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**Return of Private Foundation** 

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

▶ Do not enter Social Security numbers on this form as it may be made public

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

Fo	or ca	lendar year 2013 or tax year beginning		, 2013,	and endin	g		,,	20
		of foundation				A E	mployer identi	fication number	
	HEL	EN G. NASSIF FOUNDATION, INC	c			5	2-203100	)5	
	Numb	er and street (or P O box number if mail is not deliver	ed to street address)		Room/suite	ВТ	elephone numb	per (see instructions	•)
							(3)	01) 493-61	79
_		01 GROSVENOR PLACE			502				
•	City o	r town, state or province, country, and ZIP or foreign p	ostal code						
						Cif	exemption applicending, check her	ation is	<b>L</b>
_	ROC	KVILLE, MD 20852						-	
G	Che	eck all that apply Initial return	Initial return	of a former p	ublic charit	у р 1	Foreign organiza	ations, check here .	<b>&gt;</b>
		Final return	Amended re	turn		2		ations meeting the	
		Address change	Name chang				85% test, check computation .	here and attach	<b>▶</b>
H	Che	eck type of organization X Section 501	(c)(3) exempt private t	oundation		E	newata faundate	on status was terminate	
$\perp$	S	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundat	tion			b)(1)(A), check here .	ຶ▶
ı	Fair	market value of all assets at JAcc	ounting method <sup>.</sup> X C	ash Acc	rual	- 1		s in a 60-month termina	ation
	end	of year (from Part II, col. (c), line	Other (specify)			_   "	nder section 507(t	o)(1)(B), check here .	▶
_	16)	▶ \$ 1,292,709. (Part	l, column (d) must be or	n cash basıs.)					
E	art	Analysis of Revenue and Expenses (The	(a) Revenue and	/b\ kl_s+	not most	10\ A.I	unted act	(d) Disburse	
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inve			usted net come	for charita purpose	
_		column (a) (see instructions) )	books	1110011				(cash basis	
1	1	Contributions, gifts, grants, etc., received (attach schedule) .		3 1					
	2	Check Lift the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments	1,703		1,703.			ATCH 1	
	4	Dividends and interest from securities	20,611	2	0,611.			ATCH 2	
	5 a	Gross rents							
	b	Net rental income or (loss)	4 , hay 4 a	`.					
9	6 a	Net gain or (loss) from sale of assets not on line 10	120,488	×**					
Revenu	b	Gross sales price for all assets on line 6a 5,038,046	•					_	
ě	7	Capital gain net income (from Part IV, line 2) .		11	5,454.				-
Ľ	8	Net short-term capital gain	; * ;				BEC	EIVED	
	9	Income modifications · · · · · · · · · · · · · · · · · · ·	· 3 . ·				1100	17	81
	10 a	Gross sales less returns and allowances · · · · ·	*	}			2	2 2 2014	
	b	Less Cost of goods sold .	ļ			18	APR :	19	2
	С	Gross profit or (loss) (attach schedule)							-
	11	Other income (attach schedule) ATCH. 3	-552.	4.0	-552.		CGD	EN. UT	-
$\dashv$	12	Total Add lines 1 through 11		13	7,216.				
	13	Compensation of officers, directors, trustees, etc	<b>I</b>					<del>                                     </del>	
S	14	Other employee salaries and wages						<del> </del>	
š	15	Pension plans, employee benefits						-	
Ř		Legal fees (attach schedule)	2 222					-	0 00
E C		Accounting fees (attach schedule)ATCH 4	2,900.					-	2,90
Administrative Expenses		Other professional fees (attach schedule). *.	414.		414.			<del>. </del>	
ř	17	Interest ATCH 6	748.		748.			-	_
	18	Taxes (attach schedule) (see instructions) ATCH . 7			12.				
티	19	Depreciation (attach schedule) and depletion.	2 600		<u> </u>				
	20	Occupancy					-		
=1	21	Travel, conferences, and meetings						<del> </del>	
	22	Printing and publications	4 055					<del> </del> -	
=1	23	Other expenses (attach schedule) ATCH . 8						ļ	
ě	24	Total operating and administrative expenses	40.550		, ,,,				0 00
이		Add lines 13 through 23	CO 415		1,174.			<del> </del> _	2,90
- 1	25	Contributions, gifts, grants paid			1 1 2 1				3,41
$\neg$	26	Total expenses and disbursements Add lines 24 and 25	76,074.		1,174.			<u> </u>	6,31
	27	Subtract line 26 from line 12							
		Excess of revenue over expenses and disbursements	66,176.		6 040			<u> </u>	
		Net investment income (if negative, enter -0-)		13	6,042.			<b>_</b>	
- 1	C	Adjusted net income (if negative lenter -0-)	1	i	j			I	

JSA For Paperwork Reduction Act Notice, see instructions. 3E1410 1 000 5YN2B5 M151 4/10/2014 6:23:

6:23:19 AM

V 13-4.2F

\*ATCH 5

Form **990-PF**(2013)

Part II	Rafance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	En	d of year
ı artı	- Dalance Sheets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-beari	ng	10,274.	5,186	
2		cash investments	384,769.	170,185	170,185.
3					1
	Less allowance for doul	btful accounts ▶			_
4					
		btful accounts ▶			
5				<del>-</del>	
6		officers, directors, trustees, and other			
"		ach schedule) (see instructions)			
7		eceivable (attach schedule)			1
'				-	
<b>6</b>	Less allowance for doui	btful accounts ▶			
ssets 6 8		e		<del>-</del>	
9 10 a					<del></del>
lio a	Investments - U.S. and state	e government obligations (attach schedule)	741,298.	1 156 046	1 000 500
		stock (attach schedule) ATCH 9		1,156,843	1,082,502.
11 0	Investments - corporate Investments - land, buildings	bonds (attach schedule)		<del> </del>	
''		1		· · · · · · · · · · · · · · · · · · ·	
	Less accumulated deprecia (attach schedule)	ition -			
12	Investments - mortgage	loans			
13	Investments - other (atta	nch schedule) ATCH 10	166,240.	36,558	34,836.
	Less accumulated deprecia	tion			
15	Other assets (describe	<b>&gt;</b> )			
16		completed by all filers - see the			
İ	instructions Also, see pa	age 1, item I)	1,302,581.	1,368,772	1,292,709.
17			84.	99	
18					┦
1					<b>-</b>
<u>≅</u>  20		rs, trustees, and other disqualified persons			
Ciabilities 20 21 22 22 22 22 22 22 22 22 22 22 22 22		tes payable (attach schedule)			-
[22		e >)			
22	Other habilities (describe	; <b>/</b> /			<b>⊣</b>
23	Tetal liebilities (odd lass	o 17 through 22)	84.	99	
23		s 17 through 22)	04.		<del></del>
		ow SFAS 117, check here . >			ę
Ses	and complete lines a	24 through 26 and lines 30 and 31.			
24	Unrestricted				<b>-</b>
[ 25	Unrestricted				
26	Permanently restricted .				_
.5	Foundations that do	not follow SFAS 117, ▶ X			Į.
5	check here and com	plete lines 27 through 31.			1
<u>v</u> 27	Capital stock, trust princ	cipal, or current funds			·
<b>9</b> 28	Paid-in or capital surplus, or	land, bldg, and equipment fund			
8 29	Retained earnings, accumu	lated income, endowment, or other funds	1,302,497.	1,368,673	
<u>후</u> 30	Total net assets or fund	balances (see instructions)	1,302,497.	1,368,673	3.
31	Total liabilities and	net assets/fund balances (see			
		· · · · · · · · · · · · · · · · · · ·	1,302,581.	1,368,772	≥ .
Part II		inges in Net Assets or Fund E	Balances		
		palances at beginning of year - Part I		ust agree with	
		d on prior year's return)			1,302,497.
	er amount from Part I,			1	55.456
		lad :- 1: 0 (4) b		1 -	<del></del>
			<b></b>	<del></del>	1 260 672
5 Dec	rines 1, 2, and 3 reases not included in	line 2 (temize)			
		alances at end of year (line 4 minus	Ino 5\ Port II column (L)		4 060 650
0 10(8	ai net assets of fullo D	alances at end of year time 4 minus	iiile 5) - Fart II, column (b)	<u>, line 30 6</u>	1,300,073.

	d describe the kind(s) of property sold (		(b) How acquired	(c) Date	(d) Date sold
2-story b	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	acquired (mo , day, yr )	(mo , day, yr )
1a SEE PART IV SCHE	DULE				
b					
С					
d	<del>-</del>				
e		(a) Cook or other book			l
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
<u>b</u>					
<u>c</u>					
e					<del></del>
	showing gain in column (h) and owne	d by the foundation on 12/31/69	<del></del>	0	- <del></del>
(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col. (h) g (k), but not less t Losses (from co	han -0-) or
	43 01 12/01/03	Over cor (j), it arry			
<u>a</u> b				<del></del>	
C					
<u>d</u>					
e					
2 Capital gain net income or	(not canital loce)	gain, also enter in Part I, line 7	2		115,454.
3 Net short-term capital dair	ıı	(loss), enter -0- in Part I, line 7	-		113,434.
	rt I, line 8, column (c) (see insti				
			3		0
	Under Section 4940(e) for Rec				
	the section 4942 tax on the distrib not qualify under section 4940(e).		ase period	d?	Yes X No
	ount in each column for each year		any entri	es.	
(a)	(b)	(c)		(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2012	64,000.	1,302,690.			0.049129
2011	143,317.	1,329,619.			0.107788
2010	53,955.	1,290,897.			0.041797
2009	82,807. 134,014.	1,073,505.			0.077137
2008	134,014.	1,738,280.			0.077096
2 Total of line 1, column (d)	)		2		0.352947
-	for the 5-year base period - divide	the total on line 2 by 5, or by the			0 050555
number of years the foun	dation has been in existence if less	s than 5 years	3		0.070589
4 Enter the net value of nor	ncharitable-use assets for 2013 fro	m Part X, line 5	4	1,	271,084.
5 Multiply line 4 by line 3			5	_	89,725.
	ent income (1% of Part I, line 27b)		6		1,360.
	• • • • • • • • • • • • • • • • • • • •		7		91,085.
	ons from Part XII, line 4		8		66,315.
If line 8 is equal to or gr Part VI instructions	eater than line 7, check the box i	n Part VI, line 1b, and complete t		using a 1% ta	

•	
Page	4

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstrı	iction	s)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1		-		
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check				
	here ▶ and enter 1% of Part i, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2				
3	Add lines 1 and 2		2,	721.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		2,	721.	
6	Credits/Payments				
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,576.			i	
b	Exempt foreign organizations - tax withheld at source			-	
	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d		1,	576.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,	145.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11				
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	<b>—</b>	Yes	No	
	or intervene in any political campaign?	1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the				
	definition)?	1b	2	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	,	4		
	distributed by the foundation in connection with the activities.		<u> </u>	اا	
C	Did the foundation file Form 1120-POL for this year?	1c		X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		,	^ ,	
	(1) On the foundation  \$ (2) On foundation managers  \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	,	180		
_	foundation managers  \$			X	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		_^_	
•	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,		· · · · · · · · · · · · · · · · · · ·	-x	
4 -	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a			
	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b 5		X	
5	If "Yes," attach the statement required by General Instruction T			<del></del>	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
Ü	By language in the governing instrument, or			] '	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				
	with the state law remain in the governing instrument?	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х		
	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	MD,				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1	
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	L	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete				
	Part XIV	9		Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and				
	addresses	10		Х	
	<del>-</del>				

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	l	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			_
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_	Х	
	Website address N/A			
14	The books are in care of ► THE FOUNDATION  Located at ►10401 GROSVENOR PL, #502 ROCKVILLE, MD  ZIP+4 ► 20852  Section 4947(a)(1) consequent charatable trusts filing Form 990 PE in liquid Form 1041. Check here	-61	7 <b>9</b>	
	Located at ▶10401 GROSVENOR PL, #502 ROCKVILLE, MD ZIP+4 ▶ 20852			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	T
	and enter the amount of tax-exempt interest received or accrued during the year		-	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	ŀ	х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes." enter the name of			_
	the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			·
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			,
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			I
	the benefit or use of a disqualified person)?	ľ		:
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	12·s		c 1
	foundation agreed to make a grant to or to employ the official for a period after	` .		
	termination of government service, if terminating within 90 days)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. 1	
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ـــــــ		}
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u></u>
	Organizations relying on a current notice regarding disaster assistance check here	ĺ		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1		!
	were not corrected before the first day of the tax year beginning in 2013?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	t .
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			i
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and	-		
	6e, Part XIII) for tax year(s) beginning before 2013?	*,		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			;
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		-	
	all years listed, answer "No" and attach statement - see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b></b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	off "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or			,
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			ı
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			1,7
	foundation had excess business holdings in 2013 )	3b	<del> </del>	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a	<del> </del>	<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X

Form 990-PF (2013)

Form	990-PF (2013) ' HELEN G. NASS	IF FOUNDATION	, inc.		52-20	31005	Page <b>6</b>
Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Regu	red (contin	ued)		
	During the year did the foundation pay or incur any amou			100 (00771117	<del>,</del>		-
	(1) Carry on propaganda, or otherwise attempt to influer		14945(p)\2	Yes	X No		
		• •	. ,,		140		
	(2) Influence the outcome of any specific public ele	•			┌┰		
	directly or indirectly, any voter registration drive?				X No	1 1	
	(3) Provide a grant to an individual for travel, study, or ot	her sımılar purposes?		. LYes	X No		
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described i	n			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (	see instructions)		. Yes	X No	i l	
	(5) Provide for any purpose other than religious, ch	aritable, scientific,	iterary, or education	al			
	purposes, or for the prevention of cruelty to children of	or animals?	• .	Yes	X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				cribed in		
_	Regulations section 53 4945 or in a current notice regard		•	•		5b	
						_ <del> </del>	
	Organizations relying on a current notice regarding disas				▶ 🗠	기	
С	If the answer is "Yes" to question 5a(4), does the		•				*
	because it maintained expenditure responsibility for the g			. Yes	No No		
	If "Yes," attach the statement required by Regulations sec	tıon 53 4945-5(d)					
6a	Did the foundation, during the year, receive any fund	ds, directly or indire	ctly, to pay premium	s			
	on a personal benefit contract?			Yes	X No		
b	Did the foundation, during the year, pay premiums, direct					6b	X
	If "Yes" to 6b. file Form 8870	,					٠,
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tay	shelter transaction?	Yes	X No		,
	If "Yes," did the foundation receive any proceeds or have	•	-	- —	140	76	de on
	Information About Officers, Directors				l Employ	7b	
Га	and Contractors	i, Trustees, Tour	dation managers,	inginy raid	Linploy	ccs,	
1	List all officers, directors, trustees, foundation r						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributi employee bene		(e) Expens	
		devoted to position	`enter -0-)	and deferred corr		other all	owances
ATC	CH 11		C		q		
	······································						
		1					
	Companyation of five highest raid employees	(other than the	eo included en lin	1 000 1		a) If m	
2	Compensation of five highest-paid employees "NONE."	(other than tho	se included on lin	1 - see i	nstruction	s). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	1	se included on lin	(d) Contribut	ons to		
_	Compensation of five highest-paid employees "NONE."  ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	se included on line (c) Compensation	(d) Contribut employee b	ons to	(e) Expens	e account,
_	"NONE."	(b) Title, and average		(d) Contribut	ons to enefit iferred		e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,
_	"NONE."  1) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribut employee b plans and de	ons to enefit iferred	(e) Expens	e account,

Form 990-PF (2013)

	_
Dago	7

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploannd Contractors (continued)	/ees,
3 Five I	nighest-paid independent contractors for professional services (see instructions). If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		ĺ
· · · · · ·		
<del>-</del>		
<b></b>		
<del></del>		
Total numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	adation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 NOT Z	APPLICABLE	
'-====		
		<del></del>
2		
		<del></del> -
3		
4	*	
Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other pro	gram-related investments. See instructions	
3 NONE		
~		
Total Add	lines 1 through 3	
i otal. Aug	lines 1 through 3	_

Form 990-PF(2013)

Par	<ul> <li>Minimum Investment Return (All domestic foundations must complete this part. Foresee instructions.)</li> </ul>	eign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	,	
	purposes		
a	Average monthly fair market value of securities	1a	649,222.
b	Average of monthly cash balances	.   1b	641,219.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,290,441.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see	3	1,290,441.
4			
_	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	19,357.
5	•	. 5	1,271,084.
6	Minimum investment return. Enter 5% of line 5	. 6	63,554.
Par	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ and do not complete this part.)	ındations	
1	Minimum investment return from Part X, line 6	. 1	63,554.
2a			
b			
С	A 111 O 101	2c	2,721.
3	Distributable amount before adjustments Subtract line 2c from line 1	. 3	60,833.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	60,833.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	. 7	60,833.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	66,315.
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	,	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	93 10	
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	. 4	66,315.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom-		
	Enter 1% of Part I, line 27b (see instructions)	. 5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	66,315.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years	calculating v	hether the foundation

Form **990-PF** (2013)

52-2031005 HELEN G. NASSIF FOUNDATION, INC. Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) (a) (c) 2012 Corpus Years prior to 2012 2013 Distributable amount for 2013 from Part XI, 60,833. 2 Undistributed income, if any, as of the end of 2013 62,053 Enter amount for 2012 only . . . Total for pnor years 20 11 ,20 10 ,20 09 Excess distributions carryover, if any, to 2013 From 2008 . . . . . . From 2009 . . . . . . From 2010 From 2011 . . . . . . From 2012 . . . . . . Total of lines 3a through e . . . . . . . . . . . . Qualifying distributions for 2013 from Part XII. 66,315. line 4<sup>.</sup> ▶ \$ 62,053 a Applied to 2012, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . . 4,262. d Applied to 2013 distributable amount .... Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: . Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions . . Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 ......... 56,571.

Form **990-PF** (2013)

O Analysis of line 9
a Excess from 2009 . . .
b Excess from 2010 . . .
c Excess from 2011 . . .
d Excess from 2012 . . .
e Excess from 2013 . . .

Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)...

Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)...

Excess distributions carryover to 2014.

Subtract lines 7 and 8 from line 6a.......

	b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
_	N/A
Z	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
	Check here ▶ if the foundation only makes contributions to preselected charitable organizations and does not acceunsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations undotted conditions complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: ATCH 12

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

c Any submission deadlines

NONE

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

NONE

Part XV

Part XIV

Page 11

Part XV Supplementary Information (	continued)						
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient Name and address (home or business)  If recipient is an indwdual, show any relationship to any foundation manager or substantial contributor  Recipient  Purpose of grant or contribution  Amount							
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount			
a Paid during the year				·			
ATCH 14							
			<u>.</u>				
	1						
Total		·	▶ 3a	63,415.			
b Approved for future payment	<u> </u>	<u> </u>		33,120,			
2 Approved to relate payment							
		1					
	<u> </u>	L	<u> </u>				
Total	<del> </del>	· · · · · ·					

Part XVI-A Analysis of Income-Produ	1 -		_ <del>_</del>		
Enter gross amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
b			-		
c					
d			<del> </del>		
e		·			
f					
g Fees and contracts from government agencies			-		
2 Membership dues and assessments	<u> </u>		14	1,703.	
<ul><li>3 Interest on savings and temporary cash investments</li><li>4 Dividends and interest from securities</li></ul>			14	20,611.	•
5 Net rental income or (loss) from real estate:		·		20,011,	
a Debt-financed property			1		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other than inventory	1		18	120,666.	<del></del>
9 Net income or (loss) from special events				· · · · · · · · · · · · · · · · · · ·	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b ATCH 15				-730.	
С					
d					
e					- <del></del>
12 Subtotal Add columns (b), (d), and (e)				142,250.	
13 Total. Add line 12, columns (b), (d), and (e)				13	142,250.
(See worksheet in line 13 instructions to verify calc	ulations)				
Part XVI-B Relationship of Activities  Line No. Explain below how each activit accomplishment of the foundation	ty for whic	h income is reported	ın column (e	e) of Part XVI-A contribu	•
				,	
			_		
			•		<del></del>
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					. <u></u>
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	•				-
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					· <del>-</del> ·
				· <del>-</del> · <del>-</del>	
			<del></del>	<del></del>	
				<del></del>	
				<u> </u>	<u>.</u>

Form 990-PF (2013	) •	HELEN	G.	NASSIF	FOUNDATION	, INC.		52-2031005	Page 13
Part XVII	Information	Regarding	Trar	nsfers To	o and Transa	ctions and	l Relationshi	ps With Noncharita	ble

	<u>.                                      </u>	Exempt Organ	nizations								
1 [	Old the	e organization direct	ly or indirectly	engage in any of	the following	with ar	ny other organ	nization described		Yes	No
		tion 501(c) of the Co			-						
		zations?	·	, , , ,	•	•	·	<b>.</b>			
a ¯	Transf	ers from the reportin	g foundation to	o a noncharitable e	exempt organ	zation of					
		sh							1a(1)		Х
		ner assets							1a(2)		Х
		transactions:							14(2)		
		les of assets to a no	ncharitable exe	empt organization					1b(1)		<b>X</b>
ì	2) Pu	rchases of assets fro	om a noncharit	able exempt organi	zation			• • • • • • • • • • • • • • • • • • • •	1b(2)		X
ì	3) Re	ntal of facilities, equi	nment or other	r assets	200001				1b(3)		X
ì	4) Re	imbursement arrange	ements		• • • • • • •				1b(4)		X
ì	5) Lo	ans or loan guarantee	98						1b(5)		X
ì	6) Pe	rformance of service	s or members	hin or fundraising s	colicitations						X
- C S	Sharin	g of facilities, equipn	ant mailing lis	ete other seeste o	r naid employ				1b(6) 1c	-	X
		answer to any of th									
		of the goods, other									
		n any transaction or									
(a) Lin		(b) Amount involved		noncharitable exempt o				ers, transactions, and shar			
(4) (4)	-	N/A	(c) Hame of	nonchamable exempt o	rganization	N/A	cription of transit	rs, transactions, and shar	ing arrai	igenier	113
			<del></del>	·		11,711	<del></del>				
			<del>-</del>								
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				<del></del>					-		
				·			<del></del>				
			<u></u>								
		foundation directly							$\neg$		7
		ped in section 501(c)				ın sectioi	n 527?		Ye	s X	No
b_l	t "Yes	," complete the follow				ı			-		
		(a) Name of organization	<u> </u>	(b) Type o	f organization		(	) Description of relations	hip		
							·				
							-			_	
								<del></del>			
			<del> </del>								
	1				<u></u>						
	Under	r penalties of perjury, I decla ct, and cemplete Declaration of	ire that I have exam preparer (other than	ined this return, including taxpayer) is based on all inf	accompanying solution of which p	hedules and reparer has a	statements, and to any knowledge	the best of my knowledg	e and b	elief, it	ıs true,
Sign		11.1 2 m		1.1/	1 1		) 1	May the (RS	discuss	this	retum
Here		Allew [] (1)	essel	4/16/	12014	Z Jn	esedent	with the pre			
	Sigi	nature of officer or trustee	U	Date	•	Title	-	(see instructions	s)? X	Yes	No
		[									
Paid		Print/Type preparer's na		Preparer's signati		$\wedge$	Date	CHECK     II	TIN		
		ROBERT K HERS		Ucourt.	HULL	Pr-	4/10/0	<del>`                                    </del>	2001		0
Prep			TKINS MEEC					Firm's EIN ► 52-12	29769	95	
Use (	Only	1		EDGE DRIVE SU	JITE 750						
		BE	THESDA, N	1D		20	817	Phone no 301-65	5 <u>4-</u> 75	555	
								For	m 990	-PF	(2013)

### **SCHEDULE D** (Form 1041)

Department of the Treasury Internal Revenue Service

### **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

Name of estate or trust

HELEN G. NASSIF FOUNDATION, INC.

Employer identification number

52-2031005

	Form 5227 filers need to complete only Parts I and II					
Part	Short-Term Capital Gains and Losses - Ass	ets Held One Yea	r or Less			
the lin	structions for how to figure the amounts to enter on es below orm may be easier to complete if you round off cents	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss Form(s) 8949, F	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
	ble dollars.	(g)	column (g)			
1 fo H	otals for all short-term transactions reported on Form 099-B for which basis was reported to the IRS and or which you have no adjustments (see instructions), lowever, if you choose to report all these transactions in Form 8949, leave this line blank and go to line 1b					
	otals for all transactions reported on Form(s) 8949 out Box A checked					
w	otals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
	otals for all transactions reported on Form(s) 8949 ith <b>Box C</b> checked	4,810,414.	4,687,432.	-11,7	89.	111,193.
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4_	
6	Net short-term gain or (loss) from partnerships, S cor Short-term capital loss carryover Enter the amour Carryover Worksheet	nt, if any, from line	e 9 of the 2012	Capital Loss	5 6	( )
7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	es 1a through 6 in	column (h) Enter	here and on	7	111,193.
Part		ets Held More Tha	an One Year			
the line	structions for how to figure the amounts to enter on es below orm may be easier to complete if you round off cents ble dollars	(d) Proceeds (sales pnce)	(e) Cost (or other basis)	(g) Adjustments to gain or loss Form(s) 8949, P line 2, column	from art II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1 fo H	otals for all long-term transactions reported on Form 099-B for which basis was reported to the IRS and or which you have no adjustments (see instructions) owever, if you choose to report all these transactions n Form 8949, leave this line blank and go to line 8b					
	otals for all transactions reported on Form(s) 8949 orth Box D checked					
9 T	otals for all transactions reported on Form(s) 8949 orth Box E checked					
	otals for all transactions reported on Form(s) 8949 oith <b>Box</b> F checked	222,504.	216,208.	-2,0	57.	4,239.
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	1 8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	oorations, and other e	states or trusts		12	
13	Capital gain distributions				13	22.
	Gain from Form 4797, Part I				14	
	Carryover Worksheet				15	( )
	line 18a, column (3) on the back				16	4,261.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2013

	•					•
	dule D (Form 1041) 2013					Page 2
Pa	Summary of Parts I and II	1 1 1 .	neficiaries'	(2) Estate		(3) Total
	Caution: Read the instructions before completing this part.	<del>`-</del>	e instr )	or trust's	5	
17	Net short-term gain or (loss)			_		111,193.
18	Net long-term gain or (loss):					4 0.61
	Total for year					4,261.
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 181	1				
	28% rate gain					115 454
19 Note			Dort I line	10) If have 100		115,454.
gains nece.	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or l i, go to Part V, and <b>do not</b> complete Part IV. If line 19, column (3), is a net lo ssary	ss, comple	te Part IV an	d the <b>Capital L</b>	Loss Ca	arryover Worksheet, a
Par	t IV Capital Loss Limitation					
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I	line 4c, if a	trust), the <b>sr</b>	maller of		
a	The loss on line 19, column (3) or b \$3,000			2	0 (	
Loss	caryover Worksheet in the instructions to figure your capital loss carryover.	9 1, line 22	(or Form 99	U-1, line 34), is	a ioss	, complete the <b>Capit</b> a
Pai	Tax Computation Using Maximum Capital Gains Rates					
Forn	n 1041 filers. Complete this part only if both lines 18a and 19 in column	(2) are g	ains, or an a	imount is ente	ered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more th					
	tion: Skip this part and complete the Schedule D Tax Worksheet in the instr	uctions if				
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.	0.D0 01 00	ualificat disa	daada a.aa.a	ام مام ما	
of F	n <b>990-T trusts.</b> Complete this part <b>only</b> if both lines 18a and 19 are gorm 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part and	complete	the Schedu	dends are inc	iluaea rkehoo	In income in Part
	her line 18b, col (2) or line 18c, col (2) is more than zero.	complete	the <b>General</b>	ile D Tax Wol	KSHCC	in the mandenon.
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34).	21	1	<u> </u>	$\neg$	
22	Enter the smaller of line 18a or 19 in column (2)	21	+			
22	but not less than zero					
23	Enter the estate's or trust's qualified dividends					
23	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) 23	*				
24	Add lines 22 and 23					
25	If the estate or trust is filing Form 4952, enter the					
23	amount from line 4g, otherwise, enter -0 > 25					
26	Subtract line 25 from line 24 If zero or less, enter -0-	26				
27	Subtract line 26 from line 21 If zero or less, enter -0-	27	<del> </del>	• • • • • • • • • • • • • • • • • • • •		
28	Enter the smaller of the amount on line 21 or \$2,450	· ·	+			
29	Enter the smaller of the amount on line 27 or line 28					
30	Subtract line 29 from line 28 If zero or less, enter -0 This amount is taxe			▶ 3	n	
31	Enter the smaller of line 21 or line 26		i			
32	Subtract line 30 from line 26.		<del>                                     </del>			
33	Enter the smaller of line 21 or \$11,950	33	1			
34	Add lines 27 and 30		†			
35	Subtract line 34 from line 33 If zero or less, enter -0-					
36	Enter the smaller of line 32 or line 35					
37	Multiply line 36 by 15%			▶ 3	7	
38	Enter the amount from line 31		Ĭ			<u> </u>
39	Add lines 30 and 36		1			
40	Subtract line 39 from line 38 If zero or less, enter -0-					
41	Multiply line 40 by 20%		··	▶ 4	1	
42	Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for Estat	1	1	· · · · · · · · ·		
	and Trusts (see the Schedule G instructions in the instructions for Form 1041).	i i				

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Schedule D (Form 1041) 2013

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Figure the tax on the amount on line 21 Use the 2013 Tax Rate Schedule for Estates

and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

G, line 1a (or Form 990-T, line 36)

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

HELEN G. NASSIF FOUNDATION, INC.

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME								
	Description				Description   P   Description   Description			Date sold
Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)			
TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS			22.			
1			1ENT	P	VARIOUS	VARIOUS		
91,152.					6,088.			
PROPERTY TY			MENT	P		VARIOUS		
4,596,207.					105,178.			
PROPERTY TY			1ENT	P	VARIOUS	VARIOUS		
					·			
		TIES		P	VARIOUS -2.	VARIOUS		
POWERSHARES				P	VARIOUS	VARIOUS		
PROPERTY TY	PE: SECURIT	TES			-2.			
			RACKING	Р	VARIOUS	VARIOUS		
71.					-71.			
PROPERTY TY			RACKING	P		VARIOUS		
107.					-107.			
			• • • • • • • • •	:	115,454.			
	Cost or other basis  TOTAL CAPIT  SCHWAB 5605 PROPERTY TY 91,152.  SCHWAB 9365 PROPERTY TY 4,596,207.  SCHWAB 9365 PROPERTY TY 216,099.  POWERSHARES PROPERTY TY 2.  POWERSHARES PROPERTY TY 2.  POWERSHARES PROPERTY TY 71.  POWERSHARES PROPERTY TY 11.	Cost or other basis 12/31/69  TOTAL CAPITAL GAIN DIS  SCHWAB 5605 - SEE ATTA PROPERTY TYPE: SECURIT 91,152.  SCHWAB 9365 - SEE ATTA PROPERTY TYPE: SECURIT 4,596,207.  SCHWAB 9365 - SEE ATTA PROPERTY TYPE: SECURIT 216,099.  POWERSHARES PROPERTY TYPE: SECURIT 2.  POWERSHARES PROPERTY TYPE: SECURIT 2.  POWERSHARES PROPERTY TYPE: SECURIT 71.  POWERSHARES DB COMMODI PROPERTY TYPE: SECURIT 71.  POWERSHARES DB COMMODI PROPERTY TYPE: SECURIT 107.	Cost or other as of as of as of 12/31/69  TOTAL CAPITAL GAIN DISTRIBUTIONS  SCHWAB 5605 - SEE ATTACHED STATEM PROPERTY TYPE: SECURITIES 91,152.  SCHWAB 9365 - SEE ATTACHED STATEM PROPERTY TYPE: SECURITIES 4,596,207.  SCHWAB 9365 - SEE ATTACHED STATEM PROPERTY TYPE: SECURITIES 216,099.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES DB COMMODITY INDEX THE PROPERTY TYPE: SECURITIES 71.  POWERSHARES DB COMMODITY INDEX THE PROPERTY TYPE: SECURITIES 71.	Description  Cost or other as of as of FMV over basis 12/31/69 12/31/69 adj basis  TOTAL CAPITAL GAIN DISTRIBUTIONS  SCHWAB 5605 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 91,152.  SCHWAB 9365 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 4,596,207.  SCHWAB 9365 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 216,099.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES DE COMMODITY INDEX TRACKING PROPERTY TYPE: SECURITIES 71.  POWERSHARES DE COMMODITY INDEX TRACKING PROPERTY TYPE: SECURITIES 1.	Description  Cost or other as of as of pMV over basis 12/31/69 12/31/69 adj basis  TOTAL CAPITAL GAIN DISTRIBUTIONS  SCHWAB 5605 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 91,152.  SCHWAB 9365 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 4,596,207.  SCHWAB 9365 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 216,099.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES DB COMMODITY INDEX TRACKING PROPERTY TYPE: SECURITIES 71.  POWERSHARES DB COMMODITY INDEX TRACKING PROPERTY TYPE: SECURITIES 71.	Description  Cost or other as of as of as of FMV over basis 12/31/69 12/31/69 Excess of FMV over basis 12/31/69 12/31/69 adj basis 22.  TOTAL CAPITAL GAIN DISTRIBUTIONS  22.  SCHWAB 5605 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 91,152.  SCHWAB 9365 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 4,596,207.  SCHWAB 9365 - SEE ATTACHED STATEMENT PROPERTY TYPE: SECURITIES 216,099.  POWERSHARES PROPERTY TYPE: SECURITIES 2.  POWERSHARES DB COMMODITY INDEX TRACKING PROPERTY TYPE: SECURITIES 71.  POWERSHARES DB COMMODITY INDEX TRACKING PROPERTY TYPE: SECURITIES 71.  POWERSHARES DB COMMODITY INDEX TRACKING POWERSHARES DB COMMOD		

### - INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

NET INVESTMENT INCOME	1,691. 12.	1,703.
REVENUE AND EXPENSES PER BOOKS	1,691. 12.	1,703.
DESCRIPTION	JOHN MARSHALL BANK INTEREST FROM PASS THROUGH ENTITIES	TOTAL

ATTACHMENT 1 PAGE 16

# FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	20,611.	20,611.
REVENUE AND EXPENSES PER BOOKS	20,611.	20,611.
		TOTAL
DESCRIPTION	CHARLES SCHWAB	

- OTHER INCOME PART I FORM 990PF,

DESCRIPTION ORDINARY BUSINESS LOSS ROYALTIES

NET INVESTMENT INCOME -558. EXPENSES PER BOOKS REVENUE AND

TOTALS

-552.

-552.

ATTACHMENT 3 PAGE 18

INC.
FOUNDATION,
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HELEN

PART I - ACCOUNTING FEES

FORM 990PF,

CHARITABLE	2,900.	2,900.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	2,900.	2,900.
		TOTALS
DESCRIPTION	TAX RETURN PREPARATION	

ATTACHMENT 4 PAGE 19

FEES
PROFESSIONAL
- OTHER P
PART I
90PF,
თ

	NET	INVESTMENT	INCOME	414.	414.
REVENUE	AND	EXPENSES	PER BOOKS	414.	414.
					TOTALS
			DESCRIPTION	INVESTMENT FEES	

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ATTACHMENT

- INTEREST EXPENSE PART I FORM 990PF, REVENUE

EXPENSES PER BOOKS AND

INVESTMENT INCOME

DESCRIPTION

INTEREST EXPENSE

748.

748.

TOTALS

748.

748.

- TAXES PART I FORM 990PF, REVENUE AND

NET INVESTMENT INCOME

DESCRIPTION

EXPENSES PER BOOKS

FOREIGN TAXES

12.

12.

TOTALS

ATTACHMENT 7 PAGE 22

### FORM 990PF, PART I - OTHER EXPENSES

		REVENUE
		AND
		EXPENSES
DESCRIPTION		PER BOOKS
MISCELLANEOUS EXPENSE		1,206.
TELEPHONE		868.
OFFICE EXPENSE		1,281.
VEHICLE EXPENSE		1,600.
	TOTALS	4,955.

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ATTACHMENT

## FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV	1,082,502.	1,082,502.
ENDING BOOK VALUE	1,156,843.	1,156,843.
BOOK VALUE	741,298.	741,298.
		TOTALS
DESCRIPTION	CHARLES SCHWAB 9365	

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# FORM 990PF, PART II - OTHER INVESTMENTS

ENDING <u>FMV</u>	34,836.	34,836.
ENDING BOOK VALUE	36,558.	36,558.
BEGINNING BOOK VALUE	119,275.	166,240.
		TOTALS
DESCRIPTION	CHARLES SCHAWB 5605 CHARLES SCHWAB 9365	

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
HELEN G. NASSIF 10401 GROSVENOR PLACE 502 ROCKVILLE, MD 20852	PRES/ DIR 10.00	0	0	0
DR. ALEX SKAFF 10401 GROSVENOR PLACE 502 ROCKVILLE, MD 20852	V.P./ DIR 1.00	0	0	0
ROBERT K. HERSH 6720-B ROCKLEDGE DRIVE SUITE 750 BETHESDA, MD 20817	SEC./ DIR 3.00	0	0	0
DR. JOHN G. NASSIF 10401 GROSVENOR PLACE 502 ROCKVILLE, MD 20852	DIRECTOR 1.00	0	0	0
	GRAND TOTALS	0	0	0

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

HELEN G. NASSIF 10401 GROSVENOR PL # 502 ROCKVILLE, MD 20852 301 493-6179

### 990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

NO SPECIFIC FORM IS REQUIRED, BUT THE APPLICATION MUST BE TYPEWRITTEN AND NO MORE THAN ONE DOUBLE-SPACED PAGE WITH PROOF OF SEC. 501(C)(3).

52-2031005

ATTACHMENT 14

## FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	100.	275.	40.	63,000.
PURPOSE OF GRANT OR CONTRIBUTION	GENERAL OPERATING EXPENSES	GENERAL OPERATING EXPENSES	GENERAL OPERATING EXPENSES	GENERAL OPERATING EXPENSES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC	NONE PC	NONE PC
RECIPIENT NAME AND ADDRESS	PHILANTHROPY ROUNDTABLE 1730 M STREET NW WASHINGTON, DC 20036	NATIONAL PRESBYTERIAN CHURCH 4101 NEBRASKA AVENUE NW WASHINGTON, DC 20016	SALVATION ARMY 2626 PENNSYLVANIA AVE NW WASHINGTON, DC 20037-1618	ST. LUKE'S HOSPITAL FOUNDATION 1026 A AVENUE NE P.O. BOX 3026 CEDAR RAPIDS, IA 52406-3026

63,415. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 14 PAGE 29

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FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

					•
	BUSINESS		EXCLUSION		RELATED OR EXEMPT
DESCRIPTION	CODE	AMOUNT	CODE	AMOUNT	FUNCTION INCOME
ORDINARY BUSINESS INCOME-KINDER MORGAN			18	-558.	
MISCELLANEOUS INCOME			01	-178.	
ROYALTIES			01	.9	
TOTALS				-730.	

### Form 8949

### Sales and Other Dispositions of Capital Assets

► Information about Form 8949 and its separate instructions is at www.irs gov/form8949

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No 1545-0074

Attachment Sequence No 12.

Internal Revenue Service
Name(s) shown on return

HELEN G. NASSIF FOUNDATION, INC.

Social security number or taxpayer identification number 52-2031005

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part I Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

**Note.** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

	, ,		Toport aroos a	<u> </u>			,,,,,,
fou must check Box A, B, or C be							
complete a separate Form 8949,						tions than will fit o	n this page
or one or more of the boxes, com				-			
(A) Short-term transactions rep			-	•		e)	
(B) Short-term transactions repo				reported to the IF	RS		
X (C) Short-term transactions not	reported to you	on Form 1099	-B			<del> </del>	
(a) Description of property	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	If you enter an a enter a co	any, to gain or loss. amount in column (g), de in column (f) arate instructions.	(h) Gain or (loss).
(Example 100 sh XYZ Co)	Date acquired (Mo , day, yr )	disposed (Mo , day, yr )	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	Subtract column (e from column (d) and combine the result with column (g)
CHWAB 5605 - SEE							
ATTACHED STATEMENT	VARIOUS	VARIOUS	97,225.	91,152.	В	15.	6,088
CHWAB 9365 - SEE						W 444 - 1 - 1	
ATTACHED STATEMENT	VARIOUS	VARIOUS	4,713,189.	4,596,207.	В	-11,804.	105,178
POWERSHARES	VARIOUS	VARIOUS		2.			-2
OWERSHARES DB							-
COMMODITY INDEX TRA	VARIOUS	VARIOUS		71.			-71
	<u> </u>						
			-				
	<u> </u>						
2 Totals Add the amounts in column act negative amounts) Enter each your Schedule D. line 1b (if Boy A	total here and	d include on					

Note If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Box B above is checked), or line 3 (if Box C above is checked) ▶ 4,810,414. 4,687,432

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)
HELEN G. NASSIF FOUNDATION, INC.

Social security number or taxpayer identification number 52-2031005

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (F) Long-term transactions not reported to you on Form 1099-B

A   (F) Long-term transactions r	iot reported t	o you on For	11 1099-8	<del></del>	г—	<del></del>	
(a)  Description of property  (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	If you enter an a enter a cod	ny, to gain or loss. mount in column (g), e in column (f) rate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and
(,,,,	( ) 003/13/17	(Mo , day, yr )	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
SCHWAB 9365 - SEE ATTACHED STATEMENT	VARIOUS	VARIOUS	222,504.	216,099.		-2,057.	4,348
POWERSHARES	VARIOUS	VARIOUS		2.			-2
POWERSHARES DB COMMODITY INDEX TRACKI	VARIOUS	VARIOUS		107.			-107
			-				
			· -				
			<del>.</del>		_		
2 Totals. Add the amounts in colu (subtract negative amounts) Ei include on your Schedule D, line	nter each tota	here and					
checked), line 9 (if Box E above (if Box F above is checked) ▶	is checked),	or line 10	222,504.	216,208.		-2,057.	4,239.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment