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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.

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

OMB No 1545-0052

		Nent of the Treasury Revenue Service ► Do not enter s ► Information about For		•		-			pen to Public Inspection
-		alendar year 2015 or tax year beginning			1/03,2015				12/31, 20 15
_		of foundation				-		A Employer identi	fication number
_	BLU	E SANDS FOUNDATION					_	37-179739	
	Numb	er and street (or P O box number if mail is not delivere	d to stree	t address)		Room/suit	e	•	ber (see instructions)
	7.01	O MEN MODIL AND AND						(2	02) 607-2300
-		2 NEW YORK AVE, NW r town, state or province, country, and ZIP or foreign po	etal code	 		550			
	City O	town, state of province, country, and zir of loteign po	islai wue					C If exemption applic	cation is
	WAS	HINGTON, DC 20005						pending, check her	ē ▶ □
7		eck all that apply. X Initial return		Initial return	of a former r	ublic cha	rity	D 4 5	
	- 0	Final return	 	Amended re	•		,	 D 1 Foreign organiz 2 Foreign organiz 	
		X Address change	-	Name chang				85% test, check	
F	1 Che	eck type of organization X Section 501	(c)(3) e	exempt private t	oundation				
		Section 4947(a)(1) nonexempt charitable trust	\Box	Other taxable pr	ivate founda	tion			b)(1)(A), check here
I	Faii	market value of all assets at JAcc	ounting	method X C	ash Acc	rual			s in a 60-month termination
			-	pecify)			<u> </u>	under section 507(b)(1)(B), check here . >
_			`	(d) must be on cas	sh basis)				
	Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a)	Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	e	xpenses per books	incon		,-	income	purposes
_		column (a) (see instructions))	┼	19,580.					(cash basis only)
2010	1 2	Contributions, gifts, grants, etc., received (attach schedule). Check If the foundation is not required to	<u> </u>	19,300.					
วี	3	Interest on savings and temporary cash investments.		 					
ŧ	4	Dividends and interest from securities							
⊣	1	Gross rents							
j	1	Net rental income or (loss)							
\sim		Net gain or (loss) from sale of assets not on line 10							
Revenue	b	Gross sales pnce for all assets on line 6a							
	7	Capital gain net income (from Part IV, line 2) .							<u> </u>
	8	Net short-term capital gain							ļ
3	9 10 a	Income modifications		-					
Ω	}	and allowances	 						
	1	Less Cost of goods sold .	 						
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)							
	12	Total. Add lines 1 through 11		19,580.					1
_	13	Compensation of officers, directors, trustees, etc		0.					
9	14	Other employee salaries and wages							
ğ	15	Pension plans, employee benefits	L					<u>.</u>	<u> </u>
Fxnen	16 a	Legal fees (attach schedule) ATCH 1		9,455.		}			
ų.	ь	1 (1) 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>						
ŧ	C	Other professionalles (attam scheduli)							
1	17	Interest	ļ						
<u>.</u>	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion .							<u> </u>
Administrative	20	Occupancy							
Ā	21	Travel, conferences, and meetings	-						
and	22	Printing and publications							
Ę	23	Other expenses (attach schedule) ATCH .2		10,125.				10,125.	10,125
ij	23 24 25	Total operating and administrative expenses.]		<u>.</u>	
79.0		Add lines 13 through 23	<u> </u>	19,580.				10,125.	10,125
Ö		Contributions, gifts, grants paid	<u> </u>	10 500				10 105	10 105
-	26	Total expenses and disbursements Add lines 24 and 25	├	19,580.		0.		10,125.	10,125
	27	Subtract line 26 from line 12		0.					
	1	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	ļ			0.			
	1	Adjusted net income (if negative, enter -0-).	 						

JSA For Paperwork Reduction Act Notice, see instructions. 5E1410 1 000 2730KC 7704 4/5/2016 5:28:0

Form 990-PF (2015)

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		I Phance Charte	Attached schedules and amounts in the	Beginning of year	End	of year
	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing			
	1		cash investments			
	3	Accounts receivable				
		Less allowance for dou	btful accounts ►			
	4	Pledges receivable ▶				
		Less allowance for dou	btful accounts ►			
	5	Grants receivable				<u> </u>
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (att	tach schedule) (see instructions)		· · · · · · · · · · · · · · · · · · ·	
	i		eceivable (attach schedule) 🕨			
		Less allowance for doub	btful accounts ▶			
ets	8	Inventories for sale or us	e			
ssets	9	Prepaid expenses and de	eferred charges			
A			e govemment obligations (attach schedule)		<u> </u>	
	b	Investments - corporate	stock (attach schedule)			
	4.4 C	Investments - corporate	bonds (attach schedule)			
	11	Investments - land, buildings and equipment basis	·			
		Less accumulated deprecia (attach schedule)	ition >			
			loans			
	13 14	Investments - other (atta Land, buildings, and	ach schedule)			
		equipment basis	>			İ
		Less accumulated deprecia (attach schedule)	tion			
ļ		Other assets (describe >				
			completed by all filers - see the		_	_
\dashv		instructions Also, see pa	age 1, item I)	0.	0.	0
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable,				{
Liabilities	19	Deferred revenue				
ij		Loans from officers, director	rs, trustees, and other disqualified persons			
ia B		• •	tes payable (attach schedule) L			
7	22	Other liabilities (describe	· -)			ļ
ļ				0	0	
-			s 17 through 22)	0.	0.	
ွှ			ow SFAS 117, check here . ▶			
alances		•	24 through 26 and lines 30 and 31.	Ì		<u> </u>
딜		Unrestricted				
Bal		Temporarily restricted .				
Net Assets or Fund B	26	Permanently restricted.				
<u>.</u> =			not follow SFAS 117, ► X			
5			plete lines 27 through 31.			
S			opal, or current funds			
Se			land, bldg , and equipment fund		 	
AS			lated income, endowment, or other funds	0.		
e			balances (see instructions)	- 	<u> </u>	
2			net assets/fund balances (see	0.	0.	
					<u> </u>	
			nges in Net Assets or Fund Balar		must agree with	
7			alances at beginning of year - Part II			
•			d on prior year's return)			
			line 27a			-
			led in line 2 (itemize) ▶			
			lino 2 (rtomizo)		5	
5	Deci	eases not included in	alances at end of year (line 4 minus	line 5) - Part II column (0.
_0	iota	iner assers of fund b	aiances at end of year time 4 minus	mie s) - Fart II, Column (t	o), mic 30 0	Form 990-PF (2015)

	and Losses for Tax on Invided describe the kind(s) of property sold		(b) How acquired	(c) Date	(d) Date sold
	prick warehouse, or common stock, 200		P - Purchase D - Donation	acquired (mo, day, yr)	(mo, day, yr)
1a			D - Donation	(, 223, 3.)	
b					
C			ļ ——— `		
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b					
C					
d			L		
е					
Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g	ain minus
(ı) 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		(k), but not less t Losses (from co	han -0-) or
a					
b					
С					
d					
е					
2 Capital gain net income		f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
3 Net short-term capital ga	in or (loss) as defined in sections				
		structions) If (loss), enter -0- in $)$)		
-	· · · · · · · · · · · · · · · · · · ·		,		
Part V Qualification (Inder Section 4940(e) for Re	educed Tax on Net Investment I	ncome		
				no \	
(For optional use by domestic	c private foundations subject to tr	he section 4940(a) tax on net invest	ment incor	ne)	
If . = 4 - = 40.404 (V/O)	NO.	T AVAILABLE FOR INITIAL	סמ סגדע	THOMS	
If section 4940(d)(2) applies,	leave this part blank	I AVAILABLE FOR INTITIO	LEAN NE	TORNS	
Alex the formulation lights for	the costing 4042 toy on the distri	butable amount of any year in the b	aca narias	, –	Yes N
	not qualify under section 4940(e)	butable amount of any year in the b	ase period	' L_	Yes N
			a any onte		···
(a)		ar, see the instructions before makir	ig any enu I	(d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra	
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	The value of Horizanianians are assets	 	(col (b) divided by	COI (C))
2014				,,	
2013		 	 		
2012					
2011					
2010	<u></u>	<u> </u>	 		
2 Total of line 1, column (d	0		2		
3 Average distribution ratio	for the 5-year base period - divi	de the total on line 2 by 5, or by the			
number of years the four	ndation has been in existence if le	ss than 5 years	3		
4 Enter the net value of no	ncharitable-use assets for 2015 f	rom Part X, line 5	4		
5 Multiply line 4 by line 3.			5		
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distribution	ons from Part XII, line 4		8		

Page 4	
ns)	
0.	

Form	990-PF (2015) BLUE SANDS FOUNDATION 37-179	7396	F	age 4
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	iction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here and enter 1% of Part I, line 27b.			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			
Ь	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)6c			
ď	Backup withholding erroneously withheld			0
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded 11			
	rt VII-A Statements Regarding Activities			T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	- <u>-</u> -	Yes	No X
	participate or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	4.		x
	Instructions for the definition)?	1Ь		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			[
	published or distributed by the foundation in connection with the activities	1c		х
	Did the foundation file Form 1120-POL for this year?			
a	(1) On the foundation \$ (2) On foundation managers \$ \$			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
e	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
2	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of]
,	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
10	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the 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) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	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		X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	DC,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G ^o If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9	X	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	Х	<u> </u>
	Fo	m 99	0-PF ((2015)

Pa	rt VII-A Statements Regarding Activities (continued)			
11			Yes	No
• • •	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		Х
42		<u> </u>		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	40		x
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	Х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_		L
	Website address HTTP://BLUESANDS.ORG/			
14	The books are in care of ► KAREN DONAHUE Telephone no ► 202-607	-230	<u> </u>	
	Located at ► 1212 NEW YORK AVE, NW, SUITE 550 WASHINGTON, DC ZIP+4 ► 20005			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
10	During the year did the foundation (either directly or indirectly)			
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(, , , , , , , , , , , , , , , , , , ,			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disquamed parson in the second			
	(c) and government of the second of the seco			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes X No			
	(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)?	_1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		- 1	
	were not corrected before the first day of the tax year beginning in 2015?	1c		Х
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))	1	l	
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
а	6e, Part XIII) for tax year(s) beginning before 2015?			
		l		
	If "Yes," list the years	ł	- 1	
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	۵. ا	- {	v
	all years listed, answer "No" and attach statement - see instructions)	2b		<u>X</u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1		
	·	İ		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1	- 1	
	at any time during the year?	l	1	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or	į		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1	- 1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	ļ	J	
	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	J	
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	ļ	Х

Form	990-PF (2015) DECE SANDS FOR				1797390	Page 0
Рa	rt VII-B Statements Regarding Activities	for Which Form	4720 May Be Rec	uired (continued)		
5а	During the year did the foundation pay or incur any amo	ount to				
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	on 4945(e))?	. Yes X No	,	
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or	n,		
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or o				,	
	(4) Provide a grant to an organization other than a					
	section 4945(d)(4)(A)? (see instructions)		=		.	
	(5) Provide for any purpose other than religious, cl				´	
	purposes, or for the prevention of cruelty to children					
ь	If any answer is "Yes" to 5a(1)-(5), did any of the				1 1	
D	Regulations section 53 4945 or in a current notice regains					l x
		=			5b	^
	Organizations relying on a current notice regarding disa				니	,]
С	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the	grant?		Yes No	•	
	If "Yes," attach the statement required by Regulations se	ction 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiur	ms		
	on a personal benefit contract?			. Yes X No) [
b	Did the foundation, during the year, pay premiums, dire			act?	6b	X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	Yes X No	,	
ь	If "Yes," did the foundation receive any proceeds or har	ve any net income attr	ributable to the transacti	on?	7b	ĺ
Pa	Information About Officers, Directo	rs, Trustees, Fou	Indation Manager	s, Highly Paid Emp	oloyees,	
	and Contractors			to do at a seri		
1_	List all officers, directors, trustees, foundation r	(b) Title, and average		(d) Contributions to	/-> F	
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense other allo	
		devoted to position		and deterred companiation		
ATC	н 3	}	0.	0.		0.
	 					
						
			•			
						
		}				
		لـــــــــــــــــــــــــــــــــــــ		<u></u>		
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line	e 1 - see instruction	ons). If no	one, enter
	NONE.			(d) Contributions to		
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense other allo	e account,
		devoted to position		compensation	Outer and	Jilances
] —	11			
	NONE					
						
		[ĺ		
		 				
		[1		
		<u> </u>		L		
ota	number of other employees paid over \$50,000	<u></u>	<u> </u>	<u> </u>		
					Form 990	-PF (2015)

BLUE SANDS FOUNDATION

	90-PF (2015) .		Page 6
Pari	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn founda	tions,
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	
	Average of monthly cash balances	1b	
	Fair market value of all other assets (see instructions)		
	Total (add lines 1a, b, and c)	1d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ► X and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	
	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI.). 2b	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
-	line 1	7	
Pari	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,125.
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
-	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	10,125.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
•	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		10,125.
3	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	Note: The amount on line o will be used in Fatt V, Column (b), in subsequent years when co	alouiding v	modici die iodilodion

Form 990-PF (2015)

Page 9

Pa	rt XIII Undistributed Income (see instr	ructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				0.
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only				
b	Total for pnor years 20 13 ,20 12 ,20 11				<u> </u>
3	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014 L	-			
	Total of lines 3a through e			· 	<u> </u>
7	line 4 ▶ \$ 10,125.	1			
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
Ü	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				
Ī	required - see instructions)				
d	Applied to 2015 distributable amount				
е	Remaining amount distributed out of corpus	10,125.			
5	Excess distributions carryover applied to 2015. (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:	10,125.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	10/123.			
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed				<u> </u>
	income for which a notice of deficiency has		,		ļ
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable	1			1
	amount - see instructions				
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see		Ĭ		1
	instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be		1		
-	distributed in 2016				
′	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)				
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)			- 	
9	Excess distributions carryover to 2016.	10.105	ĺ		
	Subtract lines 7 and 8 from line 6a	10,125.			
	Analysis of line 9				
	Excess from 2011		1		
	Excess from 2012				
	Excess from 2013	İ			
	Excess from 2014				
					5 900 PE (0045)

11/03/2015

(d) 2012

Prior 3 years

(c) 2013

b Check box to indicate whether the foundation is a private operating foundation described in section

(b) 2014

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling

Tax year

(a) 2015

10,125.

10,125.

2 a Enter the lesser of the ad-

justed net income 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 for active conduct of exempt activities. Subtract line

2d from line 2c Complete 3a, b, or c for the afternative test relied upon a "Assets" alternative test - enter (1) Value of all assets . . (2) Value of assets qualifying under section 4942(j)(3)(B)(i)... b "Endowment" alternative testenter 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....

f or the minimum investment return from Part X for each year listed **b** 85% of line 2a C Qualifying distributions from Part

1/03/201 X 4942(J)(3) or 4942(J)(5)
2012	(e) Total
·· ··· ·	
	10,125.
	10,125.
<u>,</u>	
\$5,000 o	r more in assets at
tions recei 507(d)(2))	ved by the foundation

(4) Gross investment income. Supplementary Information (Complete this part only if the foundation had \$5,000 or r Part XV any time during the year - see instructions.)

1	Information	Regarding	Foundation	n Managers:
---	-------------	-----------	------------	-------------

a List any managers of the foundation who have contributed more than 2% of the total contributions received before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

HOSSEIN FATEH & DALIA FATEH

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally ! ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

	N/A
2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
	Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d
ě	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
	N/A
Ì	The form in which applications should be submitted and information and materials they should include:
	ONLINE APPLICATION THROUGH WEBSITE
(Any submission deadlines
	N/A

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

N/A

JSA 5E1490 1 000

Page 11

Part XV Supplementary Information (Jonanaea)			
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Recipient Name and address (home or business) a Paid during the year	any foundation manager or substantial contributor	recipient	contribution	
<u> </u>				
Total	· · · · · · · · · · · · · · · · · · ·			
b Approved for future payment				
Total				

JSA 5E1491 1 000

Page **12**

Part XV	I-A Analysis of Income-Prod	ucing Act	ivities			
Enter gross	s amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_						(Occ manuchoris)
			·· ···			
						
						
						
	and contracts from government agencies					
_	rship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities					_
	tal income or (loss) from real estate					
	t-financed property					
	debt-financed property					
	al income or (loss) from personal property.					
	nvestment income					<u></u>
	(loss) from sales of assets other than inventory					
9 Net inco	ome or (loss) from special events					
10 Gross p	profit or (loss) from sales of inventory					
11 Other re	evenue a			ļ		
b			·		<u> </u>	
с						
d						
e				<u> </u>		
	l Add columns (b), (d), and (e)			l	<u> </u>	
13 Total. A	dd line 12, columns (b), (d), and (e)			• • • • • •	¹³	
	heet in line 13 instructions to verify calcu-B Relationship of Activities		naamuliahmant of Ex	omnt Dur	20000	
Part XVI	T					
Line No.	Explain below how each activity					
lacktriangledown	accomplishment of the foundation	n's exemp	t purposes (other than b	y providing	funds for such purpose:	s) (See instructions)
	 			.		
	 					
					·	
	 					
						· ·
					· · · · · · · · · · · · · · · · · · ·	
	<u> </u>					
						_
					 	
			 			
					· · · · · · · · · · · · · · · · · · ·	
	l					

BLUE SANDS FOUNDATION

Pari	XVII	Information R Exempt Orga		nsters to and trar	isactions a	and Relation	iships With Non	charit	able
1	Did the			ngage in any of the fo	llowing with	any other org	anization described		Yes No
		_	•	ection 501(c)(3) organ	_				
		zations?			,	,			
	-		ng foundation to a	noncharitable exempt	t organization	of			
			-		-			1a(1)	X
	(1) Ou	har secate						1a(2)	- X
		transactions					• • • • • • • • • • • • • • • • • • • •	14(2)	-
			naharitahla awam	-4i					X
	(1) Sa (2) D	rebonne of access to	nchantable exem	pt organization					$\frac{x}{x}$
	(2) Pu	rchases of assets th	om a noncharitab	le exempt organization.		• • • • • • •	• • • • • • • • • •	1b(2)	$\frac{\Lambda}{X}$
				ssets				1b(3)	
									X
									X X
				or fundraising solicitat					X
				s, other assets, or paid o					X
				" complete the follow					
				es given by the report					
	value i	in any transaction o	r sharing arrange	ement, show in column	ı (d) the valu	ue of the good	s, other assets, or s	ervices	received
(a) Lir	ne no	(b) Amount involved	(c) Name of no	ncharitable exempt organizati	on (d) [Description of trans	sfers, transactions, and shar	nng arran	gements
		N/A			N/F	<u> </u>			
_									
									
					1				- <u>-</u>
					1				
_									
						-			
			f			·		*	
									
				· -					
					-				
			 						
					-				
			<u> </u>			 			
		•	•	ated with, or related				—	(i)
		` '	•	er than section 501(c)((3)) or in sect	tion 527?		Yes	s X No
b	If "Yes	" complete the follo,				,			
		(a) Name of organizatio	n .	(b) Type of organiz	ation	<u> </u>	(c) Description of relations	hip	
				. <u></u>		ļ			
		<u></u> _							
							<u> </u>		
	Under	penalties of perjury, I declar	are that I have examine	d this return, including accompa	anying schedules a	and statements, and	to the best of my knowledg	e and be	hef, it is true,
·:	- (ct, and complete Declaration o	/ preparer (other than tax	payer) is based on all information of	of which preparer h	as any knowledge			
Sign		Clarke So	11	18/15/14	Zx.	cc. Directe	May the IRS with the pre	i discuss eparer sh	
lere	Sigr	nature of officer or trustee	<u> </u>	Date	Trtle		(see instructions	` 🗔	
								· <u> </u>	لتيت
		Print/Type preparer's na	me	Preparer's signature		Date	/ Check If F	אודי	
Paid		PHILIP H CORN		1/2		7/19/		P0025	2478
ren	arer					//	1 20 14		
		. 50	HNREZNICK LI		OR		Firm's EIN ► 22-14	1009	
JSE	Only		0 EAST PRATI			21202 2122	410.70	22. 404	0.0
		BA	LTIMORE, MI	J		1202-3100	Phone no 410-78		
							Fon	m 990-	PF (2015)

Schedule B

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

Schedule of Contributors

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990, Form 990-EZ, or Porm 990-FF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs.gov/form990. Name of the organization Employer identification number

BLUE SANDS FOUNDATIO	N		27 472226		
Organization type (check one)		37-1797396		
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) n	onexempt charitable trust not treated as a private fou	ndation		
527 political organization					
Form 990-PF	X 501(c)(3) ex	empt private foundation			
4947(a)(1) nonexempt charitable trust treated as a private foundation					
501(c)(3) taxable private foundation					
Check if your organization is on Note. Only a section 501(c)(7 instructions	•	Rule or a Special Rule. Ition can check boxes for both the General Rule and a S	Special Rule. See		
General Rule					
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions					
Special Rules					
regulations under se 13, 16a, or 16b, and	ections 509(a)(1) and I that received from a	501(c)(3) filing Form 990 or 990-EZ that met the 33 1. 170(b)(1)(A)(vi), that checked Schedule A (Form 990 on ony one contributor, during the year, total contributions orm 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Co	or 990-EZ), Part II, line of the greater of (1)		
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
990-EZ, or 990-PF), but it mus	t answer "No" on Par	General Rule and/or the Special Rules does not file So t IV, line 2, of its Form 990; or check the box on line h t meet the filing requirements of Schedule B (Form 990	l of its Form 990-EZ or on its		

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization BLUE SANDS FOUNDATION

Employer identification number 37-1797396

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	HOSSEIN FATEH 2910 WOODLAND DR. WASHINGTON, DC 20008	\$\$.	Person X 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 Payroli 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 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)		

Name of organization BLUE SANDS FOUNDATION

Employer identification number

37-1797396

Part Nonca	ash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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
(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

2730KC 7704 4/5/2016

Employer identification number

				37-1797396			
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the	the year from any ons completing Par e year. (Enter this ir	one contributor. t III, enter the tota formation once.	Complete columns (a) through (e) and I of exclusively religious, charitable, etc.			
	Use duplicate copies of Part III if additi	ional space is need	ed.				
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		(e) Trans	fer of gift				
	Transferee's name, address, an	d ZIP + 4	Relatio	onship of transferor to transferee			
							
(a) No.							
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		(-) T		1			
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relatio	onship of transferor to transferee			
			-				
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Department of how wife in held			
Part I	(b) i dipose oi giit	(c) 03e		(d) Description of how gift is held			
							
		(e) Transf	er of gift				
	Transferee's name, address, and	d ZIP + 4	Relatio	nship of transferor to transferee			
							
(a) No. from Part i	(b) Purpose of grft	(c) Use	of gift	(d) Description of how gift is held			
							
		(e) Transfo	er of gift				
	Transferee's name, address, and	d ZIP + 4	Relatio	nship of transferor to transferee			
							
							

BLUE SANDS FOUNDATION

ATTACHMENT 1	•	ገሀՏግঘን		INCOME
				INCOME
		REVENUE AND	EXPENSES	PER BOOKS
	FORM 990PF, PART I - LEGAL FEES			DESCRIPTION

9,455.	9,455.	
	TOTALS	

LEGAL FEES

ATTACHMENT 2

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION

WEB DESIGN

REVENUE

AND

EXPENSES

PER BOOKS

10,125.

TOTALS

10,125.

ATTACHMENT 3

FORM 990PF, PART VIII

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DALIA FATEH 1212 NEW YORK AVE, NW 550 WASHINGTON, DC 20005	DIRECTOR .10	·	°	· o
HOSSEIN FATEH 1212 NEW YORK AVE, NW 550 WASHINGTON, DC 20005	DIRECTOR .10	ċ	· o	ċ
CHRISTOPHER WARNKE 1212 NEW YORK AVE, NW 550 WASHINGTON, DC 20005	DIRECTOR .10	Ö	o	· 0
ERIC HIRSCH 1212 NEW YORK AVE, NW 550 WASHINGTON, DC 20005	DIRECTOR .10	Ċ	°0	Ċ
LEANDRO ALVES 1212 NEW YORK AVE, NW 550 WASHINGTON, DC 20005	DIRECTOR .10	· 0	Ö	Ö

1	•		
ATTACHMENT 3 (CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	Ö	0
ATTACE	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	Ö	0
	COMPENSATION	.0	0
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	EXECUTIVE DIRECTOR	GRAND TOTALS
FORM 990PE, PART VIII - LISI	NAME AND ADDRESS	JADA SPRIGGS 1212 NEW YORK AVE, NW 550 WASHINGTON, DC 20005	