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Department of the Treasury

Internal Revenue Service

#### DLN: 93491071003046

OMB No 1545-0052

2015

Open to Public Inspection

# 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.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

In:

For calendar year 2015, or tax year beginning 01-01-2015				, and end	, and ending 12-31-2015				
	e of foun HN VOS F	dation FAMILY FOUNDATION INC			A Empl	oyer id	lentification numb	er	
,		741121 1 0 01157 111611 2116			26-1587	7229			
		street (or P O box number if mail is	not delivered to street address)	Room/suite	<b>B</b> Teleph	one nu	mber (see instruction	s)	
C/	O GRICE	14409 GREENVIEW DR NO 201			(301) 9	53-325	9		
	or town, LEL, MD	state or province, country, and ZIP of 20708	r foreign postal code		C If exe	emption	application is pendir	g, check here 🕨 🦵	
G Ch	neck all	that apply   Initial return	Initial return of a fo	rmer public charity	D 1 Fo	reian o	rganizations, check h	ere 🕨 🖵	
		Final return Address chang	A mended return ge Name change			-	rganizations meeting	•	
u ch	ock tyr	pe of organization Section		foundation			ck here and attach co undation status was		
		947(a)(1) nonexempt charital					n 507(b)(1)(A), che	. —	
		t value of all assets at end	JAccounting method	✓ Cash	1 - 11 1116		ation is in a 60-mont	. —	
		om Part II, col. (c), \$ 1,577,098	Other (specify)	be on cash basıs.)	unde	r sectio	n 507(b)(1)(B), che	ck here 📕	
Pa	rt I	Analysis of Revenue a (The total of amounts in columns in necessarily equal the amounts in constructions)	(b), (c), and (d) may not	Revenue and expenses per	Net invest (b) income		Adjusted net	Disbursements for charitable purposes (d) (cash basis only)	
The state of the s	1	Contributions, gifts, grants, e	etc , received (attach					(a) (cash basis only)	
				375,000					
	2	Check ► ☐ If the foundation	is <b>not</b> required to attach						
		•							
	3	Interest on savings and temp	porary cash investments	26		26			
	4	Dividends and interest from s	securities	21,500		8,500			
	5a	Gross rents	[						
	b	Net rental income or (loss) _							
₽	6a	Net gain or (loss) from sale o	fassets not on line 10						
Revenue	b	Gross sales price for all asse	ets on line 6a						
	7	Capital gain net income (fron	n Part IV, line 2)			0			
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and							
	b	allowances Less Cost of goods sold .							
	c	Gross profit or (loss) (attach							
	11	Other income (attach schedu	ıle)						
	12	Total.Add lines 1 through 11	·	396,526		8,526		_	
	13	Compensation of officers, dir	-	0		0		0	
	14	Other employee salaries and	wages						
y) d)	15	Pension plans, employee ben	efits						
Š	16a	Legal fees (attach schedule).							
Expense	b	Accounting fees (attach sch	edule)	4,600		0		0	
	С	Other professional fees (atta	ch schedule)	<b>%</b> 65		65		0	
Admını strative	17	Interest							
¥2	18	Taxes (attach schedule) (see	e instructions)	178		0		0	
	19	Depreciation (attach schedu	e) and depletion						
늘	20	Occupancy							
and #	21	Travel, conferences, and mee							
	22	Printing and publications.							
III	23	Other expenses (attach sche							
Operating	24	Total operating and administ		4,843		65		0	
ð	25	Add lines 13 through 23 Contributions, gifts, grants p		62,000				62,000	
	25 26	Total expenses and disburser	ŀ	02,000				32,000	
		25	nents.Aud lilles 24 and	66,843		65		62,000	
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expe		329,683		0.1-			
	b	Net investment income (If ne				8,461			
	С	Adjusted net income(If negat	ive, enter -U-)						

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		(s) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book Value 337,657	<b>(b)</b> Book Value 667,314	(c) Fair Market Value 667,314
	2	Savings and temporary cash investments	26,570		
	3	Accounts receivable -	20,370	20,330	20,370
	3	Less allowance for doubtful accounts			
	4	Pledges receivable			
	7	Less allowance for doubtful accounts -			
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
	6				
	_	disqualified persons (attach schedule) (see instructions)			
	7	· · · · · · · · · · · · · · · · · · ·			
	•	Less allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	402.700	<b>65.</b> 403.700	464 500
Ā	10a	Investments—U S and state government obligations (attach schedule)	403,780	403,780	461,588
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis -			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans		_	
	13	Investments—other (attach schedule)	425,000	425,000	421,600
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) -			
	15	Other assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		instructions Also, see page 1, item I)	1,193,007	1,522,690	1,577,098
	17	Accounts payable and accrued expenses			
.n	18	Grants payable			
tle.	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lla	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
м		Foundations that follow SFAS 117, check here 🕨 🦵			
9		and complete lines 24 through 26 and lines 30 and 31.			
la l	24	Unrestricted			
Ba	25	Temporarily restricted			
핃	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ō		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,193,007	1,522,690	
Net	30	Total net assets or fund balances(see instructions)	1,193,007	1,522,690	
	31	Total liabilities and net assets/fund balances(see instructions)	1,193,007	1,522,690	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column (	(a), line 30 (must ag	gree	_
		with end-of-year figure reported on prior year's return)		1	1,193,007
2		Enter amount from Part I, line 27a		2	329,683
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	1,522,690
5		Decreases not included in line 2 (itemize)		5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lı	ne 30 . 6	1,522,690

Part IV Capital Gains	and Losses for Tax on Inve	stment Income	1		
	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase <b>(b)</b> D—Donation	Date acquired	Date sold (d) (mo , day, yr )
1a					
b					
c					
d					
е					
(e) Gross sales price	Depreciation allowe <b>(f)</b> (or allowable)		or other basis expense of sale		n or (loss) ; (f) mınus (g)
а					
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and owne	ed by the foundation	on 12/31/69	Gains (Co	(h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69		ess of col (ı) col (j), ıf any	col (k), but not less than -( (I) Losses (from col (h))	
a					
b					
c					
d					
e					
3 Net short-term capit	me or (net capital loss)  al gain or (loss) as defined in sectio  Part I, line 8, column (c) (see instru		) )	. 3	
	Under Section 4940(e) for R	Reduced Tax on	Net Investme	<u> </u>	
	private foundations subject to the se				
	ne section 4942 tax on the distributa not qualify under section 4940(e) Do			erıod?	│ Yes 🗸 No
<b>1</b> Enter the appropriate amo	ount in each column for each year, s	ee instructions befo	re making any ent	ries	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of nonchar		<b>(d</b> ) Distributio (col (b) divideo	on ratio
2014	54,422		1,077,639		0 050501
2013	31,800		899,636		0 035348
2012	24,100		757,207		0 031827
2011	34,413		570,121		0 060361
2010	41,532		610,741		0 068003
_ ,	n (d)			2	0 246040
the number of years	ratio for the 5-year base period—div	e ıf less than 5 year	rs	3	0 049208
	of noncharitable-use assets for 2015	·		4	1,252,058
	e 3		<u> </u>	5	61,611
	stment income (1% of Part I, line 2		<u> </u>	6	8 5
7 Add lines 5 and 6.				7	61,696

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See

the Part VI instructions

62,000

Pell	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	7 <del>7</del> 0(e),	, UI 4340—SE	e pag	C 10 01	rue ins	LIUCLIO	115)	
1a	Exempt operating foundations described in section 4940(d)(2), check here	- [		ì					
	and enter "N/A" on line 1  Date of ruling or determination letter			Į					
	(attach copy of letter if necessary—see instructions)			ĺ					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			J	1				85
	here Fand enter 1% of Part I, line 27b			•					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	dation	s only Othe	ers	2				0
3	Add lines 1 and 2				3				<u>_</u> 85
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foun	ndation	s only Othe	ers					
_	enter -0-)				4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, er	nter - 0		•	5				85
6 a	Credits/Payments 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	I	800					
a b	Exempt foreign organizations—tax withheld at source	6b		800					
c	Tax paid with application for extension of time to file (Form 8868)	6c			-				
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				800
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2				8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount			•	10				715
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b>	715		<b>•</b>	11				0
	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state,	, or loc	:al legislatio	n or d	ıd			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	olitica	l purposes (	see Ir	structi	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any r	materia	als				
	published or distributed by the foundation in connection with the activities.								
	Did the foundation file Form 1120-POL for this year?					•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos								
	(1) On the foundation  \$\bigs\\$ 0 (2) On foundation managers			0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political terms of the second s	tical e	xpenditure t	ax ımp	osed				
_	on foundation managers <b>*</b> \$0		t - th - IDC2						NI-
2	Has the foundation engaged in any activities that have not previously been rep	ortea	to the IRS?				2		No
2	If "Yes," attach a detailed description of the activities.		rning instru	mant	a mtu a la	_			
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a confo</i>	=	_	-		5	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more di						4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction dur						-		No
	If "Yes," attach the statement required by General Instruction T.		. ,						
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45) sa	tisfied eithe	r					
	By language in the governing instrument, or								
	ullet By state legislation that effectively amends the governing instrument so that	at no n	nandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s $\cdot$	see ins	tructions)						
_	► MD								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99						٥:		
_	General (or designate) of each state as required by General Instruction G? If "				(-)(°)		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the m		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (set If "Yes," complete Part XIV	ee iiist		rail /			9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,"	• • " attach	a schedule	istina	their n	ames	<u> </u>	$\vdash \vdash \vdash$	-10
	and addresses.			_			10		No

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►NONE			
14	The books are in care of ►KATHERINE GRICE Telephone no ►(301)	1)953	-3259	
	Located at ▶14409 GREENVIEW DRIVE SUITE 201 LAUREL MD ZIP+4 ▶20708			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		<b>▶</b> □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مه ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	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 V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes V No			
	(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 )			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
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 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V No			
	If "Yes," list the years ▶ 20, 20, 20			
b	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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
За	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 2015 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 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2015?	4b		No

Form	1 990-PF (20	015)								Page <b>6</b>
Pa	rt VII-B	Statements Rega	ardir	ng Activities for	Wŀ	nich Form 4720 l	Мау	y Be Required <i>(Cont</i>	inue	ed)
5a	During the	year did the foundation	n pay	or incur any amount	: to					
	(1) Carry o	n propaganda, or othe	rwise	attempt to influence	eleg	ıslatıon (section 494	5 (e	e)) <sup>?</sup>	No	
							•			
								•	No	
									<b>-</b>	
							•	Yes	No	
	` '	, , ,		· .	•			□ v <sub>22</sub> □	- NI.	
h			•	•					IAO	
b										5h
										36
_										
		·	•	• •		•			- No	
							-	,,		
6a							prer	miums on		
									No	
b										6b No
7a	At any time	e during the tax year,	was tl	ne foundation a party	to	a prohibited tax shelt	ert	ransaction?   Yes	No	
b	If yes, did	the foundation receive	any	proceeds or have an	y ne	t income attributable	to t	the transaction?		7b
Do	I I	information Abou	ıt Of	icers, Directors	, T	rustees, Founda	tio	n Managers, Highly	Paid	l Employees,
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?										
	List all offic	ers, directors, trustee	es, foi	indation managers a	nd t	heir compensation (s	ee i	-	l	
	(a) Nam	a and address		•	(	•				Expense account,
	(a) Naiii	e allu auuless	(b)	•					(e)	other allowances
10HN	L VOS				-		_	·		
		ON WAY	-	SIDENI		U		U		U
TRIC	IA J VOS		VIC	PRESIDENT		0		0		0
			1 00							
		2118	<u> </u>		-		<u> </u>	_		
		A C A NIT CT	-	PRESIDENT		0		0		0
			SEC	RETARY/TREASUER		0	$\vdash$	0		
138	21 WILLIST	ON WAY	-	,						
NAP	LES,FL 34:	119								
_2_	Compensati	on of five highest-pai	d emp	loyees (other than t	hos	e included on line 1—:	see		ter"	NONE."
										Expense account
Nar			paid	1 '			n			•
				(b) devoted to post				(d) compensation		
NON	<u>IE</u>									
Taba	I number of .	-+har amplauaaa		L C A A A A						^

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<b>、</b>	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	duced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2  All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount

#### Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
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	873,232
b	Average of monthly cash balances	1b	397,893
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,271,125
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	0
3	Subtract line 2 from line 1d	3	1,271,125
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	19,067
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,252,058
6	Minimum investment return. Enter 5% of line 5	6	62,603
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cei check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	62,603
2a	Tax on investment income for 2015 from Part VI, line 5 2a 85		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
c	Add lines 2a and 2b	2c	85
3	Distributable amount before adjustments Subtract line 2c from line 1	3	62,518
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	62,518
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	62,518
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	62,000
	Program-related investments—total from Part IX-B	1b	0
2	A mounts 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	
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	62,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	85
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	61,915
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed Income (see insti	ructions)			
		<b>(a)</b> Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				62,518
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			4,212	
Ь	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
	From 2011				
c	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e		0		
	Qualifying distributions for 2015 from Part				
-	XII, line 4 🕨 \$62,000				
а	Applied to 2014, but not more than line 2a			4,212	
	Applied to undistributed income of prior years		0	,	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount				57,788
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2015		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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		0		
	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)		0		
	tax has been previously assessed		O .		
d	Subtract line 6c from line 6b Taxable amount —see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
_	instructions			Ŭ	
t	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				4,730
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 2010 not		0		
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.		0		
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
е	Excess from 2015				

- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 62,000 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	<u> </u>			
nter gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	n 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See
•	Business code	Amount	Exclusion code	Amount	ınstructions )
a b					
c					
d					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments			14	26	
4 Dividends and interest from securities 5  Net rental income or (loss) from real estate			14	21,500	
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Otherrevenue a					
b					
c					
d e					
2 Subtotal Add columns (b), (d), and (e).		0		21,526	C
3 Total.Add line 12, columns (b), (d), and (e).			:	13	21,526
(See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to		olishment of E	xempt Purpos	es	
Explain below how each activity for wh the accomplishment of the foundation' instructions )	ıch ıncome ıs rej	ported in column (	e) of Part XVI-A c	ontributed importa	
,					

Part XVI	Information Re Noncharitable				actions	and Ro	elationships	With		
	organization directly or i	ndırectly en	gage in any of	the following with					Yes	No
organızat	tions?									
<b>a</b> Transfers	s from the reporting four	ndation to a	noncharitable	exempt organıza	tion of					
<b>(1)</b> Cas	h								1a(1)	No
(2) Othe	erassets								1a(2)	No
<b>b</b> Other tra	ansactions									
<b>(1)</b> Sale	es of assets to a noncha	rıtable exen	npt organizatio	n					1b(1)	No
<b>(2)</b> Purc	chases of assets from a	noncharitab	ole exempt orga	anızatıon					1b(2)	No
<b>(3)</b> Rent	tal of facilities, equipme	nt, or other	assets						1b(3)	No
<b>(4)</b> Rein	nbursement arrangemer	its							1b(4)	No
<b>(5)</b> Loar	ns or loan guarantees.								1b(5)	No
(6)Perfor	rmance of services or m	embership (	or fundraising s	olicitations					1b(6)	No
<b>c</b> Sharing o	of facilities, equipment,	maılıng lısts	, other assets,	or paid employe	es				1c	No
of the go- in any tra	ods, other assets, or se ansaction or sharing arr	rvices giver angement, s	n by the reporti show in column	ng foundation If ( <b>d)</b> the value of	the found the goods	lation re s, other a	ceived less thai assets, or servi	n fair marke ces receive	et value ed	
(a) Line No	(b) Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Des	scription of	f transfers, transact	tions, and sha	ring arrangem	ents
+										
describe		ne Code (oth schedule	ner than section		n section				·	FNo
the		ınd belief, it	ıs true, correct					an taxpaye	r) is based o	n all
Here	****			2016-03-02	*	****		return		
	Signature of officer or t	rustee		Date	reganization of  1a(1) No 1a(2) No 1b(3) No 1b(4) No 1b(4) No 1b(6) No 1c No 1b(6) No 1c N					
•	Print/Type preparer's KATHERINE A GRI CPA		Preparer's Sign	ature	Date				00720276	
Paid Preparer Use	Firm's name  BORMEL GRICE & HU Firm's address	IYETT PA			1		Firm's EIN ► 5	2-154413	6	
Only	14409 GREENVIEW   207083293	OR STE 201	. LAUREL, MD			-	Phone no (301	.)953-325	59	

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JOHN L VOS

CHRISTINE A VOS

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor	·		
a Paid during the year				
ANGEL FLIGHT NE - RIDE FOR ANGELS 492 SUTTON ANDOVER,MA 01845	N/A	OTHER PUBLIC CHARITY	CHARITABLE	1,000
BELTSVILLE ADVENTIST SCHOOL 4230 AMMENDALE RD BELTSVILLE,MD 20705	N/A	OTHER PUBLIC CHARITY	CHARITABLE	4,000
CASA OF BOSTON 715 BOYLSTON ST SUITE 401 BOSTON,MA 02116	N/A	OTHER PUBLIC CHARITY	CHARITABLE	1,000
CASA OF THE EASTERN PANHANDLE 336 SOUTH QUEEN ST MARTINSBURG,WV 25401	N/A	OTHER PUBLIC CHARITY	CHARITABLE	3,250
CHILDRENS HOME OF IREDEL CTY 724 NORTH CENTER STREET STATESVILLE,NC 28687	N/A	OTHER PUBLIC CHARITY	CHARITABLE	5,000
CRADLES TO CRAYONS 155 NORTH BEACON STREET BRIGHTON,MA 02135	N/A	OTHER PUBLIC CHARITY	CHARITABLE	3,000
GREATER BOSTON FOOD BANK THE 70 SOUTH BAY AVE BOSTON,MA 02118	N/A	OTHER PUBLIC CHARITY	CHARITABLE	2,500
HABITAT FOR HUMANITY - INTL 121 HABITAT ST AMERICUS,GA 31709	N/A	OTHER PUBLIC CHARITY	CHARITABLE	3,000
INDIAN CREEK SCHOOL 1130 ANNE CHAMBERS WAY CROWNSVILLE, MD 21032	N/A	OTHER PUBLIC CHARITY	CHARITABLE	1,000
INHERITANCE OF HOPE PO BOX 90 PISGAH FOREST,NC 28768	N/A	OTHER PUBLIC CHARITY	CHARITABLE	500
LITTLE SISTERS OF THE POOR 601 MAIDEN CHOICE LANE BALTIMORE,MD 21228	N/A	OTHER PUBLIC CHARITY	CHARITABLE	1,500
LOCKS OF LOVE 234 SOUTHERN BL WPALM BEACH,FL 33405	N/A	OTHER PUBLIC CHARITY	CHARITABLE	1,000
MANNA HOUSE INC 435 EAST 25TH STREET BALTIMORE,MD 21218	N/A	OTHER PUBLIC CHARITY	CHARITABLE	1,000
MARYLAND FOOD BANK 2200 HALETHORPE FARMS ROAD BALTIMORE,MD 21227	N/A	OTHER PUBLIC CHARITY	CHARITABLE	500
MISSION OF DEEDS 6 CHAPIN AVE READING,MA 01867	N/A	OTHER PUBLIC CHARITY	CHARITABLE	2,000

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
ONE SMALL HOUSE PO BOX 0798 BREWSTER, NY 10509	N/A	OTHER PUBLIC CHARITY	CHARITABLE	500
PATHWAYS OF PELLA 703 MAIN STREET PELLA,IA 50219	N/A	OTHER PUBLIC CHARITY	CHARITABLE	250
RONALD MCDONALD HOUSE OF DELAWARE 1901 ROCKLAND ROAD WILMINGTON, DE 29803	N/A	OTHER PUBLIC CHARITY	CHARITABLE	500
SAINTS PETER & PAUL PARISH 900 HIGH STREET EASTON,MD 21601	N/A	OTHER PUBLIC CHARITY	CHARITABLE	20,000
THE LIGHT HOUSE 10 HUDSON STREET ANNAPOLIS,MD 21401	N/A	OTHER PUBLIC CHARITY	CHARITABLE	10,000
WESLEY LIFE HOSPICE 5508 NE 88TH STREET JOHNSON,IA 50131	N/A	OTHER PUBLIC CHARITY	CHARITABLE	500
Total			3a	62,000

## **TY 2015 Accounting Fees Schedule**

Name: JOHN VOS FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	4,600	0		0

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## **TY 2015 Investments Government Obligations Schedule**

Name: JOHN VOS FAMILY FOUNDATION INC

**EIN:** 26-1587229

**US Government Securities - End of** 

Year Book Value: 0

**US Government Securities - End of** 

Year Fair Market Value: 0

State & Local Government Securities - End of Year Book

**Value:** 403,780

State & Local Government

Securities - End of Year Fair

Market Value: 461,588

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## **TY 2015 Investments - Other Schedule**

Name: JOHN VOS FAMILY FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BAC VARI CPN NOTES	AT COST	425,000	421,600

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## **TY 2015 Other Professional Fees Schedule**

Name: JOHN VOS FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNT INVESTMENT FEE	65	65		0

## **TY 2015 Taxes Schedule**

Name: JOHN VOS FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	178	0		0

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JOHN VOS FAMILY FOUNDATION INC

As Filed Data -

#### DLN: 93491071003046

#### 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, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2015

**Employer identification number** 

		26-158/229
Organizat	tion type (check or	ie)
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
Form 990-l	PF	√ 501(c)(3) exempt private foundation
		□ 501(c)(3) taxable private foundation
General F	Rule	), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions illing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or
c	other property) from	any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Special R	ules	
un red	der sections 509(a) ceived from any one	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support test of the regulations (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990-EZ, line 1 Complete Parts I and II
du	ring the year, total c	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ontributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III
du the pu	ring the year, contri s box is checked, ei rpose Do not comp	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, butions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If inter here the total contributions that were received during the year for an exclusively religious, charitable, etc., lete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively is contributions totaling \$5,000 or more during the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
JOHN VOS FAMILY FOUNDATION INC

Employer identification number 26-1587229

Part I	Contributors (see instructions) Use duplicate copies of Part I r	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	JOHN L VOS REVOCABLE TRUST 13821 WILLISTON WAY	\$ 325,000	Person Payroll	고
	NAPLES, FL34119		Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4  VERMEER MID ATLANTIC INC - VIRGINIA	(c) Total contributions	(d) Type of cont	ribution
2			Person Payroll	도
	ASHLAND, VA 23005	\$ 10,000	Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
3	LINDA AND DENNIS CAMERON		Person Payroll	ᅜ
	2507 CHESTNUT WOODS	\$ 5,000	Noncash	, 
	REISTERSTOWN, MD21136		(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
4	VERMEER MID ATLANTIC INC - MARYLAND		Person Payroll	ᄃ
	ANNAPOLIS JCT, MD20701	\$ 35,000	Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person Payroll	F
		\$	Noncash	_
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Payroll	' 
		\$	Noncash	_
			(Complete Part II f contributions )	or noncash

Name of organization JOHN VOS FAMILY FOUNDATION INC		Employer identification n	Employer identification number		
JOHN VOS FAMI	LY FOUNDATION INC	26-1587229			
Part II	Noncash Property	-			
Part II	(see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		s			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)
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chedule B (Form 990,	, 990-EZ, or 990-PF) (2015)		Page <b>4</b>
<b>ame of organization</b> OHN VOS FAMILY F			Employer identification number
total more line entry of \$1,000 c	e than \$1,000 for the year from any c	one contributor. Complete co III, enter the total of exclusive mation once. See instruction	26-1587229  ribed in section 501(c)(7), (8), or (10) that plumns (a) through (e) and the following plumns (b) religious, charitable, etc., contributions (a)
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-   -			
-	Transferee's name, address, an	(e) Transfer of gri	ft Relationship of transferor to transferee
-	-		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, an	(e) Transfer of gri	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, an	(e) Transfer of gri	ft Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No.from Part I –	(2). 2. F220 3. 3		(2) 2222. pass of the garden follows
.  -	Transferee's name, address, an	(e) Transfer of gild	ft Relationship of transferor to transferee
-			
-	· <del>-</del>		