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## Form 990-PF

## **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	calen	idar year 2015 or tax year beginning			, and	enaing							
Nan	ne of fou	undation				A Employer	iden	tification	number	,			
Oer	tly Su	rianata Family Foundation											
Nun	nber and	d street (or PO box number if mail is not delivered to street address)		Room/suite			27-7053502  B Telephone number (see instructions)						
	Box 1					B Telephone	num	ber (see	instruction	ns)			
City	or town		ZIP code			(000) 004 0000							
Que	echee		05059			(802) 864-8000							
Fore	eign cou	intry name Foreign province/state/county	Foreign postal code			C If exemption application is pending, check here ▶							
			e			Foreign organizations meeting the 85% test, check here and attach computation							
G	Check												
		Final return Amended ret											
		Address change    Name chang											
Н	Check	type of organization X Section 501(c)(3) exempt pri	vate foundation	ate foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here ►						
	Section	on 4947(a)(1) nonexempt charitable trust 🔲 Other taxa	able private fo	unda	tion	Section 50	,, (D)(	1)(/-), (///	ECK HEIG		٠ ـ		
ı	Fair m	narket value of all assets at J Accounting method	X Cash	ПА	ccrual	<b>*</b> 16116			2046				
	end of	f year (from Part II, col (c), Other (specify)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here				on ► [					
		6) ▶ \$ 123,826 (Part I, column (d) must be	e on cash bası	s)					,		_		
	ırt l	Analysis of Revenue and Expenses (The total of				<b>.</b>	(c) Adjusted net income			(d) Dis	bursements		
		amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue expenses per			t investment			for charitable				
		equal the amounts in column (a) (see instructions) )	books		"	ncome				irposes basis only)			
Ī	1	Contributions, gifts, grants, etc , received (attach schedule)			, en	Α	্ৰুক্তৰ ক'	434) \$**	, , r, , ,	L'	resident in a '		
-	2	Check ► freezewa (attach schedule)  Check ► freezewa (attach schedule)	1		,		ž		`	<u> </u>	\$ 7		
	3	Interest on savings and temporary cash investments								°ij "ij'≢',	-441145		
	4	Dividends and interest from securities		3.511		3,511				, · · · · · · · · · · · · · · · · · · ·			
İ	5a	Gross rents		<del>,,,,,,</del>	-	0,011				15'	. 2346. is		
	b	Net rental income or (loss)	,					·····		9	A.742		
_	6a	Net gain or (loss) from sale of assets not on line 10		,254	. ,	· 60				30.			
9	b	Gross sales price for all assets on line 6a 17,667	······································	<u>,,</u>	<u> </u>	' 1657	1	1 -		7	1727 1 1		
Revenue	7	Capital gain net income (from Part IV, line 2)	,			7,254				<b>†</b>	-		
6	8	Net short-term capital gain			***					111	3/1.)(1.) 16.1°		
	9	Income modifications								<u> </u>			
	10a	Gross sales less returns and allowances					ä		-	,	-		
	b	Less Cost of goods sold									· · · · · ·		
	c	Gross profit or (loss) (attach schedule)											
ı	11	Other income (attach schedule)			<u> </u>			-					
	12	Total. Add lines 1 through 15 ECENTED	10	,765		10,765			0				
	13	Compensation of officers, directors, trustees, etc.		•									
enses	14	Other employee salaries and wages											
ž.	15	Other employee salaries and wages Pension plans, employee benefits 0 4 2016											
Expe	16a	Legal fees (attach schedule)			Ī								
	b	Accounting fees (attach schedule) EM. UT	2	2,637									
Ş	С	Accounting fees (attach schedule)  Other professional fees (attach schedule)											
and Administrative	17	Interest											
str	18	Taxes (attach schedule) (see instructions)											
Ξ	19	Depreciation (attach schedule) and depletion											
Ξ	20	Occupancy											
A	21	Travel, conferences, and meetings											
힏	22	Printing and publications .											
	23	Other expenses (attach schedule)								<u> </u>			
Operating	24	Total operating and administrative expenses.			l		_						
풀		Add lines 13 through 23		2,637		0	<u> </u>		0	<u> </u>	(		
ē	25	Contributions, gifts, grants paid .		7,000						<u> </u>	7,000		
5	26	Total expenses and disbursements. Add lines 24 and 25		9,637		0	L		0	<u></u>	7,000		
	27	Subtract line 26 from line 12											
	а	Excess of revenue over expenses and disbursements		1,128	<u></u>		L			<u> </u>			
	b	Net investment income (if negative, enter -0-)				10,765							
	С	Adjusted net income (If negative, enter -0-)	1						0	J			

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Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	ions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1						
b	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check  1	_		108	<b></b> -		
Ü	here $\blacktriangleright$ X and enter 1% of Part I, line 27b	,		_100			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				İ		
•	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0			
3	Add lines 1 and 2			108			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	Д					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			108	1. 1 % 48.8		
6	Credits/Payments			(%) (%)			
а	2015 estimated tax payments and 2014 overpayment credited to 2015			1664	1		
b	Exempt foreign organizations—tax withheld at source		i. Protin		PW		
C	Tax paid with application for extension of time to file (Form 8868)						
_d	Backup withholding erroneously withheld  6d  6d	× 83383	لننا	7 X			
7	Total credits and payments Add lines 6a through 6d	+		0	├		
8	Enter any penalty for underpayment of estimated tax. Check here	+		108	<del>                                     </del>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10	+-		0	<del></del>		
10 11	Enter the amount of line 10 to be Credited to 2016 estimated tax			0	<del>                                     </del>		
	VII-A Statements Regarding Activities				<u> </u>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No		
	participate or intervene in any political campaign?		1a		Х		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see						
	Instructions for the definition)?		1b		Х		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		B, 1				
	published or distributed by the foundation in connection with the activities		الله الله الله الله الله الله الله الله				
С	Did the foundation file Form 1120-POL for this year?		1c		X		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$		der gen skytt				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			.4.4.3			
	on foundation managers ►\$		2	16.00	X		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	<u> </u>	X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	<u> </u>	X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A	<b>└</b>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T		5	$\vdash$	X		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
-	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		L				
	conflict with the state law remain in the governing instrument?		6	Х			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	Х	<u> </u>		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				j		
	VT				1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			ļ	ļ		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	<b>↓</b>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				ļ		
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If		_	1			
4.5	"Yes," complete Part XIV		9	├─	X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		x		

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