

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



SHOW SEEMINGS STORY

Form 990-PF

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

| FOI | care | ndar year 2014 or tax year beginning JUL | 1 1, 2014 | , and ending | JUN 30, 201 | <u> </u> |
|------------------------------------|-------------|---|------------------------------|---------------------|---|--|
| Na | ame o | f foundation | | | A Employer identification | n number |
| | | OY FAMILY FOUNDATION, I | | | | |
| | | STANLEY MARTIN COMPANI | | | 20-314278 | 7 |
| | | and street (or P O box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| _= | <u> 111</u> | 11 SUNSET HILLS ROAD | | 200 | 703-964-5 | 000 |
| Cı | ty or t | town, state or province, country, and ZIP or foreign p | ostal code | | C If exemption application is | pending, check here |
| | RES | TON, VA 20190 | - <u></u> | | | |
| G | Chec | k all that apply: Initial return | Initial return of a fo | rmer public charity | D 1 Foreign organization | ns, check here |
| | | Final return | Amended return | | 2 | |
| | | Address change | Name change | | Foreign organizations mechanisms and attach of the control of | computation |
| H_ | Chec | k type of organization: X Section 501(c)(3) ex | rempt private foundation | | E If private foundation st | atus was terminated |
| | | | Other taxable private founda | tion | under section 507(b)(| 1)(A), check here 🕨 🗔 |
| 1 F | air m | arket value of all assets at end of year J Accounti | | Accrual | F If the foundation is in a | 60-month termination |
| (1 | rom | Part II, col. (c), line 16) | ther (specify) | | under section 507(b)(| 1)(B), check here \blacktriangleright |
| | <u>\$</u> | 1,846,179. (Part I, colu | mn (d) must be on cash b | pasis) | | |
| P | art | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable purposes |
| | | necessarily equal the amounts in column (a) | expenses per books | income | income | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 100,183. | | N/A | |
| | 2 | Check If the foundation is not required to attach Sch. B | | | | |
| | 3 | Interest on savings and temporary cash investments | 21. | 21. | | STATEMENT 1 |
| | 4 | Dividends and interest from securities | 35,999. | 35,999. | | STATEMENT 2 |
| | 5 a | Gross rents | | | | |
| | b | Net rental income or (loss) | | | | |
| 4 | 6a | Net gain or (loss) from sale of assets not on line 10 | 45,470. | | | |
| Ď | l t | Gross sales price for all | | | | <u> </u> |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | 45,470. | | |
| | 8 | Net short-term capital gain | | | | |
| | 9 | Income modifications | | | | |
| | 10a | Gross cales less returns | | | | |
| | ŀ | Less Cost of goods sold | | | | |
| | | Gross profit or (loss) | | | | |
| | 11 | Othorusonno | | - | | |
| | 12 | Other income Total, Add lines O throligis 1,12015 | 181,673. | 81,490. | | |
| _ | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | | | |
| | 15 | Pension plans, employee benefits | | | | |
| ses | 1 | Legal fees | | | | |
| ens | | Accounting fees STMT 3 | 4,500. | 2,250. | | 2,250. |
| Operating and Administrative Expen | \ | Other professional fees | 4,500. | 4,430. | | 2,250. |
| ē | 17 | Interest | | | | |
| ativ | 18 | Taxes STMT 4 | 2,124. | 628. | | 0. |
| str | 19 | Depreciation and depletion | 2,124. | 020. | | |
| Ē | 20 | Occupancy | | | | |
| ρ | 20 | Travel, conferences, and meetings | | | | |
| þ | 21 | , , | | | | |
| ar | 22 | Printing and publications | 16 100 | 0 001 | | 0.001 |
| ting | 23 | Other expenses STMT 5 | 16,182. | 8,091. | | 8,091. |
| era | 24 | Total operating and administrative | 22 206 | 10 000 | | 10 241 |
| ŏ | | expenses. Add lines 13 through 23 | 22,806. | 10,969. | | 10,341. |
| _ | 25 | Contributions, gifts, grants paid | 133,950. | | | 133,950. |
| | 26 | Total expenses and disbursements. | 156 556 | 4 6 6 6 6 | | |
| | - | Add lines 24 and 25 | 156,756. | 10,969. | | 144,291. |
| | 27 | Subtract line 26 from line 12; | | ļ | | |
| | a | Excess of revenue over expenses and disbursements | 24,917. | | | ļ |
| | b | Net investment income (if negative, enter -0-) | | 70,521. | | |
| | | Adjusted net income (if negative, enter -0-) | | | N/A | <u> </u> |
| 4235 | (17 | | | | | 5 000 DE (00.4) |

| 00-PF (2014) C/O STANLEY MARTIN COMPA | NIES, INC. | | 3142787 Page |
|--|--|--|--|
| Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only | | | year (c) Fair Market Value |
| Cash - non-interest-bearing | (a) Book Value | (b) Book value | (0) |
| - | 62,426. | 110,877. | 110,877. |
| | ,, | | · • |
| Less; allowance for doubtful accounts ▶ | | | _ |
| Pledges receivable ► | | | |
| Less: allowance for doubtful accounts ▶ | | | |
| | | | |
| · · · · · · · · · · · · · · · · · · · | | | |
| | | | |
| | : | | |
| | | | |
| | - | | |
| _ · · · · · | | | |
| | 1,504,111. | 1,480,277. | 1,735,302. |
| · | | | |
| Investments - land, buildings, and equipment basis | | | |
| Less accumulated depreciation | | | |
| Investments - mortgage loans | | | |
| Investments - other | | | |
| Land, buildings, and equipment: basis ▶ | | | |
| Less accumulated depreciation | | | |
| , | | | <u> </u> |
| · | 1 566 537 | 1 501 154 | 1,846,179. |
| | 1,300,337. | 1,001,1040 | 1,040,170 |
| | | | |
| · · | | | |
| <u> </u> | | | |
| Mortgages and other notes payable | | | |
| Other liabilities (describe >) | | | |
| | | | |
| | 0. | 0. | |
| | | | |
| • | | | |
| [| | | |
| · · · | | - · · | |
| | | | |
| · | | | |
| • | 0. | 0. | |
| | 0. | 0. | |
| Retained earnings, accumulated income, endowment, or other funds | 1,566,537. | 1,591,154. | |
| Total net assets or fund balances | 1,566,537. | 1,591,154. | |
| | 1 566 535 | 1 501 154 | |
| | | 1,591,154. | |
| Analysis of Changes in Net Assets or Fund Ba | lances | | |
| | Less: allowance for doubtful accounts ► Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons Other notes and loans receivable Less: allowance for doubtful accounts ► Inventories for sale or use Prepaid expenses and deferred charges Investments - U.S. and state government obligations Investments - corporate stock STMT 6 Investments - corporate bonds Investments - torporate bonds Investments - mortgage loans Investments - other Land, buildings, and equipment basis Less accumulated depreciation Other assets (describe ► Total assets (to be completed by all filers - see the Instructions Also, see page 1, item I) Accounts payable and accrued expenses Grants payable Deferred revenue Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable Other liabilities (describe ► Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted Temporarily restricted Permanently restricted | Cash - non-interest-bearing Savings and temporary cash investments Accounts receivable | Blain Co She and Cash - non-interest-bearing |

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | | |
|---|---|---|------------|
| | (must agree with end-of-year figure reported on prior year's return) | 1 | 1,566,537. |
| 2 | Enter amount from Part I, line 27a | 2 | 24,917. |
| | Other increases not included in line 2 (itemize) | 3 | 0. |
| | Add lines 1, 2, and 3 | 4 | 1,591,454. |
| 5 | Decreases not included in line 2 (itemize) ► NON-DEDUCTIBLE CONTRIBUTION | 5 | 300. |
| - | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 1,591,154. |
| × | Total not deduce of tend balances at the original form | | |

C/O STANLEY MARTIN COMPANIES, INC.

| | Losses for Tax on Investme | | | | <u>0-3142/</u> | O / Tage o |
|--|---|---|--|---------------------|---------------------------------------|---------------------------------|
| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | | (b) How acquired P - Purchase D - Donation | (c) Date (mo., d | | (d) Date sold mo , day, yr.) |
| 1a | | | | | | |
| b SEE ATTACHED ST | PATEMENT | _ | | | | |
| С | | | | | | |
| <u>d</u> | | | | | | |
| (e) Gross sales price | | Cost or other basis is expense of sale | 1 | | ain or (loss) s (f) minus (g) | |
| a | | <u> </u> | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e 770,018. | | 724,54 | 8. | | | <u>45,470.</u> |
| Complete only for assets showing gai | n in column (h) and owned by the foundat | | | | Col. (h) gain minu | |
| (i) F.M V. as of 12/31/69 | | Excess of col (I) ver col. (J), if any | | Losses | not less than -0-) (from col. (h)) | 01 |
| a | | | | _ | | |
| b | | | | | | |
| <u>c</u> | | | | | | |
| d | | | | | | 45,470. |
| <u>e</u> | | | | _ | | 43,470. |
| 2 Capital gain net income or (net capital | loss) | ne 7 ine 7 | } 2 | | | 45,470. |
| Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colur | | | 3 | | | |
| If (loss), enter -0- in Part I, line 8 | Castian 4040(a) for Daduce | ad Tay on Nat | 3 | | N/A | |
| | er Section 4940(e) for Reduce | . | | come | | |
| For optional use by domestic private foun | idations subject to the section 4940(a) tax | on net investment in | come.) | | | |
| f section 4940(d)(2) applies, leave this pa | rt blank | | | | | |
| Mac the foundation liable for the section A | 942 tax on the distributable amount of any | , vear in the hace ner | ind2 | | | Yes X No |
| | ider section 4940(e) Do not complete this | | 100 | | | 1100 [[22] 110 |
| | column for each year; see the instructions | | ntries. | | | |
| (a) | (b) | | (c) | | (d) Distribution | ı ratıo |
| Base periód years Calendar year (or tax year beginning in) | Advisted avalifying digitalybutions | Net value of no | ncharitable-use assets | 3 | (col. (b) divided | by col. (c)) |
| 2013 | 334,259 | | 1,828,75 | | | .182780 |
| 2012 | 101,492 | | <u>1,358,35</u> | | | .074717 |
| 2011 | 65,720 | | 732,79 | | | .089684 |
| 2010 | 307,215 | | 701,789 | | | .437760 |
| 2009 | 120,010 | • | 345,692 | 2. | | .347159 |
| | | | | , | | 1.132100 |
| 2 Total of line 1, column (d) | - base resided in the total on line 2 by | E or by the number | of waars | 2 | | 1.132100 |
| the foundation has been in existence if | r base period - divide the total on line 2 by | 5, or by the number | OI years | 3 | | .226420 |
| the lonnoation has been in existence in | iess than 5 years | | | - | | <u> </u> |
| 4 Enter the net value of noncharitable-us | e assets for 2014 from Part X, line 5 | | | 4 | 1, | 787,634. |
| 5 Multiply line 4 by line 3 | | | | 5 | | 404,756. |
| 6 Enter 1% of net investment income (19 | % of Part I, line 27b) | | | _6_ | | 705. |
| 7 Add lines 5 and 6 | | | | 7 | | 405,461. |
| | YII lina A | | | 8 | | 144,291. |
| | r XII, line 4 7, check the box in Part VI, line 1b, and co | mplete that part usin | g a 1% tax rate. | 0 | | <u> </u> |
| See the Part VI instructions. | | | | | | |

ALLOY FAMILY FOUNDATION. INC.

| Form 990-PF (2014) C/O STANLEY MARTIN COMPANIE | | 20-3142 | | | Page 4 |
|---|---|-------------|-------|------------|----------------|
| Part VI Excise Tax Based on Investment Income (Section | 4940(a), 4940(b), 4940(e), or 49 | 948 - see i | nstru | ctio | าร) |
| 1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🗔 | | | | | |
| Date of ruling or determination letter; (attach copy of lette | | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check he | ere 🕨 🔛 and enter 1% | 1 | | 1,4 | <u> 10.</u> |
| of Part I, line 27b | | | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations er | | | | | _ |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of | only. Others enter -0-) | 2 | | | 0. |
| 3 Add lines 1 and 2 | | 3 | | <u>1,4</u> | |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations | · · · | 4 | | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 |)- | 5 | _ | 1,4 | 10. |
| 6 Credits/Payments: | | | | | |
| a 2014 estimated tax payments and 2013 overpayment credited to 2014 | 6a | | | | |
| b Exempt foreign organizations - tax withheld at source | 6b | | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c | | | | |
| d Backup withholding erroneously withheld | 6d | _ | | | ٥ |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | | | $\frac{0}{32}$ |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 | is attached | 8 | - | 1,4 | |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 9 | | <u> </u> | <u>42.</u> |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overp | I F | 10 | | | |
| Part VII-A Statements Regarding Activities | Refunded ▶ | 11 | | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or loc | al legislation or did it participate or intervene | ın | | Yes | No |
| 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) | 7 | 1b | | X |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activit | | | | | |
| distributed by the foundation in connection with the activities | | | | | |
| c Did the foundation file Form 1120-POL for this year? | | | 10 | | Х |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed dur | ing the year: | | | | |
| (1) On the foundation. ► \$ 0 . (2) On foundation ma | | | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political e | | | | | |
| managers.▶\$0. | | | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported t | o the IRS? | | 2 | | <u>X</u> |
| If "Yes," attach a detailed description of the activities | | | | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its gove | rning instrument, articles of incorporation, o | ī | | | |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the o | | | 3 | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during | the year? | | 4a | | <u>X</u> |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | N/A | 4b | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the | e year? | | 5_ | | X |
| If "Yes," attach the statement required by General Instruction T. | | | | | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satis | sfied either: | | | | |
| By language in the governing instrument, or | | | | | |
| By state legislation that effectively amends the governing instrument so that no ma | ndatory 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 | s," complete Part II, col. (c), and Part XV | | 7_ | X | |
| | | | | | |
| 8a Enter the states to which the foundation reports or with which it is registered (see ins | structions) $ ightharpoonup$ | | | | |
| MD | a the Atheren Consultant designates | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to | o the Attorney General (or designate) | | 0. | х | |
| of each state as required by General Instruction G? If "No," attach explanation | g of conting 4049(1)(2) or 4049(1)(5) for color | ndar | 8b | ^ | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning | | iuai | 9 | | Χ_ |
| year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "\ 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a | | | 10 | <u> </u> | X |
| TU DIU any persons become substantial continutors unting the tax year? If "Yes," affach a | schedule listing their names and addresses | | _ ,,, | L | |

ALLOY FAMILY FOUNDATION.

| • | ADDOL PARTIE FOUNDATION, INC. | | | |
|----------|--|--------------|-----|----------|
| | 1990-PF (2014) C/O STANLEY MARTIN COMPANIES, INC. 20-3142 | <u> 2787</u> | | Page 5 |
| | art VII-A Statements Regarding Activities (continued) | 1 | Г | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | 1 | | ,, |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | 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 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► THE FOUNDATION Telephone no. ► 703-96 | | | |
| | Located at ► 11111 SUNSET HILLS ROAD, SUITE 200, RESTON, VA ZIP+4 ►20 | <u> 1190</u> | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | ▶ | · [] |
| 40 | and enter the amount of tax-exempt interest received or accrued during the year | N | /A_ | NI |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, | 1 | Yes | |
| | securities, or other financial account in a foreign country? | 16 | L | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the | | | |
| <u> </u> | foreign country | <u> </u> | | Ь., |
| P | art 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 |
| 18 | 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? | | | |
| | (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? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (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)? | | | |
| | (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.) | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| 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 2014? | _1c | | <u>X</u> |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| | before 2014? | | | |
| | 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.) N/A | 2b | | - |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| |) | | | |
| 3a | 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 2014 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 foundation had excess business holdings in 2014.) N/A | 3b_ | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | _X_ |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2014? | 4b | | <u>X</u> |

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

(a) Name and address of each employee paid more than \$50,000

| | | 0 |
|-----|---|---------------|
| For | m | 990-PF (2014) |

(e) Expense account, other allowances

(d) Contributions to employee benefit plans and deferred

compensation

(c) Compensation

(b) Title, and average hours per week devoted to position

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

NONE

, ,

| Part VIII Information About Officers, Directors, Trustees, Foundation Nation Paid Employees, and Contractors (continued) | lanagers, Highly | |
|--|---------------------|---------------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONI | = 11 | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | · |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor | | Expenses |
| number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | j | |
| 1N/A | | |
| | | |
| 2 | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 at | nd 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| Total. Add lines 1 through 3 | • | 0. |
| | | Form 990-PF (2014) |

| | 111990-FF (2014) C/O STANDET MARTIN COMPANIES, INC. | | <u> </u> |
|----|--|------------|--|
| Р | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, | see instructions) |
| 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 | 1,712,722. |
| | Average of monthly cash balances | 1b | 1,712,722. 102,135. |
| | Fair market value of all other assets | 1c | |
| ď | Total (add lines 1a, b, and c) | 1d | 1,814,857. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| _ | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 1,814,857. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 27,223. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 1,787,634. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 89,382. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar | nd certain | |
| | foreign organizations check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 89,382. |
| 2a | Tax on investment income for 2014 from Part VI, line 5 | | |
| b | Income tax for 2014. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 1,410. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 87,972. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 87,972. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 87,972. |
| P | art XII Qualifying Distributions (see instructions) | • | ······································ |
| | ——— Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 144,291. |
| ь | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| | | 3b | |
| 4 | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 144,291. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 144,291. |
| | | | |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2014)

4940(e) reduction of tax in those years

Page 9

ALLOY FAMILY FOUNDATION, INC. C/O STANLEY MARTIN COMPANIES, INC.

| Part XIII Undistributed Income (se | ee instructions) | | | |
|--|------------------|----------------------------|-------------|---------------|
| | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
| Distributable amount for 2014 from Part XI, line 7 | , | , | | 87,972 |
| 2 Undistributed income, if any, as of the end of 2014 | | | | |
| a Enter amount for 2013 only | | | 0. | |
| b Total for prior years: | | | | |
| , , | | 0. | | |
| 3 Excess distributions carryover, if any, to 2014: | | | | |
| a From 2009 103, 273. | | | | |
| b From 2010 277, 292. | | | | |
| c From 2011 34,025. | | | | |
| d From 2012 38,662. | | | | |
| e From 2013 248,090. | | | | |
| f Total of lines 3a through e | 701,342. | | | |
| 4 Qualifying distributions for 2014 from | | | | |
| Part XII, line 4: ► \$ 144, 291. | | | | |
| a Applied to 2013, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2014 distributable amount | | | | 87,972 |
| e Remaining amount distributed out of corpus | 56,319. | | | |
| 5 Excess distributions carryover applied to 2014 | 0. | | | 0 . |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | BEB 664 | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 757,661. | | | . |
| b Prior years' undistributed income Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2013. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2014. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2015 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2009 | | | | |
| not applied on line 5 or line 7 | 103,273. | | | |
| 9 Excess distributions carryover to 2015. | | } | | |
| Subtract lines 7 and 8 from line 6a | 654,388. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2010 277, 292. | | | | |
| b Excess from 2011 34,025. | | | | |
| c Excess from 2012 38,662. | | | | |
| d Excess from 2013 248,090. | | | | |
| e Excess from 2014 56,319. | | | | |

TN 1250D101

| | NLEY MARTIN | | | | 42787 Page 10 |
|--|------------------------------|---------------------------|---------------------------|------------------------------|---------------------|
| Part XIV Private Operating F | oundations (see in | structions and Part VII | -A, question 9) | N/A | |
| 1 a If the foundation has received a ruling o | r determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective fo | r 2014, enter the date of t | he ruling | > | | |
| b Check box to indicate whether the found | dation is a private operatir | ng foundation described i | n section | 4942(j)(3) or | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | - | | | - | _ |
| c Qualifying distributions from Part XII, | | | | - | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | - | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | <u> </u> | | | |
| for active conduct of exempt activities. | | | | | |
| • | | | | | |
| Subtract line 2d from line 2c 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | - | |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(l) | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year | | | | | |
| listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, dividends, rents, payments on | | | | | |
| securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt organizations as provided in | | | | | |
| section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | | | if the foundatio | n had \$5,000 or me | ore in assets |
| at any time during t | he year-see instr | uctions.) | | | |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation wh | o have contributed more | | ributions received by th | e foundation before the clo | se of any tax |
| year (but only if they have contributed n | nore than \$5,000). (See s | ection 507(d)(2).) | | | |
| SEE STATEMENT 7 | . <u> </u> | | | | |
| b List any managers of the foundation wh | | | (or an equally large por | tion of the ownership of a p | artnership or |
| other entity) of which the foundation ha | s a 10% or greater interes | st | | | |
| NONE | | | | | |
| 2 Information Regarding Contributi | | | | | |
| Check here 🕨 📖 if the foundation of | inly makes contributions t | o preselected charitable | organizations and does | not accept unsolicited requ | iests for funds. If |
| the foundation makes gifts, grants, etc. | | | | | 10. |
| a The name, address, and telephone num | | | cations should be addr | essed: | |
| MR. MARTIN K. ALLOY, | | | 00100 | | |
| 11111 SUNSET HILLS R | | | | | |
| b The form in which applications should be | | | rould include: | | |
| LETTER EXPLAINING PU | RPOSE OF GR | ANT | | | |
| c Any submission deadlines: | | | | | |
| NO DEADLINES | | | | | |
| d Any restrictions or limitations on awards NO RESTRICTIONS OR L | | | kinds of institutions, or | r other factors: | |
| | | | | | |

C/O STANLEY MARTIN COMPANIES, 20-3142787 Page 11 INC.

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager contribution status of Name and address (home or business) or substantial contributor recipient a Paid during the year ALTERNATIVE HOUSE PUBLIC CHARITY GENERAL N/A PO BOX 694 DUNN_LORING VA 22027 5,000. BOYS AND GIRLS CLUB PUBLIC CHARITY GENERAL N/A 4103 BENNING ROAD, NE WASHINGTON, DC 20019 31,000. CNEWA N/A PUBLIC CHARITY GENERAL 8514 WHITTIER BLVD 500. BETHESDA, MD 20817 EMERGING SCHOLAR PROGRAM N/A PUBLIC CHARITY GENERAL 4401 FORD AVENUE, SUITE 400 2,200. ALEXANDRIA, VA_22302 GEORGE MASON UNIVERSITY FOUNDATION -N/A PUBLIC CHARITY EDUCATION DANCE SCHOOL OF DANCE, MS 3D4 4400 UNIVERSITY DRIVE _FAIRFAX _ VA _22030 500. SEE CONTINUATION SHEET(S) ➤ 3a 133,950. Total **b** Approved for future payment NONE Total

| VIIOI | LWMITHI | LOUNDE | 1110M, 1 | 11.0. |
|--------|---------|--------|----------|----------|
| C/O S' | TANLEY_ | MARTIN | COMPANI | ES, INC. |

| nter gross amounts unless otherwise indicated. | Unrelated b | usiness income | Excluded b | section 512, 513, or 514 | (e) |
|---|-------------------------|-----------------------|------------------------|---------------------------|-----------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| a | | | | | |
| b | 1 1 | | | | |
| C | 1 1 | | | | |
| d | i i | | | | |
| e | 1 1 | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | <u> </u> |
| Investments | | | 14 | 21. | |
| Dividends and interest from securities | | | 14 | 21. 35,999. | |
| Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | 45,470. | |
| Net income or (loss) from special events | | | | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue: | | | | | |
| a | | | | | |
| b | 7 7 | | | | |
| C | 1 1 | | | | |
| d | 1 1 | | | | |
| e | | | | | |
| Subtotal. Add columns (b), (d), and (e) | | 0 | • | 81,490. | |
| Total. Add line 12, columns (b), (d), and (e) | | | | | 81,49 |
| ee worksheet in line 13 instructions to verify calculations | S.) | | | | |
| Part XVI-B Relationship of Activitie | s to the Accom | | | | |
| | | Jump (a) of Dart VI/I | A contributed | importantly to the accomp | dishment of |
| · | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | - | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |
| ine No. Explain below how each activity for which i | | | | | |

423621 11-24-14

| Form 99 | | | | | COMPANIES | | | | 3142787 | | age 13 |
|--------------|-------------|--|---|------------------|-------------------------|-----------|------------------------|---------------------------|---------------------|-------------|--------------------|
| rait | VAII | Information R Exempt Orgar | | nsters to | and Transact | ons a | nd Relations | snips with ive | ncnaritable | 9 | |
| | | ganization directly or ind | | - | | | | tion 501(c) of | | Yes | No |
| | | (other than section 501(c | | | | al organi | ızatıons? | | | | |
| | | from the reporting found | lation to a nonchari | table exempt o | organization of: | | | | | | |
| • | Cash | | | | | | | | 1a(1) | | X |
| • | | assets sactions: | | | | | | | 1a(2) | <u> </u> | X |
| | | of assets to a noncharita | able exempt organiz | ation | | | | | 1b(1) | | х |
| | | nases of assets from a no | | | | | | | 1b(2) | | X |
| | | al of facilities, equipment, | • | 3 | | | | | 1b(3) | | X |
| (4) |) Reim | bursement arrangements | \$ | | | | | | 1b(4) | | X |
| | | s or loan guarantees | | | | | | | 1b(5) | | X |
| | | rmance of services or me | | | | | | | 1b(6) | | X |
| | | f facilities, equipment, ma | | | | | | | <u> 1c </u> | L | X |
| | | wer to any of the above is s given by the reporting f | • | - | , , | | | | | sets, | |
| | | s given by the reporting i | | | | Ket valui | e ili aliy transactioi | ii ur Shariiiy arrangi | ement, snow in | | |
| (a) Line i | - | (b) Amount involved | | | ole exempt organization | n | (d) Description | n of transfers, transacti | ons, and sharing ar | rangeme | |
| | \top | | | N/A | | | | | | | |
| | | | | , | | | | | | | |
| | | | | | | | | | | | |
| | \bot | | <u> </u> | | | | | | | | |
| | | | - | | | | | | | | |
| | | · - | <u> </u> | - | | | | | | | |
| | + | | | | | | | | | | |
| | + | • | | | | | | | | | |
| | | | | | | | | | | | |
| | \top | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | _ _ | | | | | | ļ | | | | |
| | | | <u> </u> | | | | | | | | |
| | l | | | | | | | | | _ | |
| | | idation directly or indirec | • | | | l organiz | ations described | | □ Vac | v | Пма |
| | | 501(c) of the Code (othe amplete the following sch | • | c)(3)) or in sei | CHOH 527 r | | | | Yes | LA. | No |
| יו ע | 163, 66 | (a) Name of org | | | (b) Type of organ | zation | | (c) Description of r | elationship | _ | |
| | | N/A | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | (2) 1) | | | (0) | | | |
| | | | | | | | | | | | |
| | | | | | | | | | · | | |
| | | | | | | | | | | | |
| | | | | | 1 | | | <u> </u> | | | |
| Cian | | penalties of perjury, I declare lief, it is true correct, and cor | | | | | | | May the IRS or | discuss t | his |
| Sign Here | | / hu | num | | 11/6 | 115 | PRESI | אניים | shown below | (see inst | tr)? |
| | Sign | ature of officer or trustee | Sur | | Date | | Title | JENT | LX Yes | | ∐ N o —— |
| | 1 3.91 | Print/Type preparer's na | | Preparer's | | | Date / | Check If | PTIN | | |
| | | , prepare 9 m | | X | La Va | | 11/1/1 | self- employed | | | |
| Paid | | LAURAN I. | PENN | (/an | Marth | n | 11/4/15 | | P00086 | <u>898</u> | |
| Prep | | Firm's name ► SNY | | , PC | 7 | | , | Firm's EIN ► 5 | 2-10222 | 32 | |
| Use (| Only | | | | | | | 1 | | | |

Phone no. 301-652-6700

Firm's address ▶ 11200 ROCKVILLE PIKE, SUITE 415 NORTH BETHESDA, MD 20852

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

2014

| | ALLOY FAMILY FOUNDATION, INC. C/O STANLEY MARTIN COMPANIES, INC. | 20-3142787 |
|---|---|---|
| Organization type (check | | <u> 20 3142707</u> |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | | |
| | n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul | le See instructions |
| General Rule | | |
| | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor. | |
| Special Rules | | |
| sections 509(a)(1 any one contribu | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support I) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, stor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount IZ, line 1 Complete Parts I and II | or 16b, and that received from |
| year, total contrib | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from a putions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educate foruelty to children or animals. Complete Parts I, II, and III | |
| year, contribution is checked, enter purpose Do not | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an exclusively for religious, charitable, etc., purposes, but no such contributions totaled may here the total contributions that were received during the year for an exclusively religious, complete any of the parts unless the General Rule applies to this organization because it ble, etc., contributions totaling \$5,000 or more during the year | ore than \$1,000 If this box , charitable, etc , |
| out it must answer "No" o | that is not covered by the General Rule and/or the Special Rules does not file Schedule Bon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fort the filing requirements of Schedule B (Form 990, 990 EZ, or 990 PF) | |

Name of organization

ALLOY FAMILY FOUNDATION, INC.

C/O STANLEY MARTIN COMPANIES, INC.

Employer identification number

20-3142787

| <u> </u> | TANDET MARTIN COMPANIES, INC. | | <u> </u> |
|--------------------|---|----------------------------|---|
| Part I | Contributors (see instructions) Use duplicate copies of Part I if a | dditional space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | STEVEN B. ALLOY 1513 VICTORIA FARMS LANE VIENNA, VA 22182 | \$\$. | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) N o. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Occash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | | Person Payroll Noncash (Complete Part II for noncash contributions) |

Name of organization

ALLOY FAMILY FOUNDATION, INC.

C/O STANLEY MARTIN COMPANIES, INC.

Employer identification number

20-3142787

| (a) | Notices in Froberty (see instructions) ose duplicate copies of Fr | · · · · · · · · · · · · · · · · · · · | - - |
|------------------------------|---|--|---------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| _1 | VARIOUS SHARES OF COMMON STOCK | | |
| | | \$ 100,183. | 12/01/14 |
| (a) No. rom Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. rom art I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. rom art I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| _ | | \$ | |
| (a) No. rom art I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. rom art I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| 1453 11-05- | | \$ Schedule B (Form 9 | 90, 990-EZ, or 990-PF) (2 |

| Name of orga | anization | | Employer identification number | | | | | |
|---------------------------|---|---|--|--|--|--|--|--|
| ALLOY | FAMILY FOUNDATION, INC | • | | | | | | |
| <u>C/O ST</u> | ANLEY MARTIN COMPANIES Exclusively religious, charitable, etc., cont | , INC. | 20 - 3142787 | | | | | |
| Part III | the year from any one contributor. Complete of | columns (a) through (e) and the follo | I in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations | | | | | |
| | completing Part III, enter the total of exclusively religiou | s, charitable, etc., contributions of \$1,000 o | r less for the year (Enter this info once) | | | | | |
| (a) No. | Use duplicate copies of Part III if addition | al space is needed | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| Faiti | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 1 | | (e) Transfer of git | t | | | | | |
| | | | | | | | | |
| - | Transferee's name, address, ar | 1d ZIP + 4 | Relationship of transferor to transferee | | | | | |
| | | —————————————————————————————————————— | ····· | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) No. from | (h) Dumano of suft | (a) Han of soft | (d) Description of how wife is held | | | | | |
| Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | (e) Transfer of gif | | | | | | |
| | (e) transier or gift | | | | | | | |
| _ | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) No. | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| - r u., c, | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | (e) Transfer of gif | t | | | | | |
| | Transferee's name, address, ar | .d 710 . 4 | Relationship of transferor to transferee | | | | | |
| | Transieree's flame, address, ar | 1U ZIP + 4 | netationship of transferor to transferee | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| Part I | (5). 4. poss o. g | | (-), | | | | | |
| | | | | | | | | |
| | | | | | | | | |
|] . | | | | | | | | |
| | | (e) Transfer of gif | t | | | | | |
| | | | | | | | | |
| | Transferee's name, address, an | nd ZIP + 4 | Relationship of transferor to transferee | | | | | |
| | | | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| , | | | | | | | | |

CONTINUATION FOR 990-PF, PART IV 20-3142787 PAGE 1 OF 1

| Part IV Capital Gains and Lo | sses for Tax on Investment Income | <u></u> | 1 | | - |
|--|---|--|--|---|--|
| (a) List and 2-story b | d describe the kind(s) of property so rick warehouse; or common stock, 2 | ld, e.g., real estate, 200 shs. MLC Co. | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo , day, yr.) |
| 1a FIXED INCOME - | SEE ATTACHED | | P | VARIOUS | VARIOUS |
| b GRATRY - SEE A | | | P | VARIOUS | VARIOUS |
| c GRATRY - SEE A | | | P | VARIOUS | VARIOUS |
| | RCH - SEE ATTACH | | P | VARIOUS | |
| | RCH - SEE ATTACH | | P | VARIOUS_ | |
| | D BASIS ADJUSTME | | P | VARIOUS | |
| | RCH - BIGLARI HO | OLDINGS INC RTS | P | 08/20/14 | 109/05/14 |
| h CAPITAL GAINS | DIVIDENDS | | | | |
| | | | | - | - |
| | | | - | | |
| <u>k</u> | | | | - | |
| - | | | | | |
| m | | | | | |
| <u>n</u> | | | | | |
| 0 | (O Demonstrate allerned | (a) Cook or other hour | | \ Corp.or (loop) | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | ı) Gaın or (loss) plus (f) mınus (g) | |
| 127 526 | (or unoviable) | | | | <6,325.> |
| a 137,536. | | 143,861. 93,751. | | | <9,930.> |
| b 83,821. | | | · · · · · · · · · · · · · · · · · · · | | $\frac{3,330.5}{3,187.}$ |
| c 106,940. | | 103,753. 177,055. | | | 4,625. |
| d 181,680. | | 206,353. | | | 52,434. |
| e 258,787. | | <225.> | | | 225. |
| $\frac{f}{g}$ 74. | - | <225. | | | 74. |
| · · · · · · · · · · · · · · · · · · · | | | | | 1,180. |
| h 1,180. | - | | | | <u> </u> |
| <u> </u> | | | | | |
| <u> </u> | - | | | | |
| <u>k</u> | | | | | |
| <u></u> | | - | | | <u> </u> |
| m | | | | | |
| <u>n</u> | | | | | |
| Complete only for assets shown | ı ng gain in column (h) and owned by | the foundation on 12/31/69 | (1)1.0 | sses (from col (h) | <u> </u> |
| (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 (excess | of col (h) gain ovenot less than "-0-") | er col (k), |
| | | | | | <6,325.> |
| <u>a</u> | | | | | <9,930.> |
| <u>b</u> | | | | | 3,187. |
| <u>c</u> | | | | | 4,625. |
| <u>d</u> | | | | | 52,434. |
| e f | | | | - | 225. |
| | | | | | 74. |
| 9 h | | <u> </u> | | | 1,180. |
| <u>"</u> 1 | | | | | <u> </u> |
| - ' | | | . | | |
| <u></u> k | | | | | |
| 1 | | | | | |
| <u> </u> | | | | | |
| n | | | | | _ |
| 0 | | | _ | | |
| | | | | | |
| 2 Capital gain net income or (net ca | apital loss) { If gain, also ente | r in Part I, line 7 0-" in Part I, line 7 | 2 | | 45,470. |
| | | <u> </u> | | | · · · · · · · · · · · · · · · · · · · |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, | | iiu (o). | | | |
| If (loss), enter "-0-" in Part I, line 8 | | J | 3 | N/A | |

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor GEORGE MASON UNIVERSITY FOUNDATION N/A PUBLIC CHARITY EDUCATION 4400 UNIVERSITY DRIVE MSN 1A3 FAIRFAX, VA 22030 10,000. HOMEAID NORTHERN VIRGINIA N/A PUBLIC CHARITY GENERAL 3684 CENTERVIEW DRIVE, SUITE 110B CHANTILLY, VA 20151 7,000. JEWISH FEDERATION OF GREATER N/A PUBLIC CHARITY GENERAL WASHINGTON 6101 EXECUTIVE BLVD. NORTH BETHESDA, MD 20852 10,000. PUBLIC CHARITY GENERAL JEWISH SOCIAL SERVICE AGENCY N/A 200 WOOD HILL RD ROCKVILLE, MD 20850 1,500. PUBLIC CHARITY GENERAL JUNIOR ACHIEVEMENT N/A 1050 17TH STREET, NW, SUITE 750 5,250. WASHINGTON, DC 20036 N/A PUBLIC CHARITY GENERAL POTOMAC CONSERVANCY 8403 COLESVILLE ROAD, SUITE 805 1,000. SILVER SPRING MD 20910 PUBLIC CHARITY GENERAL SMITHSONIAN INSTITUTION N/A MRC 619 RM# 5104 1300 CONSTITUTION 20,000. AVENUE NW WASHINGTON, DC 20560-0622 N/A PUBLIC CHARITY GENERAL SOME 71 O STREET, NW 10,000. WASHINGTON DC 20001 PUBLIC CHARITY EDUCATION UNIVERSITY OF PENNSYLVANIA N/A 3615 MARKET STREET, FLOOR 2 30,000. PHILADELPHIA, PA 19104 94.750. Total from continuation sheets

| FORM 990-PF INTERE | ST ON SAVI | NGS AND TEM | PORARY CASH I | NVESTMENTS | STATEMENT 1 |
|------------------------------------|-----------------|----------------------------------|-----------------------------------|---------------------------------|-------------------------------|
| SOURCE | REVE | (A) REVENUE NET IN PER BOOKS INC | | (C) ADJUSTED NET INCOME | |
| INTERNAL REVENUE SE | | 21. | 21. | | |
| TOTAL TO PART I, LINE 3 | | | 21. | | |
| FORM 990-PF | DIVIDEND | S AND INTER | EST FROM SECUI | RITIES | STATEMENT 2 |
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | REVENUE | (B) NET INVEST MENT INCOM | |
| BAIRD DIVIDENDS BAIRD INTEREST | 37,148 31 | • | 0. 35,968 0. 31 | - | |
| TO PART I, LINE 4 | 37,179 | 1,18 | 35,999 | 35,999 | |
| FORM 990-PF | | ACCOUNTI | NG FEES | | STATEMENT 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| ACCOUNTING FEES | | 4,500. | 2,250. | | 2,250. |
| TO FORM 990-PF, PG | 1, LN 16B | 4,500. | 2,250. | | 2,250. |
| FORM 990-PF | | TAX | ES | | STATEMENT 4 |
| DESCRIPTION | - | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| FOREIGN TAXES FEDERAL EXCISE TAXES | S - | 628. 1,496. | 628. | | 0. |
| TO FORM 990-PF, PG | 1, LN 18 | 2,124. | 628. | | 0. |
| | | | | | |

| FORM 990-PF | OTHER E | | STATEMENT 5 | |
|-------------------------------|------------------------------|-----------------------------------|------------------------------|----------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | |
| INVESTMENT FEES BANK CHARGES | 16,158. | 8,079. | | 8,079. |
| TO FORM 990-PF, PG 1, LN 23 | 16,182. | 8,091. | | 8,091. |
| FORM 990-PF | CORPORAT | E STOCK | | STATEMENT 6 |
| DESCRIPTION | | BOO | OK VALUE | FAIR MARKET VALUE |
| BAIRD SECURITIES | | | 1,480,277. | 1,735,302. |
| TOTAL TO FORM 990-PF, PART II | I, LINE 10B | | 1,480,277. | 1,735,302. |
| FORM 990-PF | PART XV - L OF FOUNDATION | | - | STATEMENT 7 |

NAME OF MANAGER

MARTIN K. ALLOY STEVEN B. ALLOY