVIEW CLO II LP	FMV	781,801.	781,801.
TENNENBAUM DIRECT LENDING VII	FMV	1,323,176.	1,323,176.
TENNENBAUM SPECIAL SITUATIONS (9924UL995) - 198,272.40 SHARES	FMV	665,078.	665,078.
OAKMARK INTL FUND INSTL	FMV	1,463,431.	1,463,431.
MS ADVANTAGE CL IS	FMV	6,859,117.	6,859,117.
ISHARES RUSSELL 1000 ETF	FMV	901,485.	901,485.
GAMING & LEISURE P COM USD	FMV	135,185.	135,185.
PACIFIC COAST OIL TR UNIT BEN INT	FMV	50,894.	50,894.
TOTAL TO FORM 990-PF, PART II, LINE 13		12,804,141.	12,804,141.

FORM 990-PF	OTHER ASSETS		STATEMENT 12
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
OTHER ASSETS - KENYA	120,655.	0.	0.
OTHER ASSETS - GHANA	7,233.	0.	0.
TO FORM 990-PF, PART II, LINE 15	127,888.	0.	0.

FORM 990-PF	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT 13
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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.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

GRANTEE'S NAME

ACTION FOR ENVIRONMENTAL SUSTAINABILITY AFES

GRANTEE'S ADDRESS

PO BOX 3415
BLNTYRE, MALAWI

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
165,496.	06/01/16	165,496.

PURPOSE OF GRANT

GRANT FUNDS SUPPORT THE CONSTRUCTION OF A GRAVITY FED IRRIGATION SCHEME TO SUPPORT FARMERS IN IRRIGATING GARDENS AND FIELDS TO INCREASE FOOD SECURITY WITH AN EMPHASIS ON ORGANIC AGRICULTURE IN MALAWI.

DATES OF REPORTS BY GRANTEE

11/06/18

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	72,333.

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.

DATES OF REPORTS BY GRANTEE

03/27/19

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>
75,000.	01/01/17	75,000.

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.

DATES OF REPORTS BY GRANTEE

01/23/19

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

ENVIROMENTAL 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>
25,000.	09/30/18	25,000.

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

03/18/2019

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

LOCAL INITIATIVES IN DEVELOPMENT LID

GRANTEE'S ADDRESS

CORNER MERSEY/OXFORD ROAD, HIS, PRIVATE BOX 2799
GWERU, ZIMBABWE, 263

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
235,000.	04/01/18	126,800.

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

02/18/2019

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

NOOMAYIANAT COMMUNITY DEVELOPMENT ORG

GRANTEE'S ADDRESS

PO BOX 155 LOITOKTOK
KAJIADO, KENYA, 00209

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
32,960.	04/01/18	28,300.

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.

DATES OF REPORTS BY GRANTEE

04/01/2019

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>
209,000.	10/01/16	209,000.

PURPOSE OF GRANT

THIS PROGRAM PROVIDES ACCESS TO CLEAN WATER AND IMPROVED SANITION THROUGH CONSTRUCTION OF NEW WATER POINTS AND THE IMPLEMENTATION OF COMMUNITY-LED TOTAL SANITATION INITIATIVES TO ENCOURAGE HOUSEHOLDS TO END OPEN DEFECATION AND CONSTRUCT HOUSEHOLD LATRINES.

DATES OF REPORTS BY GRANTEE

11/15/2018

ANY DIVERSION BY GRANTEE

NONE

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>
55,189.	10/01/18	19,152.

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

01/18/2019

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

NTENGWE FOR COMMUNITY DEVELOPMENT

GRANTEE'S ADDRESS

169 COURTNEY SELOUS CRESCENT
VICTORIA FALLS, MATABELELAND NORTH, ZIMBABWE

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
42,268.	10/01/17	42,268.

PURPOSE OF GRANT

CONSTRUCT A SAND ABSTRACTION WATER SOURCE AND A FORM WATER MANAGEMENT COMMITTEE. THE PROGRAM ALSO INCLUDES HEALTH AND HYGIENE EDUCATION TO PREVENT CONTAMINATION OF THE NEW WATER SOURCE AND IMPROVE HEALTH OUTCOMES FOR THE COMMUNITY IN ZIMBABWE.

DATES OF REPORTS BY GRANTEE

11/15/2018

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>
150,000.	07/01/20	104,757.

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

02/01/2019

ANY DIVERSION BY GRANTEE

NONE

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 16

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

246,141.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 17

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

281,000.

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

226,815.

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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

2018

For calendar year 2018 or other tax year beginning _____, and ending _____

▶ Go to 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).

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

Department of the Treasury
Internal Revenue Service

<p>A <input type="checkbox"/> Check box if address changed</p> <p>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>	Print or Type	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) THE VIBRANT VILLAGE FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 1737 NE ALBERTA STREET, NO. 207</p> <p>City or town, state or province, country, and ZIP or foreign postal code PORTLAND, OR 97211</p>	<p>D Employer identification number (Employees' trust, see instructions.) 27-0745672</p> <p>E Unrelated business activity code (See instructions.) 211110</p>
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<p>C Book value of all assets at end of year 77,047,452.</p>	<p>F Group exemption number (See instructions.) ▶</p>	<p>G 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 19**. 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
1a Gross receipts or sales			
b Less returns and allowances			
c Balance	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5	STMT 20	197,386.
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13	197,386.	197,386.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	350.
20 Charitable contributions (See instructions for limitation rules)	20	0.
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule) SEE STATEMENT 21	28	55,905.
29 Total deductions. Add lines 14 through 28	29	56,255.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	141,131.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31	
32 Unrelated business taxable income. Subtract line 31 from line 30	32	141,131.

Part III Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	141,131.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 23	35	140,465.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	666.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	0.

Part IV Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.

Part V Tax and Payments			
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	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)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g	
51	Total payments. Add lines 50a through 50g	51	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	55	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
56	At any time during the 2018 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 SEE STATEMENT 22	X	
57	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
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

Sign Here 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.

Signature of officer _____ Date _____ **TREASURER** Title _____
 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			7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	
3	Cost of labor	3			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	Total. 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)
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Totals		Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8		0.	0.
			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).
Totals			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).
Totals		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 26.
Totals	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)						
Totals (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)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 27. 0.

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)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY STATEMENT 19

HOLDS INTEREST IN PUBLICLY TRADED PARTNERSHIPS

TO FORM 990-T, PAGE 1

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS STATEMENT 20

DESCRIPTION	NET INCOME OR (LOSS)
TCP - INTEREST INCOME	4,309.
TENNENBAUM - INTEREST INCOME	1,693.
OAKTREE ENHANCED INCOME FUND III - INTEREST INCOME	159,424.
POST CREDIT - INTEREST INCOME	31,960.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	197,386.

FORM 990-T OTHER DEDUCTIONS STATEMENT 21

DESCRIPTION	AMOUNT
TAX PREPARATION FEES	5,500.
INVESTMENT MANAGEMENT FEES	50,405.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	55,905.

FORM 990-T NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST STATEMENT 22

NAME OF COUNTRY

GHANA
ECUADOR
KENYA

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 23

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/13	285,491.	285,491.	0.	0.
12/31/14	196,157.	55,692.	140,465.	140,465.
NOL CARRYOVER AVAILABLE THIS YEAR			140,465.	140,465.