IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning $\begin{tabular}{c} SEP & 1 \end{tabular}$, 2018, and ending $\begin{tabular}{c} AUG & 31 \end{tabular}$, 20 $\begin{tabular}{c} 19 \end{tabular}$

OMB No. 1545-1878

Do not send to the IRS. Keep for your records.

Internal Revenue Service	Go to www.irs.gov/Form8879EO for the latest information.		
Name of exempt organization		Employer	identification number
QUEBEC-LABRADO	R FOUNDATION, INC.	13-6	155399
Name and title of officer			
ELIZABETH ALLI	NG		
PRESIDENT			
Part I Type of F	eturn and Return Information (Whole Dollars Only)		
on line 1a, 2a, 3a, 4a, or 5a	n for which you are using this Form 8879-EO and enter the applicable amount, if any, fror , below, and the amount on that line for the return being filed with this form was blank, then enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable	nen leave li	ine 1b. 2b. 3b. 4b. or 5b.
1a Form 990 check here	▶ X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	1,039,527.
2a Form 990-EZ check her	b Total revenue, if any (Form 990-EZ, line 9)		
3a Form 1120-POL check			10072
4a Form 990-PF check her	b Tax based on investment income (Form 990-PF, Part VI, line 5)		
5a Form 8868 check here		5b	
Part II Declaration	on and Signature Authorization of Officer		
Under penalties of perjury, I	declare that I am an officer of the above organization and that I have examined a copy of	f the organ	nization's 2018

nic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's	PIN-	check	one	hov	only
Officer 5	FII4:	CHECK	one	DOX	oniv

on the state of th	
X I authorize EDWARD TAYLOR	to enter my PIN 22543
ERO firm name	Enter five numbers, bu do not enter all zeros
as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also enter my PIN on the return's disclosure consent screen.	n this return that a copy of the return authorize the aforementioned ERO to
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 20 indicated within this return that a copy of the return is being filed with a state agency(ies) regulating cl program, I will enter my PIN on the return's disclosure consent screen.	18 electronically filed return. If I have harities as part of the IRS Fed/State
Officer's signature ▶ Date ▶	
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN. 040220990 Do not enter all ze	

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2018)

823051 10-26-18

EXTENDED TO JULY 15, 2020

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information

2018
Open to Public

A	F	to 0040 and a second se			inspection
_			ending A	UG 31, 2019)
В	Check applica	if C Name of organization		D Employer identif	fication number
	Add	gress QUEBEC-LABRADOR FOUNDATION, INC.			
	Nan	nge Doing business as		13-6	5155399
	Initi: retu	a	Room/suite	E Telephone numb	
	Fina	4 SOUTH MAIN STREET	toom/suite		-356-0038
_	term	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,908,098.
L	retu	TPSWICH, MA 01938		H(a) Is this a group	return
	tion pend	F Name and address of principal officer: ELIZABETH ALLING		for subordinate	s? Yes X No
_	Toylo	SAME AS C ABOVE		H(b) Are all subordinates	
		xempt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) 4947(a)(1) or site: $\triangleright QLF \cdot ORG$	527		a list. (see instructions)
			1	H(c) Group exemption	on number
	art I		L Year o	of formation: 1963	M State of legal domicile: NY
	1	Briefly describe the organization's mission or most significant activities: QUEBEC	C-I.ARI	ADOD FOIMD	ATION U.S.
Activities & Governance		(QLF) EXISTS TO PROMOTE GLOBAL LEADERSHIP	DEVEL	OPMENT TO	SUPPORT
rus	2	Check this box if the organization discontinued its operations or disposed	d of more t	han 25% of its not as	
OVe	3	Number of voting members of the governing back (D. 11)		3	12
9	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	10
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	12
Ž	6	Total number of volunteers (estimate if necessary)			10
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 38		7b	0.
		Contribution of the Contri	_	Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		871,838.	659,353.
ven	10	Program service revenue (Part VIII, line 2g)		22,570.	10,880.
Re	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		387,005.	278,273.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		86,600. 1,368,013.	91,021.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		26,500.	1,039,527.
	14	Benefits paid to or for members (Part IV column (A) line 4)		20,300.	18,585.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		737,288.	699,750.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
xbe	b	lotal fundraising expenses (Part IX, column (D), line 25)	3. [86]	SAME TENDER	
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		719,494.	694,171.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,483,282.	1,412,506.
	19	Revenue less expenses. Subtract line 18 from line 12		-115,269.	-372,979.
ts o	20 21 22	Total accests (Dart V. Kar. 40)	Begi	nning of Current Year	End of Year
Asse	21	Total liabilities (Part X, line 16) Total liabilities (Part X, line 26)		6,062,299.	5,123,971.
Net/	22	Net assets or fund balances. Subtract line 21 from line 20		524,411.	150,451.
Pa	rt II	Signature Block		5,537,888.	4,973,520.
Jnde	er pena	lities of perjury, I declare that I have examined this return, including accompanying schedules an	nd statement	e and to the heet of my	knowledge and belief it is
rue,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer ha	is any knowledge	knowledge and belief, it is
		4 Staper Allin		15/11	42020
Sigr	1	Signature of officer		Date /	7
Here	е	ELIZABETH ALLING, PRESIDENT			
_		Type or print name and title			
aid		Print/Type preparer's name EDWARD TAYLOR Preparer's signature EDWARD TAYLOR	Dat	2	PTIN
	arer	EDWARD TAYLOR EDWARD TAYLOR Firm's name ▶ NARDELLA & TAYLOR, LLP	07	/10/20 self-employe	
. 4	Only	Firm's address 24 HARTWELL AVENUE		Firm's EIN ▶	04-2979611
		LEXINGTON, MA 02421		Dharrar 701	962 6022
/lay	the IF	AS discuss this return with the preparer shown above? (see instructions)		I Phone no. / 8 J	L-862-6833
	1 12-31				X Yes No

CONSERVATION PROGRAMS.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 390,065 • including grants of \$

) (Revenue S

e Total program service expenses ► 1,256,118.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
10200	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
20.20	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

	1990 (2018) QUEBEC-LABRADOR FOUNDATION, INC. 13-6155	399	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2.10		$\overline{}$
	1.00	24c		
٨	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
		240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):		100	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
00		33		х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		-21
-	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24	х	
352	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	Λ	X
		35a		Λ
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	05:		
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36	-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	20000000		***
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		, l	
Da	Note. All Form 990 filers are required to complete Schedule O	38	X	
Par	property the control of the Control			
	Check if Schedule O contains a response or note to any line in this Part V		····	
	î î		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		20. 1	3.4
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	140/25		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7		9A - 9A - 1
	(gambling) winnings to prize winners?	1c	X	
832004	12-31-18	Form	990 (2018)

	· (continued)		Yes	No				
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 12			4.4				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country:							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Alasa Alasa ya		37				
-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	_	X				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	0-		х				
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a	-					
b	were not toy ded, with a 0	e h						
7	Organizations that may receive deductible contributions under section 170(c).	6b						
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	edidenniise.	Х				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	S alah masain da					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders 11a							
D	Gross income from other sources (Do not net amounts due or paid to other sources against							
122	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	10-						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.	· ·						
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans		436					
С	Enter the amount of reserves on hand 13c	11/6						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization 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?	15		X				
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.		35.7					
		Form	990	(2018)				

Check if Schedule O contains a response or note to any line in this Part VI

X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
121		//	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12		1.300	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			-
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a				7,7
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			7,7
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		37	
a		8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			37
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
300	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		.,	
102	Did the organization have local chanters, branches, or offiliates?	10-	Yes	No X
h	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		- 21
D	and branches to prove their constitutions with a 100 ft.	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	_
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Па	21	1000
	Did the consideration have a sufficient of interest of the constant of the con	12a	Х	Mitallinai
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
-	in Schedule O how this was done	12c	х	
13	Did the appearance in the property of the prop	13	X	
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	7		77
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		1	123
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	144		
	exempt status with respect to such arrangements?	16b		mmisaise
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶MA, NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only) a	availab	le
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and f	nanci	al	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ELIZABETH ALLING - 978-356-0038			
	4 SOUTH MAIN ST., IPSWICH, MA 01938-2331			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization r	(B)	Τ			C)			(D)	(E)	(F)
Name and Title	Average			Pos	itior			Reportable	Reportable	Estimated
	hours per		not c					compensation	compensation	amount of
	week	offi	cer ar	nd a d	irecto	r/trus	tee)	from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for	or dir	9			ated		organization	(W-2/1099-MISC)	from the
	related	stee	truste		90	pens		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional		ploye	t com				and related
	line)	Individual 1	Institutional trustee	Officer	Key employee	Highest compensated employee	огшег			organizations
(1) LAWRENCE B. MORRIS	40.00	-	=		~	T &	LL.			
PRESIDENT EMERITUS&DIRECTOR		X		х				132,294.	0.	22,818
(2) ELIZABETH ALLING	40.00									•
PRESIDENT & DIRECTOR		x		X				152,050.	0.	38,128
(3) BAYARD BROKAW	1.00									
DIRECTOR		X						0.	0.	0 .
(4) HALLIDAY E. HART	1.00									
DIRECTOR		X						0.	0.	0.
(5) CLARE TWEEDY MCMORRIS	2.00							ACHIM.	1000	
CHAIRMAN & DIRECTOR		X		X				0.	0.	0.
(6) REVEREND EDWARD O. MILLER, JR.	1.00							2000		
VICE-CHAIR & DIRECTOR		X		Х				0.	0.	0.
(7) FREDERICK S. MOSELEY, IV	1.00									
DIRECTOR	-	X						0.	0.	0.
(8) SUSAN W. PECK	1.00								75%	
SECRETARY & DIRECTOR		X		Х		_		0.	0.	0.
(9) ROBERT M. SCHMON, JR.	1.00								_	
DIRECTOR	1 00	X						0.	0.	0.
(10) ERNEST B. TRACY III	1.00								.	
TREASURER & DIRECTOR	1 00	Х		Х		_		0.	0.	0.
(11) JO-ANN WATSON	1.00							_		
DIRECTOR (12) POGEWARY N. FURREN	1 00	X			_			0.	0.	0.
(12) ROSEMARY N. FURFEY	1.00	7.7								
DIRECTOR		X			_		_	0.	0.	0.
			\dashv	\dashv	-	Н				
		\vdash	-	-		\vdash				
		\vdash	\dashv	\dashv						
				\dashv	\exists	\vdash				The second secon

Pa	t VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	d Hi	ghes	t C	Compensated Employee	es (continued)		210
	(A) Name and title	(B) Average hours per	(do	not c	Pos heck r	itior more rson i) than c	one n an	(D) Reportable compensation	(E) Reportable compensati		(F) Estimated amount of
		week (list any hours for related organizations below line)	tee or director	nstitutional trustee	Officer		Highest compensated carl-		from the organization (W-2/1099-MISC)	from relate organizatioi (W-2/1099-MI	ns	other compensation from the organization and related organizations
				_		×	- 0					
5 												
1b c	Sub-total Total from continuation sheets to Part VII	, Section A]	> >	284,344.		0.	60,946.
	Total (add lines 1b and 1c) Total number of individuals (including but no)	<u> </u>	284,344. eceived more than \$100,0	000 of reportable	0.	60,946.
	compensation from the organization											Yes No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for su</i> For any individual listed on line 1a, is the sur	ıch individual										3 X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a	,000? <i>If "Yes,"</i> ccrue compens	" <i>coi</i> satio	mple on fro	te Som a	che any i	<i>dule</i> unrel	J fo	or such individual			4 X
Sec	rendered to the organization? If "Yes." comp tion B. Independent Contractors	olete Schedule	J fo	or su	ch p	ersc	on					5 X
1	Complete this table for your five highest conthe organization. Report compensation for the										oensat	ion from
	(A) Name and business a	address	NC	NE					(B) Description of se	ervices	С	(C) ompensation
								1				
								1				
								+				
								+	*			
2	Total number of independent contractors (in		t lim	ited	to th	-	e liste	ed a	above) who received mo	re than		
	\$100,000 of compensation from the organization	ation 🕨				0						Form 990 (2018)

12350714 742892 1370.0

1 a Federated campaigns 1 a Federated ca			Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
1						(A)	Related or exempt function	Unrelated business	from tax under
Total Add ince 2 2 a PROGRAM SERVICES 1 1 1 1 1 1 1 1 1	ts	1 a	Federated campaigns	1a					
1	ran							34 (11 5 34)	
10 Related corganizations 10 Related corganizations 11 Related corganizations 12 Recomment grants (contributions) 14 Related corganizations 15 Related to Related t	G.						表现基础的 。201		
Page Government grants (contributions) 1/4 575, 70., 575									
2 a PROGRAM SERVICES	s, G	е			83,651.			Sec. 16. 16. 16. 16. 16. 16. 16. 16. 16. 16	Se Telliol
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2 a PROGRAM SERVICES	ber			1084 100 10	575,702.	The A.L.			
2 a PROGRAM SERVICES	Ē	q						86.966	
2 a PROGRAM SERVICES	Cor	h				659,353.			an Burus 3
Section Sect					Lance Control of the Control				
10,880 10,880 126,901 126,90	e e	2 a	PROGRAM SERVICES			omening and a supplied the supplied of the sup	10,880.	encouración de la contraction de la co	
10,880 10,880 126,901 126,90	vic	b							
10,880 10,880 126,901 126,90	Sel	С							
10,880 10,880 126,901 126,90	am	d			V2.5				
10,880 10,880 126,901 126,90	Progr	е		2000000000					
10,880, 3 Investment income (including dividends, interest, and other similar amounts)		f	All other program service reve	nue				7	
3 Investment income (including dividends, interest, and other similar amounts) 126,901. 126		g	Takal Adal Sasa Os Of			10,880.			
4 Income from investment of tax-exempt bond proceeds 6 a Gross rents (ii) Personal (iii) Personal Personal (iii) Personal Persona		3	Investment income (including	dividends, intere	est, and				
4 Income from investment of tax-exempt bond proceeds 6 a Gross rents (ii) Personal (iii) Personal Personal (iii) Personal Persona			other similar amounts)			126,901.			126,901.
(i) Real (ii) Personal		4							10
1990 10 10 10 10 10 10 1		5	Royalties	· <u></u>					
Description				(i) Real	(ii) Personal				子為 接供
The second process of the second process of the second process around from sales of assets other than inventory assets of asset of the second process of the second proc		6 a	Gross rents					建铁石 化二氯	6-60-60
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 2,868,571, c Gain or (loss) 8 a Gross income from fundraising events (not including \$\sigma\$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a MANAGEMENT FEES 561000 88,000, 88,000, MISCELLANEOUS 561000 3,021, 3,021, 4,039,527, 101,901, 0, 278,273.		b	Less: rental expenses						
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 2,868,571. c Gain or (loss) 151,372. d Net gain or (loss) 5 of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events b c Net income or (loss) from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a d		С	Rental income or (loss)						
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C Gain or (loss) 151,372.		b	Less: cost or other basis						
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18			and sales expenses						5.1
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c d All other revenue e Total. Add lines 11a-11d ▶ 91,021. 12 Total revenue. See instructions ▶ 1,039,527. 101,901. 0. 278,273.									
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e Total. Add lines 11a-11d 91,021. 12 Total revenue. See instructions 1,039,527. 101,901. 0. 278,273.			All atherways						
12 Total revenue. See instructions 1,039,527. 101,901. 0. 278,273.						01 021			
							101 001	0	278 272
	833000					1,000,021.	101,501.	0.	Form 990 (2018)

	Check if Schedule O contains a response not include amounts reported on lines 6b,	(A)	this Part IX		X
7b,		(^)	(B) Program service	(C)	(D)
1	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations		•		
	and domestic governments. See Part IV, line 21	2,585.	2,585.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	8,000.	8,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	8,000.	8,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	255 504	220 006	15 665	E 022
	trustees, and key employees	355,794.	332,296.	15,665.	7,833.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	281,792.	263,181.	12,407.	6,204.
7	Other salaries and wages	201,792.	203,101.	12,407.	0,204.
8	Pension plan accruals and contributions (include	7,532.	7,034.	332.	166.
9	section 401(k) and 403(b) employer contributions) Other employee benefits	10,518.	9,823.	463.	232.
10		44,114.	41,200.	1,943.	971.
11	Payroll taxes Fees for services (non-employees):	44,114.	41,200.	1,743.	5/14
	Management				
	Legal	37,279.	33,655.	2,416.	1,208.
	Accounting	56,118.	50,663.	3,637.	1,818.
	Lobbying	50,2201	30,0001	3,03,1	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	19,419.	17,531.	1,259.	629.
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	241,788.	218,434.	15,569.	7,785.
12	Advertising and promotion				
13	Office expenses	20,541.	16,538.	2,122.	1,881.
14	Information technology	12,892.	11,639.	835.	418.
15	Royalties				
16	Occupancy	46,841.	40,388.	4,302.	2,151.
17	Travel	72,793.	49,119.	13,869.	9,805.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		6.500		
20	Interest	7,552.	6,590.	641.	321.
21	Payments to affiliates	01 401	10 017	2 142	1 070
22	Depreciation, depletion, and amortization	21,431.	18,217.	2,142.	1,072.
23	Insurance	50,320.	43,039.	4,854.	2,427.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line		Facility 18 19		
	24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) PRINTING	46,750.	30,811.	4,067.	11,872.
a b	TELECOMMUNICATIONS	21,681.	17,431.	3,492.	758.
C	POSTAGE & SHIPPING	16,555.	11,696.	1,586.	3,273.
d	STIPENDS	9,078.	9,078.	1,300.	5,215.
	All other expenses	13,133.	9,170.	1,479.	2,484.
	Total functional expenses. Add lines 1 through 24e	1,412,506.	1,256,118.	93,080.	63,308.
26	Joint costs. Complete this line only if the organization			30,000	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		ĺ		
	Check here if following SOP 98-2 (ASC 958-720)				

Part	X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any l	ine in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			309,831.	1	20,772.
	2	Savings and temporary cash investments			191,240.	2	
	3	Pledges and grants receivable, net			30,655.	3	3,975.
	4	Accounts receivable, net			-2,920.	4	9,205.
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa					
		Part II of Schedule L	3050	· · · · · · · · · · · · · · · · · · ·	en e	5	aanan maana maali ii aan ii maan maan maan maan maan maa
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	4958(c)(3	B)(B), and contributing			
		employers and sponsoring organizations of sect					
S		employees' beneficiary organizations (see instr).			ar da esta de maio de la companya d	6	11.11.11.11.11.11.11.11.11.11.11.11.11.
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	B 11			10,235.	9	12,292
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a	191,463.			
	b	Less: accumulated depreciation	10b	165,224.	44,146.	10c	26,239
	11	Investments - publicly traded securities			4,763,330.	11	4,261,366
- 1	12	Investments - other securities. See Part IV, line 1			578,378.	12	614,527
- 1	13	Investments - program-related. See Part IV, line				13	
- 1	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			137,404.	15	175,595
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		6,062,299.	16	5,123,971
	17	Accounts payable and accrued expenses			113,228.	17	75,493.
- 1	18	Grants payable		18			
- 1	19	Deferred revenue		19			
- 1	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
	22	Loans and other payables to current and former		TO STATE OF THE ST	#5785594 F 1585		0.45e55e5
tes	1000000	key employees, highest compensated employee		to a series and a series of the series of th			
Liabilities		Complete Part II of Schedule L		900	sie de sous semantais their siddlethichte an de continue siddlethichte.	22	oon anasilliiteeddoordliiddidaanii iddliiddii oolidda
, ا ٿ	23	Secured mortgages and notes payable to unrela			411,183.	23	74,958.
- 1	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
- 1		parties, and other liabilities not included on lines		200 C 200 C 100 C			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			524,411.	26	150,451.
		Organizations that follow SFAS 117 (ASC 958					
,,		complete lines 27 through 29, and lines 33 an					
ě :	27	Unrestricted net assets		5.00-	163,287.	27	96,271.
<u>a</u>	28	Temporarily restricted net assets			1,181,739.	28	643,837.
ğ /	29	5			4,192,862.	29	4,233,412.
un l		Organizations that do not follow SFAS 117 (A			The state of the s		3-1-1
<u> </u>		and complete lines 30 through 34.	/,				
ts c	30	Capital stock or trust principal, or current funds			and the second section of the second	30	unauturitillus is saa, saa kiribbuni liineelilla siink
9	31	Paid-in or capital surplus, or land, building, or eq			· · · · · · · · · · · · · · · · · · ·	31	
Ž :	32	Retained earnings, endowment, accumulated inc				32	
Se Se	33	Total net assets or fund balances			5,537,888.	33	4,973,520.
	34	Total liabilities and net assets/fund balances			6,062,299.	34	5,123,971.

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization Employer identification number QUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2018 QUEBEC-LABRADOR FOUNDATION, INC. 13-6155 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support	noted below, plea	so complete r art i				
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and	(4)	(4)	(0) 2010	(4) 2317	(0) 2010	(i) rotal
	membership fees received. (Do not						
	include any "unusual grants.")	692,800.	1240786.	1015409.	871,838.	659,353.	4480186.
2	Tax revenues levied for the organ-			111111111111111111111111111111111111111			
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	692,800.	1240786.	1015409.	871,838.	659,353.	4480186.
5	The portion of total contributions	Balle of the				斯特尔	
	by each person (other than a	THEAT					
	governmental unit or publicly				\$ 1000	Bur Bur au	
	supported organization) included		Harris VIII	14.780			
	on line 1 that exceeds 2% of the	The same of					
	amount shown on line 11,				100		
	column (f)						
6	Public support. Subtract line 5 from line 4.						4480186.
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	692,800.	1240786.	1015409.	871,838.	659,353.	4480186.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	212 949	100 510	152 105	112 604	106 001	700 071
0	and income from similar sources Net income from unrelated business	212,848.	102,313.	155,105.	113,604.	120,901.	788,971.
9	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
.0	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						5269157.
	Gross receipts from related activities,	etc. (see instructio	ns)	ton Marill (1996) in one of Mineral (1994)		12	32031371
	First five years. If the Form 990 is for			I. fourth. or fifth ta	x vear as a section		
Water to the same	organization, check this box and stop	here					▶ □
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2018 (li	ne 6, column (f) div	vided by line 11, co	olumn (f))		14	85.03 %
	Public support percentage from 2017					15	70.34 %
	33 1/3% support test - 2018. If the o					ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization	***************************************			▶ X
b	33 1/3% support test - 2017. If the c						
	and stop here. The organization quali	fies as a publicly s	upported organiza	tion			▶
17a	10% -facts-and-circumstances test	- 2018. If the orga	anization did not c	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10% c	r more,
	and if the organization meets the "fact						
5000	meets the "facts-and-circumstances" t						
b	10% -facts-and-circumstances test						0% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b,	check this box an	d see instructions	

Schedule A (Form 990 or 990-EZ) 2018

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	ν.					
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						3 1000 3-22
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	etion B. Total Support		CHARLEST CONTRACTOR STATES	1865 - 46 Million (1868) Sept (1864)			
_	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
_	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
,	Add lines 10a and 10b						
	Net income from unrelated business				1		
	activities not included in line 10b,					1	
	whether or not the business is regularly carried on						
12	Other income. Do not include gain				200		
-	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the examination's	first second this	d fourth or fifth to	L voor oo o costio	501(a)(2) organiza	tion
14	AND SECTION SECRECAL PROPERTY AND ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION AND ADDRESS OF THE SECTION ADDRESS OF THE SECT					, , , , , _	tion,
Sec	check this box and stop here ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2018 (li			noluma (fl)		15	%
			an a Sa			16	%
	Public support percentage from 2017 etion D. Computation of Inves					10	70
				10 (A)		17	0/
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2						
198	33 1/3% support tests - 2018. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, che		J. T				
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th	ns box and see ins	tructions	P

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Omitet Comment	Yes	No
1		
	14	
2 3a		
	ars neathliai	
3b 3c		
4a		
4b	200	
4c		
5a 5b		a kalinakin
5b 5c		
6	lan sian	
7 8		
9a 9b		
9c		
100		
10a 10b		

Parent of Supported Organizations. Answer (a) and (b) below.

activities but for the organization's involvement.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2b

3a

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			.3-0133333 Page 6
1	Check here if the organization satisfied the Integral Part Test as a qualifying			art VI.) See instructions.
	other Type III non-functionally integrated supporting organizations must c			
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	2		
	instructions for short tax year or assets held for part of year):	7,30		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	3 37000		
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		NEW CONTRACTOR OF	04000
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ed Type III supporting organ	ization (see
	instructions)	,	ypa capporting organ	

Schedule A (Form 990 or 990-EZ) 2018

	edule A (Form 990 or 990-EZ) 2018 QUEBEC-LABRAI			L3-6155399 Page 7
	1 - ype milion - unionomany milogration co.	e(a)(3) Supporting Orga	anizations (continued)	
	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex		522	
2	Amounts paid to perform activity that directly furthers exem	ipt purposes of supported		
3	organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purpose	and of our manufact are a local and a	_	
4	Amounts paid to acquire exempt-use assets	ses of supported organization	S	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.	*		
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the ergenization is reconnective		
0	(provide details in Part VI). See instructions.	the organization is responsive	;	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
10	Line o amount divided by line 9 amount	(3)	(::)	(:::)
Sect	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			Edward Bedala
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount	en e		
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			2 70340 400 0 4700000 4020 0
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
b	Excess from 2015		THE PARTY OF THE P	THE PARTY OF THE P

Schedule A (Form 990 or 990-EZ) 2018

c Excess from 2016
 d Excess from 2017
 e Excess from 2018

Schedule A	(Form 990 or 990-E	Z) 2018 Q	UEBEC-L	ABRADOR	FOUNDA	ATION,	INC.	13-6155399 Page 8
Part VI	Supplemental	Informa	tion. Provide	e the explanat	ions required	by Part II I	line 10: Part II line	e 17a or 17b; Part III, line 12;
	Part IV Section A	lines 1 2 3	8h 3c 4h 4c	52 6 02 0h	90 11a 11b	by Fait II, I	Dort IV Section B	s, lines 1 and 2; Part IV, Section C,
	line 1: Part IV Sec	tion D lines	2 and 3: Par	, Ja, 0, Ja, JD,	lines 10 20	2h 2a an	d 2h: Dort V line:	1; Part V, Section B, line 1e; Part V,
	Section D. lines 5	6 and 8: a	od Dort V. So	tion E lines 2	, IIIIes 10, 2a,	20, 3a, and	a this part for any	additional information.
	(See instructions.)	o, and o, a	iu Part V, Sec	ction E, lines 2	, 5, and 6. Als	so complete	e this part for any	additional information.
	(See instructions.)							
		M - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	-X	10-250				

		- W-						
			1011				CONT	
				11112				
			**	132				
								200

							3530	
	WW.				700			
	W/C2		1000					
			300-311				reserved.	
		4						

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

QUEBEC-LABRADOR FOUNDATION, INC.

Employer identification number 13-6155399

Pai	rt I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b			35.255.256
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year -		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, l	nandling of violations, and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing concerns	tion accoments during the year
,	\$	iling of violations, and emorcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(b)(4)(B)(i)
Ü	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
Ŭ	include, if applicable, the text of the footnote to the organizat		
	conservation easements.	ion s interior statements that describes	the organization's accounting for
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	pes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea		SAME TO SAME THE SAME TO SAME
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2018

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1a	Land						
b	Buildings						
С	Leasehold improvements		19,727.	13,734.	5,993.		
d	Equipment		92,274.	83,891.	8,383.		
е	Other		79,462.	67,599.	11,863.		
Tota	Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						

Schedule D (Form 990) 2018

Schedule D	(Form 990)	2018	

	IID OIL I OUIDIIII	011, 1110.	o Tooos Tage
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) REAL ESTATE INVESTMENT	C14 F07	END OF VEAD MADKET	773 7 7777
(B) TRUST	614,527.	END-OF-YEAR MARKET	VALUE
(C)			9 th-4
(D)			
(E)			
(F) (G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	614,527.		
Part VIII Investments - Program Related.	014,527.		litelikola (h. 1880). 18. liilian kililian kililian kililian kililian kililian kililian kililian kililian kili Tarihi
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part V line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
	(2)	(0)	
(2)) Jacobson Super-S
(3)			
(4)			- 1 1000001
(5)			
(6)			
(7)		***************************************	
(8)	****		
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	•		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)		Tipo strat rythologia galaulia 14-matyria in sisti i die 17	
(4)			
(5)			
(6)			
(7)		-000	
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	9 15.)	>	
Part X Other Liabilities.			
Complete if the organization answered "Yes"			
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			Section And the
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Total (Column (h) must equal Form 900, Part V, eq. (D) line	.05)		Samuel Carlotte

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX

POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION

UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR

POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE

UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY

ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN

TAX POSITIONS.

Schedule D (Form 990) 2018

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

Name	e of the organization					Employer identifi	cation number				
OIIE	EBEC-LABRADOR	FOIINDAT.	TON THE	_		13-615539	9				
Pai	rt I General Infor	rmation on A	ctivities Out	side the United States. Comple	te if the organ	ization answered "Y	es" on				
_	Form 990, Part IV		3	100							
1											
	the grantees' eligibility for	or the grants or a	assistance, and t	the selection criteria used to award the g	grants or assis	tance?	Yes X No				
2	For grantmakers Desc	rihe in Part V the	organization's	procedures for monitoring the use of its	grants and oti	ner assistance outsi	de the				
2	United States.	inde in Fait V the	organization s	procedures for morntoning the use of its	grants and ou	Ter assistance outsi	de trie				
3	ATTERNATURE STATE OF THE STATE	he following Part	I, line 3 table ca	an be duplicated if additional space is ne	eeded.)		400000				
	(a) Region	(b) Number of offices	(c) Number of employees, agents, and independent	(d) Activities conducted in the region (by type) (such as, fundraising, pro-	(e) If activ	vity listed in (d) gram service,	(f) Total expenditures				
		in the region	independent contractors in the region	gram services, investments, grants to recipients located in the region)		specific type (s) in the region	for and investments in the region				
			III tile region								

					6533300						
						1.00 (0.00)					
3 2	Subtotal	0	0			A Section of Section 1	0.				
	Total from continuation						•				
	sheets to Part I	0	0				0.				
С	Totals (add lines 3a	0	0				0.				
	and 3b)	1	ı			and the state of t	0.				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018 QUEBEC-L

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST -	CONSERVATION EXCHANGE PROGRAM ON GLOBAL FLYWAYS IN					
		ISRAEL & JORDAN	PARTNERSHIP WITH	8,000.		0.		
	Parana Parana Alaman							
The state of the s								
2 Enter total number of rby the IRS, or for which	recipient organization the grantee or cour	Enter total number of recipient organizations listed above that are reco by the IRS, or for which the grantee or counsel has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	oreign country, r	ecognized as tax-exe	mpt		
3 Enter total number of other organizations or entities	other organizations or	r entities						

SEE PART V FOR COLUMN (D) DESCRIPTIONS

45

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2018
(g) Description of noncash assistance						Sched
(f) Amount of noncash assistance						
(e) Manner of cash disbursement						
(d) Amount of cash grant	v.					
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance						

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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OMB No. 1545-0047	2018	Open to Public
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Inspection

Go to www.

Name of the organization QUEBEC-LABRADOR FOUNDATION,	BRADOR FO		INC.				Employer identification number 13-6155399
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	re grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	tance?						Yes X No
ပ္တ	cedures for monit	oring the use of grant	of grant funds in the United States.	States.			
Part II Grants and Other Assistance to Domestic Organizations and I	Domestic Organiz	ations and Domestic	Domestic Governments. (complete if the orga	anization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	5,000. Part II can	be duplicated if addition	onal space is need	ed.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government org	Janizations listed in the	e line 1 table				
3 Enter total number of other organizations listed in the line 1 table	listed in the line 1	table					A
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ons for Form 990.					Schedule I (Form 990) (2018)

13-6155399

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2018)

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. (d) Amount of non-cash assistance 0 8,000 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 832102 11-02-18 GRANTS

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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OMB No. 1545-0047

Name of the organization

Department of the Treasury

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number 13-6155399

QUEBEC-LABRADOR FOUNDATION, INC.

Part I Questions Regarding Compensation

			Yes	No
	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	1b	Yes	No X
	trustees, and officers, including the GEO/Executive Director, regarding the items checked of line 14:			7333
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	Manini		77
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
5	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Х
	Any related organization?	5b		Х
-	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		Marine St.	770
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		anasalisti a	v
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		70	
	Regulations section 53 4958-6(c)?	9	1	

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Schedule J (Form 990) 2018

QUEBEC-LABRADOR FOUNDATION, INC.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Sellellis	(a)-(i)(a)	reported as deferred on prior Form 990
(1) LAWRENCE B. MORRIS	9	132,294.	0	0	10,604.	12,214.	155,112.	0.
S			0	0	0.	0.	0.	0.
(2) ELIZABETH ALLING	Ξ	152,050.	0	0.	18,797.	19,331.	190,178.	0
PRESIDENT & DIRECTOR	Ξ	0	0	.0	0.	0	0.	0
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							Sched	Schedule J (Form 990) 2018

	. Also complete this part for any additional information.
	nd 8, and for Part II.
	5a, 5b, 6a, 6b, 7, an
	1b, 3, 4a, 4b, 4c,
	for Part I, lines 1a,
	or descriptions required f
	tion, explanation,
	Provide the informat
-	_

	в то	THESE DUES	ATION									Schedule J (Form 990) 2018
E 1A:	OCIAL CLUB DUES ARE PAID ON BEHALF OF THE PRESIDENT EMERITUS IN ORDER TO	A CONVENIENT LOCATION TO MEET WITH DONORS & BOARD MEMBERS. THESI	AS BUSINESS-RELATED AND, THEREFORE, AS NONTAXABLE COMPENSATION	PIENTS.								
ART I, LINE 1A:	OCIAL CLU	AVE A CON	RE TREATED	O THE RECIPIENTS.								

SCHEDULE 0

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

13-6155399 QUEBEC-LABRADOR FOUNDATION, INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE RURAL COMMUNITIES AND ENVIRONMENT OF EASTERN CANADA AND NEW ENGLAND, AND TO CREATE MODELS FOR STEWARDSHIP OF NATURAL RESOURCES AND CULTURAL HERITAGE THAT CAN BE SHARED WORLDWIDE. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: RESEARCHERS TO PROTECT THE SOUNDS AND ITS ECOSYSTEMS; AND MANAGE ENVIRONMENTAL EDUCATION AND OUTREACH INITIATIVES. EACH YEAR, RESEARCH GRANTS ARE AWARDED TO GRADUATE STUDENT AND CONSERVATION PROFESSIONALS AFFILIATED WITH LEADING UNIVERSITIES AND ORGANIZATIONS ALONG THE SOUNDS. BIODIVERSITY CONSERVATION PROGRAM MANAGED BY A SENIOR PROGRAM CONSULTANT IN MASSACHUSETTS, QLF'S BIODIVERSITY CONSERVATION PROGRAM IS DESIGNED TO ENCOURAGE COMMUNITIES TO ENGAGE IN CONSERVATION AS CITIZEN SCIENTISTS AND STEWARDS OF THEIR NATURAL RESOURCES. PROJECTS FOLLOW. RECOVERY OF MARINE SPECIES AT RISK & RESTORATION OF COASTAL HABITATS -QLF CONTINUES TO WORK IN COLLABORATION WITH COMMUNITY LEADERS, MARINE BIOLOGISTS, AND FISH HARVESTERS TO ASSIST IN THE RECOVERY OF MARINE SPECIES AT RISK ALONG THE GREAT NORTHERN PENINSULA OF NEWFOUNDLAND AND SOUTHERN LABRADOR. THREATS INCLUDE ACCIDENTAL CATCH, ENTANGLEMENT IN

CONSERVATION OF SEABIRDS, SEA DUCKS, AND IMPORTANT BIRD AREAS - THE

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FISHING GEAR, AND THE INGESTION OF MARINE DEBRIS.

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization QUEBEC-LABRADOR FOUNDATION, INC.	Employer identification number 13-6155399
COASTAL WATERS ALONG THE GREAT NORTHERN PENINSULA OF NEWFO	UNDLAND,
SOUTHERN LABRADOR AND THE QUEBEC NORTH SHORE PROVIDE FOOD	RESOURCES FOR
OVER TWO DOZEN SPECIES OF SEABIRDS AND SEA DUCKS. QLF WORK	S IN
COLLABORATION WITH THE PUBLIC AND PRIVATE SECTOR TO PROTEC	T SEABIRDS,
SEA DUCKS, AND THE IMPORTANT BIRD AREAS IN THE PROVINCE.	
AQUATIC SPECIES AT RISK - THE FOUR-YEAR AQUATIC SPECIES AT	RISK PROJECT
IS ESTABLISHED TO CONTRIBUTE TO THE RECOVERY OF THREATENED	AND
ENDANGERED MARINE SPECIES ALONG THE GREAT NORTHERN PENINSU	LA OF
NEWFOUNDLAND AND SOUTHERN LABRADOR. ITS GOALS ARE TO REDUC	E THREATS TO
AQUATIC SPECIES AND ESTABLISH A RECOVERY ACTION PLAN FOR T	HOSE SPECIES.
CONSERVATION AND STEWARDSHIP, MARITIMES - MANAGED FROM QLF	HEADQUARTERS
IN MASSACHUSETTS THIS PROJECT IS A PARTNERSHIP WITH THE NA	TURE TRUST OF
NEW BRUNSWICK, A CHARITABLE LAND CONSERVATION ORGANIZATION	. STAFF FROM
BOTH ORGANIZATIONS MONITORED MIGRATORY BIRDS, SEABIRDS, AND	D SHORE BIRDS
ON 14 OF THE TRUST'S PRESERVES, GATHERING DATA ON THE IMPAG	CT OF CLIMATE
CHANGE ON SPECIES OF BIRDS MIGRATING TO AND NESTING ON THE	PRESERVES.
THOSE DATA CONTRIBUTE TO THE TRUST'S CONSERVATION AND STEW	ARDSHIP
STRATEGIES.	
ENVIRONMENTAL EDUCATION AND FIELD STUDIES FOR YOUTH - QLF I	MANAGED THE
THIRD AND FINAL YEAR OF A THREE-YEAR PROJECT OFFERING ENVI	RONMENTAL
EDUCATION WORKSHOPS TO 300 YOUTH ACROSS THE GREAT NORTHERN	PENINSULA OF
NEWFOUNDLAND AND SOUTHERN LABRADOR.	40.1610
REGIONAL STEWARDSHIP	

Name of the organization QUEBEC-LABRADOR FOUNDATION, INC.	Employer identification number 13-6155399
NATIONAL PARK SERVICE STEWARDSHIP INSTITUTE	
MANAGED BY THE ORGANIZATION'S SENIOR VICE PRESIDENT, QLF I	S THE
PRINCIPAL PARTNER WITH THE STEWARDSHIP INSTITUTE OF THE NA	
SERVICE. THE INSTITUTE, BASED AT THE MARSH-BILLINGS-ROCKE	
NATIONAL HISTORICAL PARK IN VERMONT, PROVIDES NEW DIRECTIO	N ON
CONSERVATION INNOVATION FOR THE NATIONAL PARK SERVICE. 201	9 PROJECTS
FOLLOW.	
URBAN MATTERS - QLF SENIOR VICE PRESIDENT WORKS WITH THE N	ATIONAL PARK
SERVICE TO DEVELOP, IMPLEMENT, AND EVALUATE AN "URBAN AGEN	DA," A BROAD
ACTION PLAN TO SUPPORT THE PLANNING AND MANAGEMENT OF URBA	N PARKS AND
PROGRAMS.	
NEW PARKS/NEW PARTNERSHIPS - ESTABLISHING NEW PARKS REQUIR	ES AN ENGAGED
PARTNERSHIP WITH LOCAL STATE AND NATIONAL NONGOVERNMENTAL	PARTNERS. QLF
AND THE STEWARDSHIP INSTITUTE CONTINUE TO WORK WITH PARK	
SUPERINTENDENTS AND REGIONAL STAFF ON THE PRINCIPLES OF ES	TABLISHING
NEW PARKS AND COMMUNITY PARTNERSHIPS.	
CULTURE CHANGE IN THE NATIONAL PARK SERVICE - QLF'S SENIOR	VICE
PRESIDENT AND THE STEWARDSHIP INSTITUTE CONTINUE TO IMPLEM	ENT AN
INITIATIVE TO IMPROVE INSTITUTIONAL CULTURE AND BEHAVIOR W	ITHIN THE
NATIONAL PARK SERVICE.	
SCALING UP - QLF AND THE STEWARDSHIP INSTITUTE CONTINUE TO	DEVELOP AN
INITIATIVE WITH THE NATIONAL PARK SERVICE ON LANDSCAPE-SCA	LE
CONSERVATION WITH A FOCUS ON BUILDING COLLABORATIVE RELATI	ONSHIPS
OUTSIDE OF THE AGENCY WITH A FOCUS ON THE NORTHEAST REGION	1

Name of the organization OUEBEC-LABRADOR FOUNDATION, INC.	Employer identification number 13-6155399
QUADRO BIBLIDON TOURS IN THE	
STEWARDSHIP TODAY IN RECOGNITION OF THE 20TH ANNIVERSARY	OF THE
STEWARDSHIP INSTITUTE, QLF TOOK THE LEAD ON A PROJECT TO I	DENTIFY ITS
CURRENT CONSERVATION INITIATIVES.	
INTERNATIONAL CONSERVATION AND STEWARDSHIP	
MANAGED BY QLF'S SENIOR VICE PRESIDENT, THE INTERNATIONAL	CONSERVATION
AND STEWARDSHIP INITIATIVES CONSIST OF SPECIAL ASSIGNMENTS	THAT
IDENTIFY INNOVATIVE SOLUTIONS TO SHARED CONSERVATION CHALL	ENGES
IN-REGION AND WORLDWIDE. 2019 PROJECTS FOLLOW:	
SYSTEMS PLANNING FOR PROTECTED AREAS, BELIZE - QLF'S SENIC	R VICE
PRESIDENT SERVED AS THE LEAD AUTHOR ON A PAPER REVIEWING T	HE PROTECTED
AREAS SYSTEM IN BELIZE. QLF'S SENIOR VICE PRESIDENT ALSO W	ORKED WITH
THE BELIZE ASSOCIATION OF PRIVATELY PROTECTED AREAS ON A W	HITE PAPER TO
DOCUMENT PRIVATE CONSERVATION; AND PROVIDED A WEBINAR PRES	ENTATION
BEFORE THE UNITED NATIONAL DEVELOPMENT PROGRAMME, BIODIVER	SITY FINANCE
INITIATIVE, DRAWING ON A CASE STUDY OF THE NORTHEAST BIOLO	GICAL
CORRIDOR IN BELIZE.	
URBAN PARKS, CHILE - IN 2019, THE U.S. DEPARTMENT OF THE I	NTERIOR
REQUESTED THAT QLF'S SENIOR VICE PRESIDENT ADVISE THE GOVE	RNMENT OF
CHILE ON THE COUNTRY'S URBAN PARKS WITH A FOCUS ON A LANDM	MARK PARK IN
SANTIAGO.	
PRIVATELY PROTECTED AREAS - QLF SENIOR VICE PRESIDENT CHAI	RS A
SPECIALIST GROUP OF THE WORLD COMMISSION ON PROTECTED AREA	AS ON PRIVATE
APPROACHES TO CONSERVATION WITHIN THE INTERNATIONAL UNION	FOR THE

Name of the organization Employer identification number QUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 CONSERVATION OF NATURE. IN 2019, THE SPECIALIST GROUP DRAFTED A PUBLICATION, GUIDELINES FOR PRIVATELY PROTECTED AREAS. WORLD HERITAGE CONVENTION - QLF SENIOR VICE PRESIDENT SERVES AS AN ADVISOR TO THE WORLD HERITAGE CONVENTION TO CONSULT ON THE GOVERNANCE OF WORLD HERITAGE SITES TO INCLUDE A RECENT ASSIGNMENT TO PIMACHIOWAN AKI, AN AREA OF THE BOREAL SHIELD ON THE BORDER OF MANITOBA AND ONTARIO NOMINATED BY CANADA FOR WORLD HERITAGE INSCRIPTION. INTERNATIONAL COLLABORATIVE CONSERVATION INITIATIVES - QLF SENIOR VICE PRESIDENT SERVES ON INTERNATIONAL BODIES TO INCLUDE THE PROTECTED LANDSCAPES SPECIALIST GROUP; COMMISSION ON ENVIRONMENTAL, ECONOMIC AND SOCIAL POLICY, INTERNATIONAL UNION FOR CONSERVATION OF NATURE; AND JOINT TASK FORCES WITH SPECIES SURVIVAL COMMISSION AND THE COMMISSION ON ENVIRONMENTAL LAW. INTERNATIONAL CONSERVATION EXCHANGE PROGRAMS OVER FOUR DECADES, QLF'S REGION-TO-REGION CONSERVATION EXCHANGE PROGRAMS HAVE FOSTERED THE EXCHANGE OF KNOWLEDGE, EXPERTISE, AND CONSERVATION INNOVATION TO ENCOURAGE CROSS-BORDER, INTERNATIONAL COOPERATION BETWEEN INDIVIDUALS, COMMUNITIES, AND REGIONS WORLDWIDE. INTERNATIONAL FELLOWS NOW REPRESENT 75 COUNTRIES. EAST ASIA CULTURE AND CONSERVATION EXCHANGE PROGRAM QLF DIRECTED THE FIRST EAST ASIA CULTURE AND CONSERVATION EXCHANGE PROGRAM IN NEW ENGLAND IN PARTNERSHIP WITH THE MONGOL ECOLOGY CENTER. WHILE MONGOLIA IS RICH IN BIODIVERSITY, THE IMPACT OF CLIMATE CHANGE HAS RESULTED IN LOSS OF BIODIVERSITY AND HABITAT. CONSERVATION PRACTITIONERS FROM

Employer identification number Name of the organization OUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 MONGOLIA AND NEW ENGLAND ADDRESSED THESE SHARED CHALLENGES TO IDENTIFY STRATEGIES TO RENEW ENVIRONMENTS AND BUILD SUSTAINABLE COMMUNITIES. MIDDLE EAST CONSERVATION EXCHANGE PROGRAM ON THE GREAT FLYWAYS SINCE 1992, QLF HAS DIRECTED CONSERVATION EXCHANGE PROGRAM FOR CONSERVATION LEADERS FROM THE MIDDLE EAST AND NORTH AMERICA. THE OBJECTIVE OF THE PROGRAM IS TO USE THE ENVIRONMENT AS A BRIDGE TO MUTUAL UNDERSTANDING, RECONCILIATION, AND COLLABORATIVE CONSERVATION ACROSS BORDERS GEOGRAPHY, POLITICAL BOUNDARIES, AND CULTURAL FRAMEWORKS. IN APRIL 2019, QLF IMPLEMENTED A CONSERVATION EXCHANGE PROGRAM ON GLOBAL FLYWAYS IN PARTNERSHIP WITH BIRDLIFE INTERNATIONAL MIDDLE EAST. OLF WAS A SPONSOR OF AN INTERNATIONAL CONFERENCE ON BIRD OBSERVATORIES HELD IN EILAT, ISRAEL ALONG THE RIFT VALLEY/RED SEA FLYWAYS, AN IMPORTANT MIGRATION CORRIDOR. THE CONFERENCE WAS FOLLOWED BY A BIRDLIFE INTERNATIONAL WORKSHOP ON MIGRATORY BIRDS OF WHICH OLF WAS A SPONSOR. BOTH THE CONFERENCE AND WORKSHOP FOCUSED ON INITIATIVES TO PROTECT MIGRATORY BIRDS IMPACTED BY CLIMATE CHANGE AND STRATEGIES FOR TRANSBOUNDARY FLYWAY CONSERVATION SHARED AMONG PRACTITIONERS FROM THE REGION AND THOSE REPRESENTING THE WORLD'S GREAT FLYWAYS BEYOND THE MIDDLE EAST. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: SHORE ALONG THE GULF OF ST. LAWRENCE AND WHO ARE PLACED ON ASSIGNMENT IN-REGION. INTERNSHIPS PROVIDE HANDS-ON, EXPERIENTIAL LEARNING IN THE FIELD OF BIODIVERSITY CONSERVATION, MARINE BIRD CONSERVATION, CONSERVATION AND STEWARDSHIP OF MARINE ENVIRONMENTS, PRIVATELY PROTECTED AREAS, AND

QUEBEC-LABRADOR FOUNDATION, INC.

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WILDLIFE CONSERVATION. OFTEN, INTERNSHIPS ARE DIRECTED IN PARTNERSHIP

WITH CONSERVATION ORGANIZATIONS IN NEW ENGLAND AND EASTERN CANADA AND

SPONSORED, IN PART, BY ACADEMIC INSTITUTIONS IN THE U.S. IN 2019, A

PRINCETON UNIVERSITY STUDENT WAS ON CONSERVATION RESEARCH ASSIGNMENT

BASED IN THE QLF OFFICE IN MONTREAL, QUEBEC. TWO STUDENTS FROM THE

TAFT SCHOOL (CONNECTICUT) WERE PLACED ON ASSIGNMENT WITH THE

CONSERVATION AND STEWARDSHIP, MARITIMES PROJECT MANAGED BY QLF STAFF IN

PARTNERSHIP WITH THE NATURE TRUST OF NEW BRUNSWICK. THERE STAFF AND

INTERNS WORKED IN THE PRESERVES OWNED AND MANAGED BY THE TRUST, TO

MONITOR AND STUDY THE IMPACT OF CLIMATE CHANGE ON MIGRATORY BIRDS,

SHOREBIRDS AND SEABIRDS, WILDLIFE AND THEIR HABITATS.

THE SCHOLARSHIP PROGRAM

QLF FOUNDER ROBERT A. BRYAN ESTABLISHED THE SCHOLARSHIP PROGRAM IN 1964

TO PROVIDE EDUCATIONAL OPPORTUNITY AND ACADEMIC SUPPORT FOR PROMISING

UNDERGRADUATE AND GRADUATE STUDENTS FROM THE MARITIMES, NEWFOUNDLAND

AND LABRADOR, AND THE QUEBEC NORTH SHORE. FOR NEARLY SIX DECADES, THE

PROGRAM HAS EXPANDED ITS REACH PROVIDING FINANCIAL ASSISTANCE TO

STUDENTS ACROSS QLF'S HOME REGION PROVIDED MORE THAN 1,200 SCHOLARSHIPS

TO NEARLY 1,000 STUDENTS TO PURSUE STUDIES IN BUSINESS, CONSERVATION,

EDUCATION, LAW, MEDICINE, AND SCIENCE.

IN RECENT YEARS, THE SCHOLARSHIP PROGRAM HAS BEEN RESTRUCTURED

COMMENSURATE WITH CURRENT PROGRAMS DESIGNED TO ADDRESS THE CONSERVATION

NEEDS OF RURAL COMMUNITIES IN OUR HOME REGION. TODAY, THE SCHOLARSHIP

PROGRAM OPERATES AS A REVOLVING FUND, WHEREBY DISCRETIONARY AWARDS ARE

TO BE DIRECTED BY THE QLF PRESIDENT FOR EDUCATIONAL PURPOSES TO INCLUDE

ACADEMIC SCHOLARSHIPS, FELLOWSHIPS, STUDY TOURS, EDUCATIONAL

Name of the organization QUEBEC-LABRADOR FOUNDATION, INC.	Employer identification number 13-6155399							
OPPORTUNITIES, AND CONSERVATION PROGRAMS. IN 2019, QLF PR	OVIDED AWARDS							
FOR ORGANIZATIONS IN NEWFOUNDLAND AND LABRADOR THAT ARE PR	ESERVING							
CULTURAL HERITAGE AND THE STEWARDSHIP OF NATURAL RESOURCES.								
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMEN	TS:							
TO THIS END, QLF'S PROGRAM PLAN IS ESTABLISHING A NEW STRA	TEGIC							
FRAMEWORK TO GUIDE ITS ACTIVITIES FOR THE NEXT FIVE YEARS	(2019-2024).							
THE PLAN WAS INITIATED DURING SPRING 2019								
AND WILL BE INCORPORATED WITH INPUT FROM A DIVERSE SELECTI	ON OF QLF'S							
STAFF, CONSULTANTS, AND ALUMNI. IT IS ANTICIPATED THAT TH	E PLANNING							
PROCESS WILL SUPPORT THE CONTINUED NEED FOR THE SUITE OF C	ORE PROGRAM							
PRIORITIES THAT FORM THE BODY OF QLF'S WORK TODAY: LEADERS	HIP,							
CONSERVATION AND STEWARDSHIP. A PRIMARY IMPETUS FOR THE P	LAN IS TO							
IDENTIFY WAYS IN WHICH EXISTING AND FUTURE PROGRAMS CAN BE								
CONCEPTUALIZED, DESIGNED, AND DELIVERED TO GREATER EFFECT,	WHETHER							
THROUGH INNOVATION, IMPROVED EFFICIENCY OR OTHER MEANS. I	N ADDITION,							
THE PROCESS WILL DEFINE QLF'S ROLE IN LEADING COMMUNITY-BA	SED							
BIODIVERSITY CONSERVATION INITIATIVES AS A STRATEGY TO ADD	RESS AND TO							
BUILD RESILIENCE TO CLIMATE CHANGE.								
THE PROGRAM PLAN WILL REFLECT THE VISION, VALUES AND PROUD	LEGACY							
ESTABLISHED BY THE ORGANIZATION'S LATE FOUNDER AND PRESIDE	NT EMERITUS.							
A KEY ASPECT OF THE PLAN WILL BE THE INTEGRATION OF STRATE	GIC							
OBJECTIVES PERTAINING TO PROGRAMS, COMMUNICATIONS AND FUND	RAISING.							
PREPARED ECONOMICALLY AND PRESENTED IN A CLEAR AND CONCISE	MANNER, THE							
PLAN WILL DETAIL A SHORT SERIES OF PRIMARY GOALS AND CORRE	SPONDING							
STRATEGIES TO ACHIEVE THEM. CREATED UNDER THE DIRECTION O	F QLF							

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization Employer identification number OUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 PRESIDENT, THE PLAN IS BEING RESEARCHED AND AUTHORED WITH A SENIOR CONSULTANT WHO IS A SENIOR LEVEL HERITAGE RESOURCE PROFESSIONAL WITH OVER 25 YEARS OF PLANNING AND PROGRAM EXPERIENCE IN THE PUBLIC, PRIVATE AND NON-PROFIT SECTORS. QLF'S PRESIDENT EMERITUS HAS SERVED AS OLF PRESIDENT FOR 45 YEARS, HALF OF WHICH AS PRESIDENT. IN 2019, OLF'S PRESIDENT EMERITUS WORKED ON SEVERAL SPECIAL PROJECTS IN PREPARATION FOR THE ORGANIZATIONS 60TH ANNIVERSARY IN 2021. MOST OF THE ARCHIVAL PROJECTS CONSISTED OF SPECIAL REPORTS, PUBLICATIONS, ARTICLES AS WELL AS A SERIES OF ESSAYS FOR A QLF BOOK EACH OF WHICH ARCHIVES THE HISTORY AND EVOLUTION OF THE ORGANIZATION. AS WITH EACH YEAR, THE PRESIDENT EMERITUS ATTENDS REGIONAL CONSERVATION PROGRAMS AND INTERNATIONAL CONSERVATION EXCHANGE PROGRAMS, AND MEETS WITH INTERNS (UNIVERSITY STUDENTS AND YOUNG PROFESSIONALS) ASSIGNED TO QLF PROGRAMS IN NEW ENGLAND AND ACROSS EASTERN CANADA. IN 2019, QLF'S PRESIDENT EMERITUS BEGAN RESEARCH ON A NEW VISITING SCHOLARS PROGRAM WITH OXFORD UNIVERSITY IN THE UK. MUCH OF THE ROLE OF THE PRESIDENT EMERITUS IS TO SERVE AS QLF'S AMBASSADOR WITH ALL CONSTITUENTS: ALUMNI, DONORS, AND PROSPECTIVE DONORS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: IV. COMMUNITY SERVICE, CULTURE & HERITAGE, COMMUNICATIONS COMMUNITY SERVICE WITH ORIGINS AS A COMMUNITY SERVICE ORGANIZATION, THE QUEBEC-LABRADOR FOUNDATION HAS EVOLVED OVER SIX DECADES AND IS RECOGNIZED AS A PIONEER IN COMMUNITY-BASED CONSERVATION MERGING THE NEEDS OF COMMUNITY, CULTURE, AND CONSERVATION. AS WELL, THE ORGANIZATION IS RECOGNIZED FOR

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization Employer identification number QUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 ITS NETWORK OF 5,000 ALUMNI - FORMER VOLUNTEERS AND INTERNS WHO HAVE SERVED WITH THE ORGANIZATION IN OUR HOME REGION - NEW ENGLAND AND EASTERN CANADA - AND INTERNATIONAL FELLOWS WHO HAVE PARTICIPATED IN OUR CONSERVATION EXCHANGE PROGRAMS AND WHO REPRESENT 75 COUNTRIES BEYOND NORTH AMERICA. WITH THE PASSING OF QLF'S FOUNDER, THE VEN. ROBERT A. BRYAN (IN FISCAL YEAR 2019), OLF ESTABLISHED THE ROBERT A. BRYAN LEGACY FUND TO PROVIDE ONGOING SUPPORT FOR QLF'S COMMUNITY-BASED CONSERVATION PROGRAMS IN OUR HOME REGION FOR WHICH BOB BRYAN REMAINED DEEPLY COMMITTED SUCH AS CONSERVATION INTERNSHIP PROGRAM, BIODIVERSITY CONSERVATION, ENVIRONMENTAL EDUCATION, AND LAND CONSERVATION AND STEWARDSHIP CULTURE AND HERITAGE PROGRAM IN PARTNERSHIP WITH COMMUNITY ORGANIZATIONS, SCHOOLS, BUSINESSES, LOCAL RESIDENTS, AND GOVERNMENT, THE OVERARCHING GOAL OF THE CULTURE AND HERITAGE PROGRAM IS TO PRESERVE BOTH CULTURE AND TRADITION, AND DEVELOP HERITAGE TOURISM STRATEGIES ACROSS NEWFOUNDLAND AND LABRADOR AND THE QUEBEC NORTH SHORE. THE PROGRAM IS DESIGNED TO INSPIRE LEADERSHIP THROUGH COMMUNITY DEVELOPMENT PROGRAMS WITH CULTURE, TRADITION, AND HERITAGE AS A THEMATIC FOCUS. THE PROGRAM'S INITIATIVES HAVE ALSO PROVEN TO BE A USEFUL CATALYST FOR COMMUNITY REVITALIZATION, LOCAL EMPLOYMENT, AND BUSINESS DEVELOPMENT WITH INITIATIVES SUCH AS CULTURE AND HERITAGE EXHIBITS IN LOCAL MUSEUMS AND INTERPRETATION CENTERS. IN 2019, A QLF SENIOR CONSULTANT, BASED IN MASSACHUSETTS, MANAGED A CULTURE AND HERITAGE PROJECT IN THE COMMUNITY OF ST. PAUL'S RIVER ON

THE QUEBEC NORTH SHORE. THIS PROJECT, RENEWING CULTURAL EXPRESSIONS

Name of the organization

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AND CELEBRATING HERITAGE THROUGH DRAMATIC ARTS, WAS DIRECTED IN

PARTNERSHIP WITH THE WHITELEY MUSEUM IN ST. PAUL'S RIVER. THE GOAL OF

THE PROJECT WAS TO CELEBRATE CULTURAL EXPRESSIONS AND CELEBRATE

HERITAGE IN ST. PAUL'S RIVER AND NEARBY FISHING COMMUNITIES. THE

PROJECT CONSISTED OF RESEARCH AND INTERVIEWS WITH COMMUNITY MEMBERS TO

IDENTIFY CULTURAL EXPRESSIONS TO INCLUDING THE VERNACULAR NAMES OF

BIRDS, OTHER FISH AND WILDLIFE, AND TANGIBLE CULTURAL HERITAGE (E.G.,

ARCHITECTURE, FISHING GEAR) THAT ARE COMMON TO THE CULTURE AND HERITAGE

OF ENGLISH-SPEAKING RESIDENTS OF THE AREA; WRITING AND PERFORMING A

PLAY TO CELEBRATE CULTURAL HERITAGE IN THE ST. PAUL'S RIVER AREA. THE

PROJECT PROVIDED A RENEWED INTEREST IN PRESERVING CULTURE AND HERITAGE

OF THE ENGLISH-SPEAKING COMMUNITIES ALONG THE QUEBEC NORTH SHORE.

THE HIGH ARCTIC EXPEDITION

IN PARTNERSHIP WITH ADVENTURE CANADA, QLF JOINED THE HIGH ARCTIC

EXPEDITION IN AUGUST 2019 TO NUNAVUT, CANADA, AND WESTERN GREENLAND.

QLF HAS WORKED IN PARTNERSHIP WITH ADVENTURE CANADA OVER THE YEARS AND

HAS OFFERED PROGRAMS IN COLLABORATION WITH ADVENTURE CANADA IN

NEWFOUNDLAND AND LABRADOR. A QLF SENIOR CONSULTANT SERVED AS A MEMBER

OF THE PRESTIGIOUS EXPEDITION TEAM OF ORNITHOLOGISTS, NATURALISTS,

BIOLOGISTS, HISTORIANS, AND WILDLIFE PHOTOGRAPHERS. A FORMER QLF STAFF

MEMBER AND CURRENT PH.D. CANDIDATE WAS SPONSORED BY ADVENTURE CANADA TO

RESEARCH THE IMPACT OF CLIMATE CHANGE IN THE COMMUNITIES ON BAFFIN

ISLAND, NUNAVUT. QLF STAFF AND MEMBERS OF THE GOVERNING BOARDS JOINED

THE HIGH ARCTIC EXPEDITION. ON THE EXPEDITION WE WERE WITNESS TO THE

IMPACT OF CLIMATE CHANGE ALONGSIDE THE ILLULISSAT ICEFJORD, A UNESCO

WORLD HERITAGE SITE, WITH ITS FASTEST-MOVING GLACIER IN THE WORLD,

SERMEQ KUJALLEQ. FOLLOWING THE EXPEDITION, QLF IS NOW SPONSORING TWO

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Employer identification number Name of the organization QUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 PROGRAM CONSULTANTS WHO ARE RESEARCHING THE IMPACT OF CLIMATE CHANGE IN THE HIGH ARCTIC. COMMUNICATIONS IN 2019, QLF MANAGEMENT AND STAFF ESTABLISHED A COMMUNICATIONS STRATEGY WITH BRAND STANDARDS AND GUIDELINES SO THAT ALL COMMUNICATIONS MAINTAIN CONSISTENT PROGRAM MESSAGING AND HIGH STANDARDS. OVER THE LAST YEAR, QLF HAS ALSO ESTABLISHED A SCHEDULE FOR COMMUNICATION OF ALL MEDIA SOCIAL MEDIA, ELECTRONIC COMMUNICATION TO ALL CONSTITUENTS, NEWSLETTERS, PROGRAM REPORTS, AND PUBLICATIONS. THE QLF WEBSITE IS MAINTAINED, REVISED, AND UPDATED FREQUENTLY WITH PROGRAM REPORTS AND PUBLICATIONS, CASE STUDIED TO DEMONSTRATE PROGRAM IMPACT, STORIES OF ALUMNI, AND DOCUMENTS ON GOVERNANCE. IN ADDITION, QLF MAINTAINS TWO PROGRAM WEBSITES DEDICATED TO THE SOUNDS CONSERVANCY PROGRAM AND QLF'S GLOBAL LEADERSHIP NETWORK OF ALUMNI. EXPENSES \$ 390,065. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 IS REVIEWED BY MANAGEMENT AND THEN, SEPARATELY, BY THE AUDIT COMMITTEE. THE ORGANIZATION SENDS A LINK TO THE BOARD OF DIRECTORS, OUEBEC-LABRADOR FOUNDATION, INC. - U.S. TO A PROTECTED BOARD WEBSITE TO WHICH THE 990 IS POSTED. DIRECTORS REVIEW THE 990 PRIOR TO ITS FILING. FORM 990, PART VI, SECTION B, LINE 12C: FOR PURPOSES OF THIS PROVISION, THE TERM "INTEREST" SHALL INCLUDE PERSONAL INTEREST, INTEREST AS A DIRECTOR, OFFICER, MEMBER, STOCKHOLDER, SHAREHOLDER, PARTNER, MANAGER, OR BENEFICIARY OF ANY CONCERN OR HAVING AN

Schedule O (Form 990 or 990-EZ) (2018)

IMMEDIATE FAMILY MEMBER WHO HOLDS SUCH AN INTEREST IN ANY CONCERN.

832212 10-10-18

THE

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization Employer identification number QUEBEC-LABRADOR FOUNDATION, INC. 13-6155399 TERM "CONCERN" SHALL MEAN ANY CORPORATION, ASSOCIATION, TRUST, PARTNERSHIP, LIMITED LIABILITY ENTITY, FIRM, PERSON OR OTHER ENTITY OTHER THAN THE ORGANIZATION, QUEBEC-LABRADOR FOUNDATION, INC. NO DIRECTOR, OFFICER OR KEY EMPLOYEE OF THE ORGANIZATION SHALL BE DISQUALIFIED FROM HOLDING ANY OFFICE OR POST IN THE ORGANIZATION BY REASON OF ANY INTEREST IN ANY CONCERN. A DIRECTOR, OFFICER OR KEY EMPLOYEE OF THE ORGANIZATION SHALL NOT BE DISQUALIFIED FROM ENGAGING, EITHER AS VENDOR, PURCHASER OR OTHERWISE, OR CONTRACTING OR ENTERING INTO ANY TRANSACTION WITH THE ORGANIZATION OR WITH ANY ENTITY OF WHICH THE ORGANIZATION IS AN AFFILIATE, PROVIDED, HOWEVER, THAT THE FOLLOWING PRECAUTIONS ARE UNDERTAKEN: 1. THE INTEREST OF SUCH DIRECTOR, OFFICER OR KEY EMPLOYEE IS FULLY DISCLOSED TO THE BOARD OF DIRECTORS PRIOR TO ITS ENTERING INTO THE TRANSACTION. 2. NO INTERESTED DIRECTOR, OFFICER OR KEY EMPLOYEE MAY VOTE OR LOBBY ON THE MATTER OR BE COUNTED IN DETERMINING THE EXISTENCE OF A OUORUM AT THE MEETING OF THE BOARD OF DIRECTORS AT WHICH SUCH MATTER IS VOTED UPON. 3. ANY TRANSACTION IN WHICH A DIRECTOR, OFFICER OR KEY EMPLOYEE HAS AN INTEREST SHALL BE DULY APPROVED BY THE DISINTERESTED BOARD MEMBERS AS BEING IN THE BEST INTERESTS OF THE ORGANIZATION. 4. PAYMENTS TO THE INTERESTED DIRECTOR, OFFICER OR KEY EMPLOYEE SHALL BE REASONABLE AND SHALL NOT EXCEED FAIR MARKET VALUE. 5. THE MINUTES OF MEETINGS AT WHICH SUCH VOTES ARE TAKEN SHALL RECORD SUCH DISCLOSURE, ABSTENTION, AND RATIONALE FOR APPROVAL. THE FOREGOING PROCEDURES SHALL NOT BE REQUIRED IF THE INTEREST OF THE

Schedule O (Form 990 or 990-EZ) (2018)

AFFECTED DIRECTOR, OFFICER OR KEY EMPLOYEE CONSISTS OF DIRECT OR INDIRECT

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OUEBEC-LABRADOR FOUNDATION, INC.

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OWNERSHIP OF 1% OR LESS OF PUBLIC TRADED SECURITIES OF THE CONCERN OR IF

THE TRANSACTION RS DE MINIMIS IN RELATION TO THE ORGANIZATION'S ASSETS OR

REVENUES.

DIRECTORS, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE THEIR

INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST AT LEAST ANNUALLY.

THE CONFLICT OF INTEREST POLICY AND ANNUAL DISCLOSURE STATEMENT ARE MAILED

TO THE BOARD OF DIRECTORS, OFFICERS, AND KEY EMPLOYEES OF THE

QUEBEC- LABRADOR FOUNDATION. THE SIGNED DISCLOSURE STATEMENT IS COLLECTED

AND REVIEWED BY THE PRESIDENT OF THE ORGANIZATION, ELIZABETH ALLING.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION IS REVIEWED BY THE MEMBERS OF THE EXECUTIVE COMPENSATION

COMMITTEE WITH A PERIODIC REVIEW DONE BY AN EXTERNAL THIRD PARTY. THE

COMPENSATION OF THE PRESIDENT EMERITUS AND PRESIDENT ARE REVIEWED AND

APPROVED BY THE FULL BOARD OF DIRECTORS, AND PERIODICALLY COMPARED TO

COMPARABLE DATA AT SIMILAR ORGANIZATIONS.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, GOVERNANCE REFERENCE MANUAL, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS ARE POSTED ON THE QLF WEBSITE. THE

GOVERNANCE REFERENCE MANUAL INCLUDES BY- LAWS, MEMBERS OF THE GOVERNING

BOARDS, BOARD COMMITTEES AND CORRESPONDING BOARD CHARTERS, STAFF, AND

POLICIES OF THE QUEBEC- LABROADOR FOUNDATION TO INCLUDE: CONFLICT OF

INTEREST, WHISTLEBLOWER POLICY, DOCUMENT RETENTION AND DESTRUCTION POLICY,

COMPENSATION SETTING POLICY, AND THE JOINT VENTURE POLICY.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PAYROLL PROCESSING FEES:

Schedule O (Form 990 or 990-EZ) (2018)	Page :
Name of the organization QUEBEC-LABRADOR FOUNDATION, INC.	Employer identification number 13-6155399
PROGRAM SERVICE EXPENSES	10,412.
MANAGEMENT AND GENERAL EXPENSES	747.
FUNDRAISING EXPENSES	374.
TOTAL EXPENSES	11,533.
CONTRACTORS:	
PROGRAM SERVICE EXPENSES	3,039.
MANAGEMENT AND GENERAL EXPENSES	218.
FUNDRAISING EXPENSES	109.
TOTAL EXPENSES	3,366.
OTHER:	
PROGRAM SERVICE EXPENSES	200,508.
MANAGEMENT AND GENERAL EXPENSES	14,393.
FUNDRAISING EXPENSES	7,197.
TOTAL EXPENSES	222,098.
PENSION ADMINISTRATIVE COSTS:	
PROGRAM SERVICE EXPENSES	4,475.
MANAGEMENT AND GENERAL EXPENSES	211.
FUNDRAISING EXPENSES	105.
TOTAL EXPENSES	4,791.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	241,788.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ROUNDING	-2.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

2018

OMB No. 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection Employer identification number 13-6155399

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. INC. FOUNDATION QUEBEC-LABRADOR Name of the organization Part

Direct controlling End-of-year assets (e) Total income Ð Legal domicile (state or foreign country) Primary activity **(**Q) Name, address, and EIN (if applicable) of disregarded entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. PartII

	(d) (e) (f)	Exempt Code	section status (if section entity	501(c)(3)) Yes No		CANADIAN	REGISTERED				
	(p)	Exempt Code	section	501(c)(3))		CANADIAN	REGISTERED				
	(0)	Legal domicile (state or	foreign country)				CANADA				
	(q)	Primary activity			SUPPORTING THE RURAL	COMMUNITIES & ENVIRONMENT	OF EASTERN CANADA				
Organizations duning the tax year.	(a)	Name, address, and EIN	of related organization		QUEBEC LABRADOR FOUNDATION (CANADA), INC.	606 RUE CATHCART, BUREAU 335	MONTREAL, QUEBEC, CANADA H3B 1K9				

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2018

13-6155399

Schedule R (Form 990) 2018 QUEBEC-LABRADOR FOUNDATION, INC.

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(q)	(၁)	(p)	(e)	(£)	(6)	(h)	(E)	9	(k)
Name, address, and EIN of related organization	Primary activity	domicile (state or	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year	Disproportionate allocations?	Code V-UBI amount in box	General or managing partner?	General or Percentage managing ownership
		country)		sections 512-514)		COCCO	Yes No	K-1 (Form 1065)	Yes No	
		2000								
Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	ganizations Taxable a	as a Corpor	ration or Trust. Co	emplete if the organizati	on answered "Yes	" on Form 990, Pa	art IV, line 34	, because it had or	ne or mor	e related
							-			

19											u.	
	(E)	Section 512(b)(13) controlled entity?	No S									
	- 10	0 518	Yes		L	 	-		_	 	_	
	(h)	Percentage ownership										
0.00	(6)	Share of end-of-year	Clocco									
	(†)	Share of total income										
	(e)	Type of entity (C corp, S corp, or trust)	(100.1)									
	(q)	Direct controlling Type of entity S entity (C corp. S corp,										
	(c)	Legal domicile (state or foreign	country)									
ווופ נמע לימון:	(q)	Primary activity										
	(a)	Name, address, and EIN of related organization										

Schedule R (Form 990) 2018 QUEBEC-LABRADOR FOUNDATION, INC.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			THE RESIDENCE OF THE PERSON OF	Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed i	n Parts II-IV?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a X
b Gift, grant, or capital contribution to related organization(s)				1b X
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)				1d X
e Loans or loan guarantees by related organization(s)			Ţ.	1e X
f Dividends from related organization(s)				1f X
g Sale of assets to related organization(s)			=	Tg X
h Purchase of assets from related organization(s)				th X
i Exchange of assets with related organization(s)				1i X
j Lease of facilities, equipment, or other assets to related organization(s)				1j X
k Lease of facilities, equipment, or other assets from related organization(s)			-	×
l Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)		-	1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)		<u> </u>	th X
o Sharing of paid employees with related organization(s)			-	
p Reimbursement paid to related organization(s) for expenses				Tp X
q Reimbursement paid by related organization(s) for expenses				1q X
				Þ
Other transfer of cash or property from related organization(s) Other transfer of cash or property from related organization(s)				4 ×
If the answer to any of the above is "Yes," see the instructions for inform	ho must complete th	is line, including covered r	lation on who must complete this line, including covered relationships and transaction thresholds.	1
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	pə
(1) QUEBEC-LABRADOR FOUNDATION (CANADA), INC.	D	175,595.	FMV OF CASH PROVIDED	
(2) QUEBEC-LABRADOR FOUNDATION (CANADA), INC.	IJ	88,000.	FMV OF SERVICES PROVIDED	
(3)				
(4)				

(**6**) 832163 10-02-18

(5)

Schedule R (Form 990) 2018

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. INC. Schedule R (Form 990) 2018

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(h) (i) (j) (k) Code V-UBI Bipropor- floration amount in box 20 managing ownership of Schedule K-1 Partner? Yes No Form 1065) Yes No				
(i) Code V-UBI amount in box of Schedule K- (Form 1065)				
(h) Disproportionate allocations?				
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all partners sec. 501(c)(3) orgs.?				
(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN Primary activity Credated, unrelated, of entity of entity (c) (c) (d) (related, unrelated, unrelated, unrelated, unrelated, unrelated, unrelated, excluded from fax under ax under country) sections 512-514)				

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Part VII	Form 990) 2018 Supplemental Inform	mation.				
	Provide additional informa	tion for responses to questions	on Schedule R. See inst	tructions.		
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