

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**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 Qe Treasury Internal Revenue Service

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

Open to Public Inspection

F	or ça	alendar year 2013 or tax year beginning	0	<sup>7/01</sup> , <b>2013</b> ,	and endir	ng		06/30	, 20 14
	Name	of foundation THE ROSENFELD, RUMB	ORD, STECKLER	FAMILY			Employer identif	ication number	
	FOU	INDATION, INC.					52-220487	0	
_	Numi	per and street (or P O box number if mail is not delivere	d to street address)		Room/suite	В	Telephone numb	er (see instruction	ns)
								1) 718-1	•
	444	5 WILLARD AVENUE			700		, 50	.,	
-		or town, state or province, country, and ZIP or foreign po	estal code	L		+	<del></del>		
	•	, , , , , , , , , , , , , , , , , , , ,				c	If exemption applica	ation is	, $\Box$
	CHE	VY CHASE, MD 20815					pending, check here	• • • • • •	. ▶□
_		<del></del>	Initial cation	-6 - 6					. $\square$
G	CIR	eck all that apply Initial return		of a former pu	iblic chari	ty D	1. Foreign organizat	tions, check here	. ▶∟_
		Final return	Amended re				<ol><li>Foreign organiza</li><li>85% test, check f</li></ol>		
_		Address change	Name chang				computation •		. ▶∟
H		eck type of organization $\begin{bmatrix} X \end{bmatrix}$ Section 501				Ε	If private foundation	n status was termina	ated
1		Section 4947(a)(1) nonexempt chantable trust	Other taxable pr		on		under section 507(b		<b>.</b>
1			ounting method $oxedsymbol{oxed{X}}$ Ca	ash 💹 Accr	ual	F	If the foundation is	ıп a 60-month termi	nation
			ther (specify)				under section 507(b)		1 1
_	16)	▶ \$ 2,912,933. (Part I,	column (d) must be on	cash basis )					
	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(1) Al .				(d) Disburs	
_		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inves		(c) A	Adjusted net	for chari	
		column (a) (see instructions) )	books	meome	·		income	purpos (cash basi	
_	1	Contributions, gifts grants, etc., received (attach schedule) .						\	
	2	if the foundation is not required to							
	3	Interest on savings and temporary cash investments							
	4	Dividends and interest from securities	91,708.	91	,708.			ATCH 1	
-			,		·				
ı		Gross rents				F		/CD	
	l	Net rental income or (loss)	-20,841.				KEUEIN		
Revenue	ьа b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 730, 692.	20,012			얺			
ַפֿ (	_	assets on line 6a					FEB 112		<del></del>
. 8	7	Capital gain net income (from Part IV, line 2).		<del></del>				RS-	
2	8	Net short-term capital gain		<del></del>		<b>  -</b>	OGDEN,		
Ī	9	Income modifications · · · · · · · · · · · · · · · · · · ·				<u> </u>	OODEN,		
Ē		and allowances · · · ·							
ことと		Less Cost of goods sold .							
တ္တ	С	Gross profit or (loss) (attach schedule)	2 102		100				
•	11	Other income (attach schedule) ATCH, 2	3,103.		,103.				<del></del> .
_	12	Total Add lines 1 through 11	73,970.	94	,811.				
	13	Compensation of officers, directors, trustees, etc	q						
Š	14	Other employee salanes and wages							
nse	15	Pension plans, employee benefits							
bel	15 16 a b c 17 18 19 20 21 22 23 24	Legal fees (attach schedule)							
ŭ	b	Accounting fees (attach schedule)	3,775.						
<u>×</u>	С	Other professional fees (attach schedule)							
rat	17	Interest ATCH 3	5,453.	5	,453.				
ist	18	Taxes (attach schedule) (see instructions) ATCH 4	3,363.	1	,277.	•			
Ë	19	Depreciation (attach schedule) and depletion					· · -		
۱d	20	Occupancy							
þ	21	Travel, conferences, and meetings				-			
a	22	Printing and publications						<del>.</del>	
Бu	22	Printing and publications	27,286.	27	,005.				
ati	23	Other expenses (attach schedule) ATCH . 5	27,200.		, , , , ,		-	<del> </del>	
Ser	24	Total operating and administrative expenses.	39,877.	22	,735.				
Ö		Add lines 13 through 23	77,720.		, , , , , ,			<del></del> ,	77777
	25	Contributions, gifts, grants paid			725				77,720
_	26	Total expenses and disbursements. Add lines 24 and 25	117,597.	33	,735.				77,720
,	27	Subtract line 26 from line 12	4.5.5.5		-				
j		Excess of revenue over expenses and disbursements	-43,627.						
	b	Net investment income (if negative, enter -0-)		61	,076.				
	C	Adjusted net income (if negative, enter -0-).							

			Attached schedules and amounts in the	Beginning of year	Е	nd of year	
L	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market	Value
	1	Cash - non-interest-bearing	ıg	139,533.	228,08	30. 22	8,080
	2,		ash investments				
	3	Accounts receivable ▶_					
		Less allowance for doub	tful accounts ▶				
	4						
		Less allowance for doub	tful accounts >				
	5						
	6		fficers, directors, trustees, and other				
		disqualified persons (atta	ach schedule) (see instructions)				
	7	Other notes and loans re	ceivable (attach schedule)				
			tful accounts >				
ţ	1						
ssets	9		ferred charges				
Ä			government obligations (attach schedule).				
			stock (attach schedule)	2,064,085.			9,435
			oonds (attach schedule)	58,379.	34,00	3!	5,418
	11	Investments - land, buildings, and equipment basis Less accumulated depreciati (attach schedule)	<b>-</b>				
	12	•	oans				
	13	Investments - other (attac	h schedule) ATCH 6 [	102,226.	107,20	19.	
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	on <b>&gt;</b>		-	-	
	15	Other assets (describe	·)				
			completed by all filers - see the				
		instructions Also, see pag	ge 1, item l)	2,364,223.	2,320,59	6. 2,912	2,933
	17	Accounts payable and ac	crued expenses				
	ľ						
S	19	Deferred revenue					
abilities	1		, trustees, and other disqualified persons				
abi	21	Mortgages and other note	es payable (attach schedule) [				
	22	Other liabilities (describe	<b>▶</b> )				
_	23	Total liabilities (add lines	17 through 22)	0		<u> </u>	
es			ow SFAS 117, check here . ▶ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Š	24	Unrestricted					
39/8	25	Temporarily restricted .				_	
ā	26					_	
Net Assets or Fund Balanc		Foundations that do n check here and comp	ot follow SFAS 117, ► X   lete lines 27 through 31.				
S	27	Capital stock, trust princij	pal, or current funds				
se	28	Paid-in or capital surplus, or la	and, bldg , and equipment fund		<del>-</del>		
Ą	29	<del>-</del>	ated income, endowment, or other funds	2,364,223.	2,320,59		
Zet	30		palances (see instructions)	2,364,223.	2,320,59	6.	
_	31	Total liabilities and	net assets/fund balances (see	2 254 222			
			· · · · · · · · · · · · · · · · · · ·	2,364,223.	2,320,59	6.	
			nges in Net Assets or Fund E	"		_ <del></del>	
1			lances at beginning of year - Part I				
			on prior year's return)				1,223
		r amount from Part I, I					3,627.
3	Othe	r increases not include	ed in line 2 (itemize)			3 220	
_	D	lines 1, 2, and 3			· · · · · · · ·		596
5	Deci	eases not included in I	ine 2 (itemize) ►lances at end of year (line 4 minus	lm= 5\ D= 4 !! = 1		5   2 320	), 596.
b	rota	i nel assels of tund ba	lances at end of year (line 4 minus)	IIIIE 3) - Part II. Column (b)	. me 30 l (	6   2,320	/ , ングロ・

G		s and Losses for Tax on Invid describe the kind(s) of property sold		(b) How	(c) Date	(d) Date sold
		orick warehouse, or common stock, 20		acquired P - Purchase D - Donation	acquired (mo , day, yr )	(mo, day, yr)
12	SEE PART IV SCHE	DULE		D - DONALION		
_t	)					
_(		75	<del></del>	ļ		
_(	<u>i</u>					
_6	9	r		1		<u> </u>
_	(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) minu	
_a	<u> </u>				<del></del>	
_t	)			ļ		
c			<del> </del>			
e				<del> </del>		
_	Complete only for assets	showing gain in column (h) and own			Gains (Col (h) ga	
	(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	COI	(k), but not less t Losses (from co	
_			The second of the second	<del>                                     </del>	·	
_a		· · · · · · · · · · · · · · · · · · ·	+	<del>                                     </del>		·
				<del>                                     </del>	<del></del>	
					<del></del>	
e						
			f gain, also enter in Part I, line 7			
2	Capital gain net income or		f (loss), enter -0- in Part I, line 7	2		-20,841.
3	Net short-term capital gair	n or (loss) as defined in sections 1	• •			
	If gain, also enter in Par	rt I, line 8, column (c) (see ins	structions) If (loss), enter -0- in $\}$			
	Part I, line 8	<u> </u>	<u> </u>	3		0
P	art V Qualification l	Under Section 4940(e) for Re	educed Tax on Net Investment li	ncome		
W		the section 4942 tax on the distri	butable amount of any year in the b	ase period	12	Yes No
		not qualify under section 4940(e)				
1	(a)	ount in each column for each yea	ir, see the instructions before making	any entre	es (d)	
	Base period years calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2012		<del>-  </del>	<u> </u>		<del></del>
	2011		<del></del>	-		
	2010	·				
_	2009					
	2008			<del></del>		
2	Total of line 1 column (d)					
2 3	Average distribution ratio	for the 5 year base period divid	le the total on line 2 by 5, or by the	2		
3	_	•	ss than 5 years	,		
	number of years the lound	dation has been in existence in les	s than 5 years	3		
4	Enter the net value of non	charitable-use assets for 2013 fro	om Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
						_
8	Enter qualifying distribution If line 8 is equal to or green Part VI instructions	eater than line 7, check the box	in Part VI, line 1b, and complete t	hat part u	ising a 1% tax	rate See the

 By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict Х X Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) Х of each state as required by General Instruction G? If "No," attach explanation. 86 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete 9 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and 

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_	990-PF (2013) rt VII-A Statements Regarding Activities (continued)			Page
11			}	1
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		Х
12				
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	l	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		X	
	Website address ► N/A			
14	Website address ► N/A  The books are in care of ► THE FOUNDATION Telephone no ► (301) 71  Located at ► 4445 WILLARD AVE #700, CHEVY CHASE, MD ZIP+4 ► 20815	8-1	600	
	Located at ▶4445 WILLARD AVE #700, CHEVY CHASE, MD ZIP+4 ▶ 20815			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\cdot \square$
	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		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	<u> </u>		<u> </u>
Pa	t 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.	ļ	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	ļ		
	disqualified person?			
	(c) it allowed goods, do it does to (or decept them horny a disqualified person			
	(1) is a semperature of a payor remains the expenses of a sequence potential in the seminary pot			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	the scheme of also of a disqualified person).			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
	termination of government service, if terminating within 90 days)			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here	-10		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
·	were not corrected before the first day of the tax year beginning in 2013?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ļ		
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			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> 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		_ X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
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	If "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	,		
	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	1	

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes? . . . . . . . . b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

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X

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_	990-PF (2013)					Page (
Pa	rt VII-B Statements Regarding Activities f	or Which Form 4	1720 May Be Requ	iired (continued)		, , , , , , , , ,
5a	During the year did the foundation pay or incur any amount					
	(1) Carry on propaganda, or otherwise attempt to influe	•	. ,	- —	No l	
	(2) Influence the outcome of any specific public ele	•	•			
	directly or indirectly, any voter registration drive?				No l	
	(3) Provide a grant to an individual for travel, study, or of				No	
	(4) Provide a grant to an organization other than a					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (				10	
	(5) Provide for any purpose other than religious, cl	· · · · · · · · · · · · · · · · · · ·	• •			
	purposes, or for the prevention of cruelty to children				lo l	
b	If any answer is "Yes" to 5a(1)-(5), did any of the		•	exceptions described	ın	
	Regulations section 53 4945 or in a current notice regard	-	, ,		<u>5b</u>	X
	Organizations relying on a current notice regarding disas	ter assistance check l	here		<b>&gt;</b>	
С	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the g	rant?		. Yes X	io	
	If "Yes," attach the statement required by Regulations sec	, ,				
6a	Did the foundation, during the year, receive any fundation					
	on a personal benefit contract?				lo	
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contra	ct?	. 6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction? .	. Yes X	lo	
	If "Yes," did the foundation receive any proceeds or have				. 7b	
Pai	t VIII Information About Officers, Directors	s. Trustees. Foun	idation Managers	Highly Paid Emp	LOVADS	
	and Contractors	,,	idation munugers,	riigiiiy r ala Eiiip	ioyees,	
1	and Contractors List all officers, directors, trustees, foundation r	nanagers and thei	r compensation (see			
1	and Contractors				(e) Expens	se account, lowances
1 ATC	and Contractors List all officers, directors, trustees, foundation r (a) Name and address	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
1 ATO	and Contractors List all officers, directors, trustees, foundation r	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
ATC	and Contractors List all officers, directors, trustees, foundation r (a) Name and address	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
ATO	and Contractors List all officers, directors, trustees, foundation r (a) Name and address	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
ATC	and Contractors List all officers, directors, trustees, foundation r (a) Name and address	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
ĀTC	and Contractors List all officers, directors, trustees, foundation r (a) Name and address	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
ATC	and Contractors List all officers, directors, trustees, foundation r (a) Name and address	nanagers and thei (b) Title, and average hours per week	r compensation (see	(d) Contributions to employee benefit plans	(e) Expens	
ATC	and Contractors List all officers, directors, trustees, foundation r (a) Name and address H 7  Compensation of five highest-paid employees	managers and thei  (b) Title, and average hours per week devoted to position	r compensation (see (c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	(
	and Contractors List all officers, directors, trustees, foundation r (a) Name and address H 7	(other than thos	r compensation (see (c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address H 7  Compensation of five highest-paid employees	(b) Title, and average hours per week	r compensation (see (c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average (c) Title, and average (devoted to position)	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter
2 (a	and Contractors List all officers, directors, trustees, foundation r (a) Name and address  H 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, enter

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	yees,
3 Five h	ighest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	tation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A		- ''
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	L
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
	ram-related investments. See instructions	
3 NONE		
Total Add Is	nes 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc,		
	purposes		
а	Average monthly fair market value of securities	1a	2,434,631.
b	Average of monthly cash balances	1b	183,806.
C	Fair market value of all other assets (see instructions)	1c	48,493.
d	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and	1d	2,666,930.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Cubbanat line Of some line Ad	3	2,666,930.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	40,004.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,626,926.
6	Minimum investment return. Enter 5% of line 5	6	131,346.
Par		dations	
1	Minimum investment return from Part X, line 6	1	131,346.
2 a	Tax on investment income for 2013 from Part VI, line 5		
b		1	
С	Add lines 2a and 2b	2c	611.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	130,735.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	130,735.
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	130,735.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	_	77 700
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	77,720.
b	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2			
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	_	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	77,720.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
•	Enter 1% of Part I, line 27b (see instructions)	5	611.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	77,109.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	ilculating	whether the foundation

Form **990-PF** (2013)

Page 9

Pa	rt XIII Undistributed Income (see instru	uctions)			
	•	(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
	line 7				130,735.
2	Undistributed income, if any, as of the end of 2013				
а	Enter amount for 2012 only				
b	Total for pnor years 20 11 ,20 10 ,20 09				
3	Excess distributions carryover, if any, to 2013				
а	From 2008				
	70 737				
С	From 2010 41,974.				
d	From 2010 41,974. From 2011 8,476.				
	From 2012 10,379.	_			
	Total of lines 3a through e	131,566.			
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$ 77,720.			-	
а	Applied to 2012, but not more than line 2a				
	Applied to undistributed income of prior years				
~	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				
Ŭ	required - see instructions)				
d	Applied to 2013 distributable amount				77,720.
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013	53,015.			53,015.
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	78,551.			
b	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				
е	Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2013 Subtract lines				
•	4d and 5 from line 1 This amount must be				
	distributed in 2014				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.	70 551			
	Subtract lines 7 and 8 from line 6a	78,551.			
	Analysis of line 9				
	Excess from 2009 17,722.				
	Excess from 2010 41, 974.  Excess from 2011 8, 476.		1		
			1		
	Excess from 2012 10,379.		}		
<u>e</u>	Excess from 2013			· · · · · · · · · · · · · · · · · · ·	<u>L.</u> .

Form 990-PF (2013)

Complementary Information /		· <del></del>		
Part XV Supplementary Information (				
3 Grants and Contributions Paid Duri	ng the Year or Appi		Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIDUION	
a Paid during the year				
_				
ATCH 8				
			Ì	
•				
	:			
				ł
A				
Total	<u></u>	<del></del>		77,720.
b Approved for future payment				
				-
		'		
İ	,			
}				
Total		l	<u> </u>	
Total		<u></u>	<u> ▶ 3b</u>	<u> </u>

er gross a	amounts unless otherwise indicated	Unrel	ated business income	Excluded by	section 512, 513, or 514	(e)
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•						(Occ mondations)
е		<u> </u>				
f						· ·
g Fees a	and contracts from government agencies					
Members	ship dues and assessments					
Interest on	n savings and temporary cash investments					<del></del>
	s and interest from securities	ļ		14	91,708.	·
	al income or (loss) from real estate					· · · · · · · · · · · · · · · · · · ·
	financed property			_		
	ebt-financed property					
	income or (loss) from personal property			14	3,103.	·
	restment income			18	-20,841.	
•	oss) from sales of assets other than inventory	-		10	20,041.	<del></del>
	me or (loss) from special events					
	ofit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·
_	renue a					
	· · · · · · · · · · · · · · · · · · ·					
_	<del></del>					
d						
d	· · · · · · · · · · · · · · · · · · ·				73,970.	
d e Subtotal	Add columns (b), (d), and (e)	•			73,970.	73.97
e Subtotal Total. Add	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)		•			73,97
e Subtotal Total. Add	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calcu	ulations) to the Ac	complishment of E	xempt Purp	oses	
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde worksheart XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	ed importantly to
de Subtotal Total. Adde e workshe Irt XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
d eSubtotal Total. Adde workshe Irt XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	ed importantly to
de Subtotal Total. Adde e workshe Irt XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde worksheart XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	ed importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to
e Subtotal Total. Adde workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribut	red importantly to

Part XVII	Information Regarding	Transfers To and Transactions and	<b>Relationships With Noncharitable</b>
	<b>Exempt Organizations</b>		•

	in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							Yes	No
		·	_	noncharitable exempt orga					-
							1a(1)		X
							1a(2)		X
		transactions							X
(1) Sales of assets to a noncharitable exempt organization							1b(1)		X
	(2) Pui (3) Ro	ntal of facilities leave	unment or other as	e exempt organization			1b(2)		- <u>x</u>
	(3) NO (4) Re	imbursement arrand	ipment, or other as	ssets			1b(3) 1b(4)		X
	(5) Loa	ans or loan quarante	es				1b(5)		Х
	(6) Per	rformance of service	es or membership	or fundraising solicitations			1b(6)		Х
				other assets, or paid emplo			1c		X
				complete the following s			the f	aır m	arket
	value d	of the goods, other	assets, or service	s given by the reporting for	oundation If the foun	dation received less	than f	air m	arket
	value ı	n any transaction o	r sharing arrange	ment, show in column (d)	the value of the good	ls, other assets, or se	ervices	rece	eved
(a) Lir	ne no	(b) Amount involved	(c) Name of non	charitable exempt organization	<del></del>	sfers, transactions, and shan	пд аптаг	igemen	its
		N/A			N/A				
						···			
		<u> </u>	<del>                                     </del>		<del>                                     </del>				
		<del></del>		•					
				<del></del>					
				<del>-</del>					
	describ	ped in section 501(c)," complete the follo	of the Code (otherwing schedule	ated with, or related to, or er than section 501(c)(3)) or				s X	 ] No
		(a) Name of organizatio	n	(b) Type of organization		(c) Description of relationsh	nip		
				<del></del>					
-							• • • • • • • • • • • • • • • • • • • •		
			•						
Sign	correc			this return, including accompanying sayer) is based on all information of which		May the IRS	discuss	this	retum
Here	Sign	ature of officer or trustee	Voicher	Date	Title	with the pre (see instructions	ि	Yes	below No
Daid Daid	_	Print/Type preparer's na	_	Preparers signature	Date	Clieck     III	TIN		
Paid		ERIC H &	BAMPE	Sign	18811 Paris	self-employed F	0141	357	1
Prep			RLIN, RAMOS			Firm's EIN ▶ 52-13	6774	9	
Use	Only	1	.200 ROCKVILI						-
		RCRC	CKVILLE, MI	)	20852	Phone no 301.58			
						For	n 990∙	-PF (	2013)

FORM 990-PF - PART IV

Kind of P		INS AND LO		cription		P Or	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adi basis	ט	Gain or (loss)	
		2000 WEYERH		COM		Р	VAR	07/23/201
58,754.		55,740.	PE: SECURI	TIES			3,014.	
		1000 IL TOO PROPERTY TY				Р	02/11/2008	VAR
78,303.		49,840.	PE: SECURI	1165			28,463.	
		250 UNITED PROPERTY TY				Р	12/22/2004	10/11/201
25,798.		13,019.	II. Dicour	1110			12,779.	
		300 3M CO PROPERTY TY	PE: SECURI	TIES		Р	12/22/2004	10/11/201
35,259.		24,258.					11,001.	
		2600 JP MOR PROPERTY TY		TIES		Р	04/29/2010	11/21/201
44,887.		39,554.					5,333.	
		200 IBM PROPERTY TY	PE: SECURI	TIES		Р	02/01/2000	01/29/201
36,091.		22,666.					13,425.	
		499 KRAFT F PROPERTY TY				P	10/02/2012	01/29/201
26,459.		16,438.					10,021.	
		100 LOCKHEE PROPERTY TY				P	12/21/2012	01/29/201
14,863.		9,076.					5,787.	
		500 METLIFE PROPERTY TY	PE: SECURI	ries		P	04/25/2012	01/29/201
24,869.		17,633.					7,236.	
		250 UNITED PROPERTY TY				P	12/22/2004	01/29/201
28,192.		13,019.					15,173.	
70,004		2000 BROOKF PROPERTY TY				P	12/31/2013	04/21/201
78,984.		76,687.	NAMETRI UCI	DINGS II.S			2,297.	04/05/001
105,445.		8971 KKR FII PROPERTY TY				צ	VAR	04/25/201
103,445.		100,818.					4,627.	

FORM 990-PF - PART IV

Gross sale price less expenses of sale	Deprectation allowed/ allowable	Cost or	T CAN'		T	الال	acquired	
		other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		REALTY INCO	ME CORP			Р		02/20/20
		PROPERTY TY	PE: SECURI	ries -			-141.	
		4000 SUNTRU				D	VAR	VAR
147,788.		295,069.	TE. BECOKI	TIES			-147,281.	
		TENNESSEE S' PROPERTY TY		ries		Р	VAR	07/01/20
5,000.		4,911.					89.	
,		PA HSG 5.75		ries		Р		07/10/20
5,000.		4,725.	m F 050				275.	00/01/00
5,000.		TENNESSEE S' PROPERTY TY 4,911.		TIES		P	VAR 89.	08/01/20
3,000.		TENNESSEE S	Т 5.25%			P	VAR	10/01/20
5,000.	-	PROPERTY TY 4,911.		TIES			89.	20,02,20
		TENNESSEE S				P	VAR	04/01/20
5,000.		PROPERTY TY: 4,911.	PE: SECURII	TIES			89.	
		KKR K-1 ST (				P	VAR	VAR
489.							489.	
		KKR K-1 LT ( PROPERTY TY				Р	VAR	VAR
2,759.							2,759.	
22		KKR & CO. K-				P	VAR	VAR
33.		KKR & CO. K-	-1 IT CADIT	DI CAINS		D	33. VAR	VAR
1,502.		PROPERTY TY				F	1,502.	VAL
,, 2 3 2 1		THE CARLYLE	GROUP K-1	LT CAPITAL	GAINS	P	VAR	VAR
2,011.		PROPERTY TY	PE: SECURIT	CIES			2,011.	
TAL GAIN(L	oss)							
000								

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

ATTACHMENT 1

NET INVESTMENT INCOME	70,870. 914. 419. 16,807. 2,698.	91,708.
REVENUE AND EXPENSES PER BOOKS	70,870. 914. 419. 16,807. 2,698.	91,708.
		TOTAL
DESCRIPTION	M&T BANK FROM KKR & CO K-1 FROM CARLYLE GROUP K-1 FROM KKR K-1 FROM BROOKFIELD K-1	

# FORM 990PF, PART I - OTHER INCOME

DESCR	DESCRIPTION	
FROM F	KKR FINANCIAL HOLDINGS K-1	
FROM F	KKR & CO K-1	
FROM (	CARLYLE GROUP K-1	

TOTALS

NET	INVESTMENT	1NCOME 2,983.	S	115.	
REVENUE AND	ഥ	2, 983.	5.	115.	

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FYDFNCF	
TNTFDFCF	
T TAM	
A PPT T	

ATTACHMENT 3

NET INVESTMENT INCOME	5,453.
REVENUE AND EXPENSES PER BOOKS	5,453.
	(FROM K-1)
DESCRIPTION	INVESTMENT INTEREST (FROM K-1)

5,453.

5,453.

TOTALS

ATTACHMENT 4

NET INVESTMENT INCOME	6.
REVENUE AND EXPENSES PER BOOKS	2,086. 6. 1,271.
DESCRIPTION	TAXES FROM KKR K-1-FOREIGN TAXES PD OTHER FOREIGN TAXES PD

INCO		1	
ER BOOKS	2,086.	1,271.	3,363.

TOTALS

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5	
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EXPENSES AND

NET INVESTMENT

INCOME 17,041. 9,964.

PER BOOKS 17,041. 9,964. 281.

INVESTMENT FEES
PORTFOLIO EXPENSES (FROM K-1)
OTHER EXPENSE

DESCRIPTION

27,005.

TOTALS

27,286.

820185-108

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

INVESTMENT IN PARTNERSHIPS

TOTALS

ENDING BOOK VALUE

ATTACHMENT 6

107,209.

107,209.

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

NAME AND ADDRESS

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

ATTACHMENT

ELEANOR T. ROSENFELD

4445 WILLARD AVENUE, SUITE 700 CHEVY CHASE, MD 20815

PRESIDENT

FRANCES R. RUMFORD SAME AS ABOVE

VICE PRESIDENT

GAIL R. STECKLER SAME AS ABOVE

TREASURER

ROBERT J.T. ROSENFELD SAME AS ABOVE

SECRETARY

ATTACHMENT 8

RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE TEXTILE MUSEUM 2320 S STREET, N.W. WASHINGTON, DC 20008-4088	NONE	EDUCATIONAL 6 TRAINING PROGRAM	25,000.
HAYSTACK MOUNTAIN SCHOOL OF CRAFTS P.O. BOX 518 DEER ISLE, ME 04627	NONE	EDUCATIONAL & TRAINING PROGRAM	1,000.
ARCHBISHOP CARROLL HIGH SCHOOL 4300 HAREWOOD ROAD, NE WASHINGTON, DC 20017	NONE	EDUCATION 6 TRAINING PROGRAMS	1,000.
HOUSE OF RUTH 5 THOMAS CIRCLE, NW #4 WASHINGTON, DC 20005	NONE	CIVIC & COMMUNITY DEVELOPMENT	1,000.
LEVINE SCHOOL OF MUSIC 2801 UPTON STREET, NW WASHINGTON, DC 20008	NONE	EDUCATION & TRAINING PROGRAMS	14,720.
OPERA HOUSE ARTS P.O. BOX 56 STONINGTON, ME 04681	NONE	EDUCATION & TRAINING PROGRAMS	1,000.

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820185-108

# RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SIDWELL FRIENDS SCHOOL 3825 WISCONSIN AVENUE, NW WASHINGTON, DC 20016	NONE	EDUCATION & TRAINING PROGRAMS	3,000.
STONE RIDGE SCHOOL 9101 ROCKVILLE PIKE BETHESDA, MD 20814	NONE	EDUCATION & TRAINING PROGRAMS	1,500.
BELL MULTICULTURAL INTERNSHIP PROGRAM 3145 HIATT PLACE, N.W. WASHINGTON, DC 20010	NONE	EDUCATIONAL AND TRAINING PROGRAM	1,000.
BRIGHT BEGININGS 128 M STREET, N.W. WASHINGTON, DC 20001	NONE	PUBLIC PROGRAM	500.
HEALTHY BABIES PROJECT, INC. 801 17TH STREET, NE WASHINGTON, DC 20002	NONE	COMMUNITY PROGRAM	5,000.
HORTON'S KIDS 110 MARYLAND AVENUE, NE SUITE 207 WASHINGTON, DC 20002	NONE	EDUCATIONAL & COMMUNITY DEVELOPMENT	500.

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FORM 990PF, PART XV	ŀ
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ATTACHMENT 8 (CONT'D)

RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOUSE OF MERCY 2000 ROSEMOUNT AVENUE, N.W. WASHINGTON, DC 20010	NONE	CIVIC & COMMUNITY DEVELOPMENT	500.
MARTHA'S TABLE 2114 14TH STREET, N.W. WASHINGTON, DC 20009	NONE	COMMUNITY PROGRAM	1,000.
NEW COMMUNITY FOUNDATION 4009 CORDELL AVENUE 2ND FLOOR BETHESDA, MD	NONE	CIVIC & COMMUNITY DEVELOPMENT	5,000.
SEND A KID TO CAMP P.O. BOX 96237 WASHINGTON, DC 20090-6237	NONE	CIVIC & COMMUNITY PROGRAM	500.
WASHINGTON AREA WOMEN'S FOUNDATION 1411 K. STREET, N.W. SUITE 800 WASHINGTON, DC 2000S	NONE	CIVIC & COMMUNITY DEVELOPMENT	1,000.
CHILDREN'S HOSPITAL FOUNDATION 111 MICHIGAN AVE, NW WASHINGTON, DC 20010	NONE	PUBLIC HEALTH PROGRAM	2,500.

820185-108

ATTACHMENT 8 (CONT'D)

500.

AMOUNT

820185-108

PURPOSE OF GRANT OR CONTRIBUTION	EDUCATION & TRAINING PROGRAM	CIVIC & COMMUNITY DEVELOPMENT	EDUCATION & TRAINING PROGRAM	EDUCATION & TRAINING PROGRAM	EDUCATION & TRAINING PROGRAM	CIVIC & COMMUNITY DEVELOPMENT
AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
RECIPIENT NAME AND ADDRESS	SHERIDAN SCHOOL 4400 36TH STREET, NW WASHINGTON, DC 20008	D.C. PREP 707 EDGEWOOD ST NE WASHINGTON, DC 20017	DENISON UNIVERSITY OFFICE OF THE ANNUAL FUND GRANVILLE, OH 43023-0716	MIDDLEBURY COLLEGE GIFT ADMINISTRATION 5 COURT STREET MIDDLEBURY, VT 05753-6014	MUSEUM OF ARTS AND DESIGN 40 WEST 53RD STREET NEW YORK, NY 10019	PHEO PARA ALLIANCE 9905 BENT CROSS DRIVE POTOWAC, MD 20854

1,000.

1,000.

5,000.

1,000.

1,500.

•	(CONT, D)
	TTACHMENT 8 (

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
RENWICK ALLIANCE 4405 EAST WEST HIGHWAY SUITE 510 BETHESDA, MD 20814	NONE	CIVIC & COMMUNIY DEVELOPMENT	1,000.
VANDERBILT UNIVERSITY OFFICE OF ANNUAL GIVING 2301 VANDERBILT PLACE	NONE	EDUCATION & TRAINING PROGRAM	1,000.
NASHVILLE, TN 37240			

77,720	
IS PAID	
CONTRIBUTIONS	
TOTAL	

820185-108

ATTACHMENT 8 PAGE 29

### SCHEDULE D (Form 1041)

**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 2013

Internal Revenue Service

Name of estate or trust

Department of the Treasury

FOUNDATION, INC.

THE ROSENFELD, RUMFORD, STECKLER FAMILY

Employer identification number 52-2204870

Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I See instructions for how to figure the amounts to enter on (g) (h) Gain or (loss) Adjustments to gain or loss from the lines below Subtract column (e) Proceeds from column (d) and This form may be easier to complete if you round off cents Form(s) 8949, Part I, combine the result with (sales pnce) (or other basis) line 2, column (g) column (g) to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 78,984 76,687. 2,297. Totals for all transactions reported on Form(s) 8949 141. -141. Totals for all transactions reported on Form(s) 8949 522 522. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824. 4 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . . . . 5 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2012 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and on 2,678. Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) the lines below Adjustments Subtract column (e) (d) Proceeds to gain or loss from from column (d) and Form(s) 8949, Part II, This form may be easier to complete if you round off cents combine the result with (sales pnce) (or other basis) line 2, column (g) column (g) to whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 503,920. 386,430. 117,490.

Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on

154,060.

Schedule D (Form 1041) 2013

15

295,069

-23.519.

-141,009.

	rt     Summary of Parts I and II	<del></del>	1 (4) 5	<u>, , 1</u>	45. =		Page .
, a	Caution: Read the instructions before completing this	part		eficiaries'   instr.)	(2) Es		(3) Total
17	Net short-term gain or (loss)			<del></del>			2,678.
18	Net long-term gain or (loss):				-		
а	Total for year	18a					-23,519.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b					
С	: 28% rate gain						
19			<u> </u>				-20,841.
Note gains	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line s, go to Part V, and <b>do not</b> complete Part IV If line 19, column (3), is a	4 (or Fo	rm 990-T, s, complete	Part I, line 4 Part IV and	a). If lines I the <b>Capi</b>	18a and tal Loss	19, column (2), are no Carryover Worksheet, a
nece.	rt IV Capital Loss Limitation						
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T	Part I li	ne 4c ıfat	nust) the sm	aller of		
	The loss on line 19, column (3) or b \$3,000					20 (	3,000.
Note Loss	The loss on line 19, column (3) or b \$3,000 e: If the loss on line 19, column (3), is more than \$3,000, or if Form 104 Carryover Worksheet in the instructions to figure your capital loss carryover	1, page	1, line 22	or Form 990	∟T, line 34	), is a lo	ss, complete the Capita
Pai	rt V Tax Computation Using Maximum Capital Gains Ra	tes					
Form	m 1041 filers. Complete this part only if both lines 18a and 19 in c	olumn (	2) are gai	ns, or an ar	nount is	entered	n Part I or Part II an
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is m						
	ition: Skip this part and complete the <b>Schedule D Tax Worksheet</b> in the other line 18b, col. (2) or line 18c, col. (2) is more than zero, or	e instruc	ctions if				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero	,					
	m 990-T trusts. Complete this part only if both lines 18a and 19		ins or all	alified divid	ends are	include	d in income in Part
of F	form 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	rt and c	omplete t	he Schedul	e D Tax \	Norksh	et in the instruction
	ther line 18b, col (2) or line 18c, col (2) is more than zero		•				
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line	34)	21				· · · · · · · · · · · · · · · · · · ·
22	Enter the smaller of line 18a or 19 in column (2)			·· <del>·</del>		1	
	but not less than zero						
23	Enter the estate's or trust's qualified dividends						
	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		<b>-</b>				
	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			1 1	
28	Enter the smaller of the amount on line 21 or \$2,450		. 28			1 1	
29	Enter the smaller of the amount on line 27 or line 28		. 29			]	
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount	s taxed	at 0%		🕨	30	
31	Enter the smaller of line 21 or line 26						
32	Subtract line 30 from line 26		. 32				
33	Enter the smaller of line 21 or \$11,950					<u> </u>	
34	Add lines 27 and 30		34				
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%				▶	37	
38	Enter the amount from line 31						
39	Add lines 30 and 36		39				
40	Subtract line 39 from line 38 If zero or less, enter -0-		-				
41	Multiply line 40 by 20%				🕨	41	
42	Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule fo		1 1				
	and Trusts (see the Schedule G instructions in the instructions for Form 104		·				
43	Add lines 37, 41, and 42				•		
44	Figure the tax on the amount on line 21. Use the 2013 Tax Rate Schedule to	r Estates				t I	

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

Schedule D (Form 1041) 2013

### 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

Sequence No

Department of the Treasury Internal Revenue Service Name(s) shown on return

THE ROSENFELD, RUMFORD, STECKLER FAMILY

Social security number or taxpayer identification number 52-2204870

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

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) You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-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 (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (g) (h) Gain or (loss) (e) enter a code in column (f) Cost or other basis See the (b) (a) See the separate instructions Date sold or Proceeds Description of property (Example 100 sh XYZ Co) Subtract column (e) Date acquired disposed (sales price) Note below and from column (d) and (Mo, day, yr) (Mo, day, yr) (see instructions) see Column (e) (g) combine the result Code(s) from Amount of in the separate with column (a) instructions adjustment instructions

	1						l
2000 BROOKFIELD	10 /21 /2012	04/01/0014					
INFRASTRUCTURE	12/31/2013	04/21/2014	78,984.	76,687.			2,297
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		1			}	}	
	<u> </u>	•				<u> </u>	
2 Totals. Add the amounts in colu	ımns (d), (e), (g), a	ind (h) (subtr-				-	
act negative amounts) Enter e	ach total here an	d include on					
your Schedule D, line 1b (if Box	A above is check	ed), line 2 (if	70.00:	76 665			
Box B above is checked) or line	3 (if Box C above	e is checked)	78,984.	76,687.	1	1	2.297.

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

## Form 8949

### Sales and Other Dispositions of Capital Assets

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

20 **13** 

Attachment Sequence No 1

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

THE ROSENFELD, RUMFORD, STECKLER FAMILY

Social security number or taxpayer identification number

52-2204870

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)

You must check Box A, B, or C be							
complete a separate Form 8949,			•			ions than will fit o	on this page
for one or more of the boxes, con  (A) Short-term transactions rep	-	•		•		`	
X (B) Short-term transactions rep		•	- ,	· ·		)	
(C) Short-term transactions not		•	=	reported to the in	10		
(a) Description of property	(b) Date acquired	(c)	(d) Proceeds	(e) Cost or other basis See the	If you enter an a enter a cod	iny, to gain or loss. mount in column (g), le in column (f) rate instructions.	(h) Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co )	(Mo , day, yr )	disposed (Mo , day, yr )	(sales pnce) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
REALTY INCOME CORP	VAR	02/20/2014		141.			-141
					-	<del>-</del>	
			<del> </del>				
			·				
2 Totals. Add the amounts in column act negative amounts) Enter each your Schedule D, line 1b (if Box A Box B above is checked), or line 3	n total here and above is check	d include on ed), line 2 (if		141.			-141.

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

### Sales and Other Dispositions of Capital Assets

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

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return THE ROSENFELD, RUMFORD, STECKLER FAMILY Social security number or taxpayer identification number 52-2204870

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

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 a Schedule D, line 1a,		,		•		,	ons).
com	must check Box A, B, or C be a plete a separate Form 8949, one or more of the boxes, com (A) Short-term transactions rep (B) Short-term transactions not	page 1, for eaplete as man orted on Form( orted on Form(s	ach applicab ny forms with s) 1099-B show s) 1099-B show	le box If you ha the same box ch wing basis was repo ving basis was not	ve more short- necked as you r orted to the IRS (s	term transac need see <b>Note</b> above	tions than will fit o	•
1	(a)  Description of property  (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo.day.yr)	(d) Proceeds (sales pnce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e)	If you enter an a	any, to gain or loss amount in column (g), de in column (f) arate instructions.	(h) Gain or (loss). Subtract column (e) an

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	enter a co- See the sepa	de in column (f) irate instructions.	(h) Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed (Mo , day, yr )	(sales pnce) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
KKR K-1 ST CAPITAL							
GAINS	VAR	VAR	489.				489
KKR & CO. K-1 ST							
CAPITAL GAINS	VAR	VAR	33.				33.
	.,						
							<del></del>
·				<del></del>			
							-
							-
				-			
				–	,		
2 Totals. Add the amounts in column act negative amounts) Enter early your Schedule D, line 1b (if Box A Box B above is checked), or line 3	ch total here an A above is check	d include on ed), line 2 (if	522.				522.

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.

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)
THE ROSENFELD, RUMFORD, STECKLER FAMILY

Social security number or taxpayer identification number 52-2204870

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.

- X (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

(F) Long-term transactions not reported to you on Form 1099-B

(a)  Description of property (Example 100 sh XYZ Co)	(b) Date acquired	(c) Date sold or disposed (Mo , day, yr )	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) and	
(Example 100 SII X12 CO)	(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)
2000 WEYERHAEUSER CO COM	VAR	07/23/2013	58,754.	55,740.			3,014.
1000 IL TOOL WKS INC COM	02/11/2008	VAR	78,303.	49,840.			28,463.
250 UNITED TECHNOLOGIE CORP COM	12/22/2004	10/11/2013	25,798.	13,019.			12,779.
300 3M CO	12/22/2004	10/11/2013	35,259.	24,258.			11,001.
2600 JP MORGAN CHASE	04/29/2010	11/21/2013	44,887.	39,554.			5,333.
200 IBM	02/01/2000	01/29/2014	36,091.	22,666.			13,425.
499 KRAFT FOODS GROUP INC	10/02/2012	01/29/2014	26,459.	16,438.			10,021.
100 LOCKHEED MARTIN CORP	12/21/2012	01/29/2014	14,863.	9,076.			5,787.
500 METLIFE	04/25/2012	01/29/2014	24,869.	17,633.			7,236.
250 UNITED TECHNOLOGIE CORP COM	12/22/2004	01/29/2014	28,192.	13,019.			15,173.
8971 KKR FINANCIAL HOLDINGS LLC		04/25/2014	105,445.	100,818.			4,627.
TENNESSEE ST 5.25%	VAR	07/01/2013	5,000.	4,911.			89.
PA HSG 5.75%	VAR	07/10/2013	5,000.	4,725.			275.
TENNESSEE ST 5.25%	VAR	08/01/2013	5,000.	4,911.		·	89.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			503,920	386,430.			117,490.

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

Attachment Sequence No 12A

Page 2

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)

Social security number or taxpayer identification number 52-2204870

THE ROSENFELD, RUMFORD, STECKLER FAMILY

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

- X (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
  - (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo , day, yr )	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)					(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
TENNESSEE ST 5.25%	VAR	10/01/2013	5,000.	4,911.			89
TENNESSEE ST 5.25%	VAR	04/01/2014	5,000.	4,911.		-	89
						•	
		,					
							-14
2 Totals. Add the amounts in co (subtract negative amounts) I include on your Schedule D, Iii checked), Iine 9 (if Box E abov (if Box F above is checked) ▶	Enter each tota ne 8b (if Box D	I here and above is					

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

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)
THE ROSENFELD, RUMFORD, STECKLER FAMILY

Social security number or taxpayer identification number 52-2204870

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
- (F) Long-term transactions not reported to you on Form 1099-B

(a)  Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo , day, yr )	(d) Proceeds (sales pnce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if a If you enter an a enter a coo See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and	
					(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
4000 SUNTRUST BANKS INC	VAR	VAR	147,788.	295,069.			-147,281.
KKR K-1 LT CAPITAL GAINS	VAR	VAR	2,759.				2,759.
KKR & CO. K-1 LT CAPITAL GAINS	VAR	VAR	1,502.				1,502.
THE CARLYLE GROUP K-1 LT CAPITAL GAINS	VAR	VAR	2,011.				2,011.
					-		
				:			
				·			
	:		,		<u>'</u>		
	_						
			<del>-</del>				
						<del></del>	
2 Totals. Add the amounts in column (subtract negative amounts) Er	nter each total	here and					
include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			154,060.	295,069.			-141,009.

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

### Form **8868**

(Rev January 2014)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

•	emal Revenue Service ► Information about Form 8868 and its instructions is at www.irs.gov/form8868.									
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box										
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)										
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868										
a corporatioi	n required t	You can electronically file Form to file Form 990-T), or an addition	nal (not au	tomatic) 3-month exter	ision of time. You can	elec	tronica	lly file Form		
8868 to req	3868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information									
Return for	Transfers A	ssociated With Certain Persona	l Benefit	Contracts, which mus	t be sent to the IRS	ın	paper 1	format (see		
		details on the electronic filing of th				nties	& Non	protits		
		Month Extension of Time. On								
Part I only .		o file Form 990-T and requesting						▶□		
		ncluding 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must use i	Form 7004 to request ar	า ext	ension (	of time		
to file incom	T			<del></del>	Enter filer's identifyi	ng nu	ımber, se	e instructions		
Type or		empt organization or other filer, see in			Employer identification n	number (EIN) or				
print	l .	SENFELD, RUMFORD, STECH	KLER FAI	MILY						
'		TION, INC.			52-22048	370				
File by the due date for		reet, and room or suite no. If a P.O. box	x, see instruc	ctions	Social security number (S	SSN)				
īling your		ILLARD AVENUE								
eturn See nstructions	I -	or post office, state, and ZIP code. For	a foreign ad	dress, see instructions						
	CHEVY (	CHASE, MD 20815								
Enter the Re	turn code f	or the return that this application i	is for (file a	separate application fo	or each return)			. 04		
Application			Return	Application				Return		
s For			Code	Is For				Code		
Form 990 or	Form 990-I	EZ	01	Form 990-T (corporat	poration)			07		
Form 990-BL			02	Form 1041-A				08		
Form 4720 (			03	Form 4720 (other tha	n individual)			09		
Form 990-PF			04	Form 5227				10		
		) or 408(a) trust)	05	Form 6069				11		
Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above)			06	Form 8870				12		
<u> </u>	(tract other	than above)		1 01111 007 0	······································			12		
Telephone If the orga If this is fo for the whole Ist with the I reques	e No Inization do ra Group Regroup, che names and st an autom	care of THE FOUNDATION,  301 718-1600  es not have an office or place of beturn, enter the organization's foundation in the celebration of the cel	Edusiness in ur digit Gro it is for pa on is for poration re	the United States, checup Exemption Number ( rt of the group, check t	GEN) his box  I-T) extension of time	 	 _ If th and att 			
	-	n's return for.								
▶ calendar year 20 or         ▼ X tax year beginning 07/01 , 2013 , and ending 06/30 , 2014										
	tax year be	ginning	1_, 20 13	, and ending	06/30_,	20_	14			
	-	red in line 1 is for less than 12 mo	onths, chec	k reason Initial re	eturn Fınal retur	'n				
			∩-T 472∩	or 6069 enter the	tentative tax less any	$\overline{}$	ſ			
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  3a \$								926.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$								006		
						3ь	\$	926.		
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions										
Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8							\$	0		
	are going to	make an electronic funds withdrawal	(direct debi	t) with this Form 8868, se	e Form 8453-EO and Form	n 887	79-EO fo	r payment		
nstructions										
For Privacy Act and Paperwork Reduction Act Notice see instructions								/Pay 1-2014\		