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Department of the Treasury

Internal Revenue Service

DLN: 93491215003196

OMB No 1545-0052

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 <u>www.irs.gov/form990pf</u>.

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

	e of four	ndation ind Joseph Massoud Family		A Employer identification number					
Fou	undation	·		46-2495320					
		tion Source street (or P O box number if mail is not delivered to street address)	Room/suite	BTelephone number (see instructions	5)				
		n Source 501 Silverside Rd		(800) 839-1754					
		, state or province, country, and ZIP or foreign postal code DE 198091377		C If exemption application is pending	g, check here 🕨 🦵				
G Ch	eck all	I that apply Initial return Initial return of a fo Final return Amended return Address change Name change	ormer public charity	D 1. Foreign organizations, check he 2. Foreign organizations meeting	• ,				
u Ch	ack typ	pe of organization Section 501(c)(3) exempt private	- foundation	test, check here and attach cor E If private foundation status was to	mputation erminated				
		1947(a)(1) nonexempt charitable trust 「Other taxable	e private foundation	under section 507(b)(1)(A), check					
		et value of all assets at end JAccounting method From Part II. col. (c) Other (specify)	Cash Accrual	F If the foundation is in a 60-month					
		rom Part II, col. (c), Other (specify) \$ 4,523,077 (Part I, column (d) must I	be on cash basıs.)	under section 507(b)(1)(B), check	k here 🕝 ı				
	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	Revenue and expenses per	Net investment Adjusted net	Disbursements for charitable				
	1	necessarily equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach	(a) books	(b) income (c) income	purposes (d) (cash basis only)				
	•	schedule)	1,405,446						
	2	,	1,703,750						
	_	Check F if the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments	559	559					
	4	Dividends and interest from securities	99,928	99,928					
	5a	Gross rents							
	ь	Net rental income or (loss)							
<u>φ</u>	6a	Net gain or (loss) from sale of assets not on line 10	216,557						
Revenue	ь	Gross sales price for all assets on line 6a 35,806							
	7	Capital gain net income (from Part IV, line 2)		216,557					
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)	54,870	-9,330					
	12	Total.Add lines 1 through 11	1,777,360	307,714					
	13	Compensation of officers, directors, trustees, etc	0						
	14	Other employee salaries and wages							
ě.	15	Pension plans, employee benefits							
Expense	16a	Legal fees (attach schedule)							
<u>\$</u>	Ь	Accounting fees (attach schedule)							
	С	Other professional fees (attach schedule)							
and Administrative	17	Interest							
¥	18		% 800						
	19	Depreciation (attach schedule) and depletion							
	20	Occupancy							
<u> </u>	21	Travel, conferences, and meetings							
	22	Printing and publications	104.238	94.052	20 186				
Operating	23	· · · · · ·	104,238	84,052	20,186				
⊬ g	24	Total operating and administrative expenses.	105,038	84,052	20,186				
ă O	35	Add lines 13 through 23	401,000	0 1 ,032	401,000				
_	25 26	<u> </u>	701,000		701,000				
		Total expenses and disbursements. Add lines 24 and 25	506,038	84,052	421,186				
	27	Subtract line 26 from line 12	1 271 222						
	a	Excess of revenue over expenses and disbursements	1,271,322	223,662					
	b c	Net investment income (If negative, enter -0 -) Adjusted net income(If negative, enter -0 -)							
For F		rork Reduction Act Notice, see instructions.		Cat No 11289X Form	990-PF (2015)				

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year				
L		should be for end-or-year amounts only (see instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value				
	1	Cash—non-interest-bearing							
	2	Savings and temporary cash investments	511,510	351,42	7 351,427				
	3	Accounts receivable 🟲							
		Less allowance for doubtful accounts 🕨							
	4	Pledges receivable 🟲							
		Less allowance for doubtful accounts -							
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other							
		disqualified persons (attach schedule) (see instructions)							
	7	O ther notes and loans receivable (attach schedule)							
		Less allowance for doubtful accounts 🟲							
o.	8	Inventories for sale or use							
Assets	9	Prepaid expenses and deferred charges							
As	10a	Investments—U S and state government obligations (attach schedule)							
	b	Investments—corporate stock (attach schedule)	1,968,119	3,377,02	5 2,887,850				
	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)	1,472,499	1,494,99	1,283,800				
	14	Land, buildings, and equipment basis 🟲							
		Less accumulated depreciation (attach schedule) ▶							
	15	O ther assets (describe 🟲)							
	16	Total assets (to be completed by all filers—see the							
		instructions Also, see page 1, item I)	3,952,128	5,223,45	4,523,077				
	17	Accounts payable and accrued expenses							
	18	Grants payable							
ФŞ	19	Deferred revenue			_				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
ap	21	Mortgages and other notes payable (attach schedule)			_				
_	22	Other liabilities (describe)							
	23	Total liabilities(add lines 17 through 22)			0				
		Foundations that follow SFAS 117, check here							
φŞ		and complete lines 24 through 26 and lines 30 and 31.							
NC.	24	Unrestricted							
) (1)	25	Temporarily restricted							
Net Assets or Fund Balance	26	Permanently restricted							
'n		Foundations that do not follow SFAS 117, check here							
Ä		and complete lines 27 through 31.							
S	27	Capital stock, trust principal, or current funds							
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund							
٨s	29	Retained earnings, accumulated income, endowment, or other funds	3,952,128	5,223,45	0				
₽	30	Total net assets or fund balances(see instructions)	3,952,128	5,223,45					
Z	31	Total liabilities and net assets/fund balances(see instructions)	3,952,128	5,223,45					
D۶	rt III		, ,	, ,					
		Total net assets or fund balances at beginning of year—Part II, column	(a) line 20 (must sa	uraa T					
1		with end-of-year figure reported on prior year's return)	• • • •		2 052 120				
2				- 1	3,952,128				
2		Enter amount from Part I, line 27a			1,271,322				
3 4		Other increases not included in line 2 (itemize)			E 222 450				
		Add lines 1, 2, and 3		5	5,223,450				
5		Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5)—P			5,223,450				
6		- rotar net assets of rund parances at end of year (line 4 linnus line 5)—P	aicii, colullii (D), III		J,ZZJ,#3U				

the Part VI instructions

	List and describe (a) 2-story brick ware		property sold (e g , r nmon stock, 200 shs		•	How acquire P—Purchas (b) D—Donation	e (c)	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	Publicly-traded Secu	rities							
ь	Passthrough K1 Capi	tal Gaın							
С	<u> </u>								
d									
			Depreciation allowe	2 d	Cost	or other basis	<u> </u>	Gair	n or (loss)
(€	e) Gross sales price	(f	•	- u		xpense of sale			(f) minus (g)
а	3	35,806					0		35,806
b									180,751
С									
d									
<u>е</u>									
	mplete only for assets s	howing gain ir	column (h) and own	ed hv	I the foundation	on 12/31/69		Gains (Col	(h) gain minus
			Adjusted basis	cu b,		ess of col (ı)	\dashv ,	•	ot less than -0-) or
(i)	FMV as of 12/31/69		(j) as of 12/31/69			col (j), if any	(I)		(from col (h))
а									35,806
b									
С									
d									
e									
3	Net short-term capita If gain, also enter in F in Part I, line 8 .			ons 12	22(5) and (6)] 2		216,557
Part	V Qualification U	Inder Secti	on 4940(e) for I	Redu	ced Tax on	Net Investm	ent I	ncome	
	tional use by domestic p on 4940(d)(2) applies, l	rıvate foundat	ıons subject to the s						
	e foundation liable for the " the foundation does no						period?)	│ Yes
1 E n	ter the appropriate amou	unt in each col	umn for each year, s	ee ins	tructions befo	re makıng any e	ntries		
	(a) e period years Calendar or tax year beginning in)	Adjusted qua	(b) alifying distributions	Net	(c) value of nonchar	table-use assets		(d) Distribution (col (b) divided	n ratio
	2014		203,559			3,435,503		, ,	0 059252
	2013		399,740			1,107,263			0 361016
	2012		0			0			0 0
	2011		0			0			0 0
	2010		0			0			0 0
2	Total of line 1, column	• •					2		0 420268
3	Average distribution in the number of years t	he foundation	has been in existenc	e if les	ss than 5 year	s	3		0 210134
4	Enter the net value of	noncharitable	-use assets for 201	5 from	Part X, line 5		4		4,460,939
5	5 Multiply line 4 by line 3						5		937,395
6	Enter 1% of net inves	tment income	(1% of Part I, line 2	27b).			6		2,237
7	Add lines 5 and 6						7		939,632
8	8 Enter qualifying distributions from Part XII, line 4						8		421.186

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

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	1040(0)	or 4949 so	0 030	19 of	the inst	ructio		age 4		
			, 01 1310 SC	e pag	10 01	the mst	ructio	113)			
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)										
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V	, check)	1				4,473		
_	here Fand enter 1% of Part I, line 27b			•							
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	ations 6	enter 4% of								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fou	ndation	s only Othe	rs							
_	enter -0-) Add lines 1 and 2				2				4 4 7 2		
3 4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou	 ındatıor	· · · ·	· vrc	3				4,473		
-	enter -0-)	indacioi	is only othe	.13	4						
5											
6	Credits/Payments										
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	,700							
b	Exempt foreign organizations—tax withheld at source	6b									
С	Tax paid with application for extension of time to file (Form 8868)	6c	2	2,773							
d _	Backup withholding erroneously withheld	6d									
7	Total credits and payments Add lines 6a through 6d		_	FI	7				4,473		
8	Enter any penalty for underpayment of estimated tax. Check here $\overline{\varphi}$ if Form.			29 No.	8						
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 .				9						
10 11	Enter the amount of line 10 to be Credited to 2015 estimated tax	iit over	Refunded		10						
	t VII-A Statements Regarding Activities		Kerunded								
1a	During the tax year, did the foundation attempt to influence any national, state	e. or loc	al legislatio	n or di				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	politica	l purposes (s	see In	structi	ons					
	for definition)?						1b		No		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	s and co	pues of any m	nateria	ls						
	published or distributed by the foundation in connection with the activities.										
С	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) impo										
	(1) On the foundation \$ (2) On foundation managers										
е	Enter the reimbursement (if any) paid by the foundation during the year for pol	litical e	xpenditure ta	ax imp	osea						
2	on foundation managers * \$ Has the foundation engaged in any activities that have not previously been re	norted	to the IRS2				2		No		
_	If "Yes," attach a detailed description of the activities.	porteu	to the INS.	•	• •				NO		
3	Has the foundation made any changes, not previously reported to the IRS, in	ıts aove	ernina instrui	ment.	articles	5					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a cont	_	-	•			3		No		
4a	Did the foundation have unrelated business gross income of \$1,000 or more						4a	Yes			
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	Yes			
5	Was there a liquidation, termination, dissolution, or substantial contraction du	uring the	e year?				5		No		
	If "Yes," attach the statement required by General Instruction T.										
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	945)sa	tisfied eithei	r							
	By language in the governing instrument, or	L - 4									
	By state legislation that effectively amends the governing instrument so the state of the s										
7	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 and Part XV.	'II Tes	s, complete i	all II,	, COI. (C),	7	Yes			
8a	Enter the states to which the foundation reports or with which it is registered	see ins	structions)		•						
	►DE										
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	90-PF	to the Attorn	ney							
	General (or designate) of each state as required by General Instruction G? $\it If$	"No," at	tach explanat	ion .			8b	Yes			
9	Is the foundation claiming status as a private operating foundation within the $% \left(1\right) =\left(1\right) \left(1\right) \left($	meanın	g of section	4942	(յ)(3)						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	see inst	tructions for	Part X	(IV)?						
	If "Yes," complete Part XIV						9	\longmapsto	No		
10	Did any persons become substantial contributors during the tax year? If "Yes		n a schedule l	ıstıng	their n	ames					
	and addresses.						10		No		

Pai	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	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ▶ Foundation Source Telephone no ▶ (800) 839	-1754	
	Located at >501 Silverside Road Suite 123 Wilmington DE ZIP+4 >1980913			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	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 over	مما	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			
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
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes 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) A gree 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) Yes No			
Ь	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		
	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 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?			
	If "Yes," list the years > 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
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		ككم	
	if the foundation had excess business holdings in 2015.)	3b	 	<u> </u>
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		ككم	الكمر
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

Pa	rt VII-B	Statements Rega	irding Activities for	⁻ Whi	ch Form 4720	May Be Require	ed <i>(Cor</i>	ntinu	ıed)		
5a	During the	e year dıd the foundatıo	n pay or incurany amoun	it to							
	(1) Carry	on propaganda, or othe	rwise attempt to influenc	e legis	slation (section 494	45(e))?	☐ Yes	₽ N	o		
	(2) Influe	nce the outcome of any	specific public election ((see s	ection 4955), or to	carry					
	on, dıı	rectly or indirectly, any	voter registration drive?				┌ Yes	┌ N	О		
	(3) Provid	de a grant to an individu	al for travel, study, or oth	hersın	nılar purposes?		┌ Yes	┌ N	o		
	(4) Provid	de a grant to an organiza	ation other than a charita	ble, et	tc , organization de:	scribed					
	ın sec	tion 4945(d)(4)(A)? (se	ee instructions)				┌ Yes	r N	o		
			r than religious, charitabl								
	educa	itional purposes, or for t	the prevention of cruelty	to chil	dren or anımals?.		┌ Yes	r N	o		
Ь	If any ans	swerıs "Yes" to 5a(1)-((5), dıd any of the transac	tions 1	faıl to qualıfy under	the exceptions des	scribed ii	n			
	Regulatio	ns section 53 4945 or i	in a current notice regard	ding di	saster assistance ((see instructions)?			5b		
	Organizat	tions relying on a curren	nt notice regarding disast	erass	sistance check here	<u>.</u>		· [
c			n 5a(4), does the foundat								
			diture responsibility for th				┌ Yes	\sqcap N	。 ————————————————————————————————————		
			ured by Regulations sectio								
6a	Did the fo	undation, during the yea	ar, receive any funds, dire	ectly o	or indirectly, to pay	premiums on					
						•	┌ Yes	r N	o		
ь			ar, pay premiums, directl						6b	No	
		6b, file Form 8870.	,, ,, ,	,	,, ,						
7a			was the foundation a part	v to a	prohibited tax sheli	ter transaction?	┌ Yes	V N	. ———		
	-	-	any proceeds or have an						7b		
			t Officers, Directors							ees.	
Pa		and Contractors		-,			,	, . –	,	,	
1	List all off	icers, directors, trustee	s, foundation managers a	and the	eir compensation (see instructions).					
			Title, and average	(c)	Compensation (If	(d)			_		
	(a) Nai	me and address	hours per week		ot paid, enter	Contributions to employee benefit plans			Expense account, (e) other allowances		
			(b) devoted to position		-0-)	and deferred comp	•				
Elizat	eth Allman M	assoud	VP / Dir		0			0		0	
		rce 501 Silverside Rd	1 0								
		198091377						_			
	Joseph Masso		Pres / Dir / Sec / Treas 1 0		0			이		0	
		rce 501 Silverside Rd 198091377									
			d employees (other than	those	included on line 1—	see instructions). 1	If none.	enter	"NONE."		
	compensat				meradea on fine 1	Contribu		1	HOHE		
Nai	me and add	(a) ress of each employee ¡	Title, and aver		(c) Compensatio	n employe			Expense ac	•	
		re than \$50,000	(b) devoted to pos		(c) companiatio	pians and		1 (e	e) other allow	vances	
						(d) comper	isation	-			
								-			
								-			
								_			
								1			

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Part VIII Information About Officers, Directors, Trusto and Contractors (continued)	ees, Foundation Managers, High	ly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include released organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1	uccu, cic	
2		+
3		+
4		
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during	•	A mount
1	,	
		\dashv
		\dashv
2		
-		-
		\dashv
All other program-related investments See instructions		
3		
3		\dashv
		\dashv
Total. Add lines 1 through 3		<u> </u>
iotai. Add illes I tillough 5		7

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	4,074,007
b	Average of monthly cash balances	1b	454,865
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	4,528,872
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	4,528,872
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	67,933
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,460,939
6	Minimum investment return. Enter 5% of line 5	6	223,047
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	taın 1	oreign organizations
1	Minimum investment return from Part X, line 6	1	223,047
2a	Tax on investment income for 2015 from Part VI, line 5 2a 4,473		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b 3,536		
С	Add lines 2a and 2b	2c	8,009
3	Distributable amount before adjustments Subtract line 2c from line 1	3	215,038
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	215,038
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	215,038
Par	t XII Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	421,186
b	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	0
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	421,186
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	421,186
	Note: 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

	art XIIII Undistributed Income (see in	nstructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line	7			215,038
2	Undistributed income, if any, as of the end of 201	.5			
а	Enter amount for 2014 only				
ь	Total for prior years 2013, 2012, 2011				
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
ь	From 2011				
c	From 2012				
d	From 2013	010			
e		614			
	Total of lines 3a through e	394,624			
	Qualifying distributions for 2015 from Part				
_	XII, line 4 🕨 \$ 421,186				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				215,038
	Remaining amount distributed out of corpus	206,148			
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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	600,772			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b	•			
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
T	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
7	Amounts treated as distributions out of	•			
-	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may	y			
	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. Subtract lines 7 and 8 from line 6a	600,772			
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013	010			
		614			
	Excess from 2015 206,				

- 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 Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 401,000 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	es .			Page 1 2
Enter gross amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income (See
1 Program service revenue	Business code	A mount	Exclusion code	A mount	instructions)
a					
b					
c					
d					
e f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			1.4	550	
4 Dividends and interest from securities			14	559 99,928	
5 Net rental income or (loss) from real estate			11	33/320	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than					
inventory			18	216,557	
9 Net income or (loss) from special events					
LO Gross profit or (loss) from sales of inventory					
L1 Other revenue a K-1 Inc/Loss	525990	62,730	14	-9,330	
b Federal Tax Refund			01	1,470	
c					
d					
e		62.720		200 404	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		62,730		309,184 L 3	
(See worksheet in line 13 instructions to verify					0,1,51,
Part XVI-B Relationship of Activities to					
Line No. Explain below how each activity for wh the accomplishment of the foundation's					
instructions)	s exempt purpos	ses (other than by	providing failes for	sucii pui poses) (Jee

Part	XVI		Information Re Noncharitable					sactio	ns and	Relationships	With			
		rganı	zation directly or ii) of the Code (othe	ndırectly (engage	ın any of t	he following wi						Yes	No
org	anıza	tions?	•											
a Tra	nsfer	s from	the reporting four	ndation to	a nonc	harıtable e	exempt organiz	ation of						
(1)	Cas	h										1a(1)		No
(2)	Oth	erass	ets									1a(2)		No
b Oth	ner tra	ansac	tions											
(1)	Sale	s of a	ssets to a noncha	rıtable ex	empt or	ganızatıoı	1					1b(1)		No
(2)	Purc	hase	s of assets from a	noncharit	able ex	empt orga	nızatıon					1b(2)		No
(3)	Ren	tal of	facılıtıes, equipme	nt, or othe	erasset	ts						1b(3)		No
(4)	Reir	nburs	ement arrangemer	nts								1b(4)		No
(5)	Loa	ns or l	oan guarantees.									1b(5)		No
			e of services or m									1b(6)		No
c Sha	arıng	of facı	lities, equipment, i	mailing lis	ts, oth	erassets,	or paid employ	ees				1c		No
of t	he go iny tra	ods, c ansac	o any of the above other assets, or se tion or sharing arr Amount involved	rvices giv angement	en by t , show i	he reporti in column	ng foundation	If the foo of the go	undation i ods, othe	eceived less than	n fair marko ces receivo	et value ed		nts
(a) Line	. 110	(5)	Amount involved	(c) Name	or nonci	iditable exc	inpt organization	(u)	Description	or transiers, transact	ions, and she	ining arra	ngemer	11.3
des	cribe	d in s comp	ection 501(c) of th plete the following :	ne Code (d schedule		an sectioi	n 501(c)(3)) or	ın secti				. FY e	s 🔽	No
		(a	, ivanie or organización	l I		(1)) Type of organiza	ation		(c) Descrip	otion of relati	опыпр		
_	the Info	best ormati ****	of my knowledge a on of which prepar	and belief, rer has an	ıt ıs tru	ıe, correct	:, and complete	Declar			May t May t return with t below	r) is bas he IRS di he prepai	sed on scuss th	all us vn
		<u> </u>			ı							nstr) / 🏴	Yesi N	10
			Print/Type preparer's name Jeffrey D Haskell Preparer's Si			rer's Sıgn	ature	Date		Check if self- employed ▶	PTIN	013457	770	
Prepa Use	areı	Fou	ndation Source					•		Firm's EIN ▶	•			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) information of which preparer has any knowledge ****** Signature of officer or trustee Print/Type preparer's name Jeffrey D Haskell Print/Type preparer's name Jeffrey D Haskell Print/Type preparer's name Preparer's Signature Date Check if self-employed PTIN PO.		54												

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).

Elizabeth Allman Massoud

Ihab Joseph Massoud

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

			• • •	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AMITY CHARITABLE TRUST FUND PO BOX 4129 WALLINGFORD,CT 06492	N/A	PC	Charitable Event	2,500
BIG BROTHERS BIG SISTERS OF SOUTHWESTERN CT 2470 FAIRFIELD AVE BRIDGEPORT,CT 06605	N/A	PC	board and employee match Program	40,000
BIG BROTHERS BIG SISTERS OF SOUTHWESTERN CT 2470 FAIRFIELD AVE BRIDGEPORT,CT 06605	N/A	PC	Charitable Event	5,000
BIG BROTHERS BIG SISTERS OF SOUTHWESTERN CT 2470 FAIRFIELD AVE BRIDGEPORT,CT 06605	N/A	PC	Charitable Event	1,500
BIG BROTHERS BIG SISTERS OF SOUTHWESTERN CT 2470 FAIRFIELD AVE BRIDGEPORT, CT 06605	N/A	PC	Charitable Event	10,000
BRIDGEPORT RESCUE MISSION INC 1088 FAIRFIELD AVE BRIDGEPORT,CT 06605	N/A	PC	General & Unrestricted	15,000
BRIDGEPORT RESCUE MISSION INC 1088 FAIRFIELD AVE BRIDGEPORT,CT 06605	N/A	PC	Matching Drive	35,000
BRIDGEPORT RESCUE MISSION INC 1088 FAIRFIELD AVE BRIDGEPORT,CT 06605	N/A	PC	Radiothon Matching Challenge	1,500
CHILDRENS HOSPITAL CORPORATION 401 PARK DR STE 602 BOSTON,MA 02215	N/A	PC	Cardiac Neurodevelopment	25,000
CHURCH OF THE ASSUMPTION 98 RIVERSIDE AVE WESTPORT,CT 06880	N/A	PC	General & Unrestricted	10,000
COMMUNITY PLATES INC 27 ANN ST NORWALK,CT 06854	N/A	PC	Charitable Event	5,000
DOCTORS WITHOUT BORDERS USA INC 333 7TH AVE 2ND FL NEW YORK,NY 10001	N/A	PC	Mediterranean Rescue Ships Program	10,000
FAMILIES NETWORK OF WESTERN CONNECTICUT INC 5 LIBRARY PL DANBURY,CT 06810	N/A	PC	phone system upgrade Project	10,000
FAMILIES NETWORK OF WESTERN CONNECTICUT INC 5 LIBRARY PL DANBURY,CT 06810	N/A	PC	Charitable Event	2,500
FRIENDS OF KAREN INC 118 TITICUS RD NORTH SALEM,NY 10560	N/A	PC	General & Unrestricted	5,000
Total				401,000

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HABITAT FOR HUMANITY OF COASTAL FAIRFIELD COUNTY I 1542 BARNUM AVE BRIDGEPORT,CT 06610	N/A	PC	Women Build Aitoro Event Sponsorship Program	500
HABITAT FOR HUMANITY OF COASTAL FAIRFIELD COUNTY I 1542 BARNUM AVE BRIDGEPORT, CT 06610	N/A	PC	Sponsorship of two homes	150,000
HABITAT FOR HUMANITY OF COASTAL FAIRFIELD COUNTY I 1542 BARNUM AVE BRIDGEPORT, CT 06610	N/A	PC	Charitable Event	5,000
HABITAT FOR HUMANITY OF COASTAL FAIRFIELD COUNTY I 1542 BARNUM AVE BRIDGEPORT, CT 06610	N/A	PC	FundRaising at Golf Event	5,000
INTERNATIONAL MEDICAL CORPS 12400 WILSHIRE BLVD STE 1500 LOS ANGELES, CA 90025	N/A	PC	General & Unrestricted	5,000
MAKE-A-WISH FOUNDATION OF AMERICA 4742 N 24TH ST STE 400 PHOENIX,AZ 85016	N/A	PC	General & Unrestricted	2,000
NORTHEAST CHILDREN S THEATRE COMPANY INC 606 POST RD E 713 WESTPORT, CT 06880	N/A	PC	General & Unrestricted	500
PHOEBE'S PHRIENDS INC 12 SALEM LN WESTPORT,CT 06880	N/A	PC	General & Unrestricted	1,000
PHOEBE'S PHRIENDS INC 12 SALEM LN WESTPORT,CT 06880	N/A	PC	Charitable Event	7,500
PROJECT RETURN INC 124 COMPO RD N WESTPORT,CT 06880	N/A	PC	Charitable Event	2,500
SAVE THE CHILDREN FEDERATION INC 501 KINGS HWY E STE 400 FAIRFIELD, CT 06825	N/A	PC	Syrian Children Refugee Crisis Campaign	10,000
SMILE TRAIN INC 41 MADISON AVE 28TH FL NEW YORK,NY 10010	N/A	PC	Triple Match Challenge Campaign	1,000
SPECIAL OLYMPICS CONNECTICUT INC 2666 STATE ST STE 1 HAMDEN,CT 06517	N/A	PC	General & Unrestricted	2,000
ST MINA COPTIC ORTHODOX CHURCH 22700 SAINT MINAS CT COLTON,CA 92324	N/A	PC	General & Unrestricted	10,000
ST THOMAS AQUINAS 1719 POST RD FAIRFIELD,CT 06824	N/A	PC	General & Unrestricted	2,000
Total			▶ 3a	401,000

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 status of	Purpose of grant or contribution	A mount	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution		
a Paid during the year					
ST MARY CHURCH 669 W AVE NORWALK,CT 06850	N/A	PC	General & Unrestricted	5,000	
STAPLES HIGH SCHOOL TUITION GRANTS COMMITTEE INC PO BOX 5159 WESTPORT, CT 06881	N/A	PC	Elizabeth and Joseph Massoud Family Foundation Award Fund	2,000	
SUDDEN CARDIAC ARREST NETWORK 7500 BROOKTREE RD STE 207 WEXFORD,PA 15090	N/A	PC	A dam Greenlee Foundation Fund	1,000	
SUDDEN CARDIAC ARREST NETWORK 7500 BROOKTREE RD STE 207 WEXFORD,PA 15090	N/A	PC	A dam Greenlee Foundation Fund	1,000	
THE BOWERY MISSION 132 MADISON AVE NEW YORK,NY 10016	N/A	PC	Thanksgiving Week Partner Program	10,000	
Total			▶ 3a	401,000	

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DLN: 93491215003196

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: Elizabeth and Joseph Massoud Family

Foundation

TY 2015 Investments Corporate Stock Schedule

Name: Elizabeth and Joseph Massoud Family

Foundation

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ALCENTRA CAPITAL CORPORATION	108,916	92,800
ASIA PACIFIC FUND INC	90,364	76,532
AVENUE INCOME CREDIT STRATEGY	97,744	62,425
BLACKROCK KELSO CAP CORP	84,105	84,600
BOEING CO	98,693	108,443
GANNETT CO INC	7,047	8,145
ISHARE MSCI SINGAPOR	107,686	79,670
ISHARES MSCI AUSTRALIA INDEX F	199,297	142,200
ISHARES MSCI MALAYSIA FREE IND	137,349	66,100
ISHARES MSCI-JAPAN	39,195	36,360
ISHARES MSCI-SOUTH KOREA	174,586	133,364
ISHARES TR DJ SEL DIVIDEND INX	310,019	300,599
KINROSS GOLD CORP	2,300	1,820
MARKET VECTORS AGRIBUSINESS ET	215,285	195,258
MERCK & CO INC	58,695	52,820
MKT VCTR RUSSIA SBI	156,315	124,525
PINNACLE FOODS INC	47,370	42,460
PRIMECAP ODYSSEY AGGRESSIVE GR	64,997	58,680
SPDR S&P 500 ETF TRUST	99,954	96,431
SPDR S&P DIVIDEND ETF	306,100	294,280
TEEKAY CORP	131,548	34,545
TEEKAY TANKERS CL A	28,545	75,680
TEGNA	30,373	25,520
TRIANGLE CAPITAL CORPORATION	168,735	133,770
VANGUARD HEALTH CARE ETF	67,734	79,728
VANGUARD HIGH DIV YIELD	69,630	66,750
VANGUARD MSCI EUROPEAN ETF	171,705	149,640
VANGUARD TOTAL STOCK MARKET ET	82,714	78,225
WIDSOMTREE MIDDLE EAST DIVIDEN	220,024	186,480

TY 2015 Investments - Other Schedule

Name: Elizabeth and Joseph Massoud Family

Foundation

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
COMPASS DIVERSIFIED HOLDINGS		1,270,598	1,191,750
TEEKAY LNG PARTNERS LP		224,400	92,050

TY 2015 Other Expenses Schedule

Name: Elizabeth and Joseph Massoud Family

Foundation

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	20,071			20,071
K-1 EXP COMPASS DIVERSIFIED	83,943	83,943		
K-1 Exp TEEKAY LNG PARTNERS LP	109	109		
State or Local Filing Fees	25			25
WEBSITE MAINTENANCE	90			90

TY 2015 Other Income Schedule

Name: Elizabeth and Joseph Massoud Family

Foundation

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 Inc/Loss COMPASS DIVERSIFIED HOLDINGS	65,926	-11,699	
K-1 Inc/Loss TEEKAY LNG PARTNERS LP	-12,526	2,369	
Federal Tax Refund	1,470		

TY 2015 Taxes Schedule

Name: Elizabeth and Joseph Massoud Family

Foundation

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2015	800			

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Elizabeth and Joseph Massoud Family

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OMB No 1545-0047

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 www.irs.gov/form990.

2015

Employer identification number

Founda	tion	·	46-2495320
Organi	ization type (check or	ne)	
Filers	of:	Section:	
Form 9	90 or 990-EZ	501(c)() (enter number) organization	
			١
		☐ 527 political organization	
Form 9	90-PF	√ 501(c)(3) exempt private foundation	
		501(c)(3) taxable private foundation	
Gener), (8), or (10) organization can check boxes for both the General Rule and a S	secon rate see mondono
Gener	al Rule		
⊽		iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions any one contributor. Complete Parts I and II. See instructions for determining a	
Specia	l Rules		
Γ	under sections 509(a) received from any one	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part e contributor, during the year, total contributions of the greater of (1) \$5,000 or Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that
Γ	during the year, total of	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 exclusively for religious, charitable, scientific cruelty to children or animals. Complete Parts I, II, and III	•
Γ	during the year, contri this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive butions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the General Rule applies to this organization because, contributions totaling \$5,000 or more during the year	butions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file 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 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)

Name of organization Elizabeth and Joseph Massoud Family Employer identification number 46-2495320

Foundation

Part I

(b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Massou<u>d Ihab Joseph</u> **Payroll** 3 Marc Lane \$ 1,405,446 Noncash Westport, CT 06880 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash (Complete Part II for noncash contributions)

Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

Name of organization Elizabeth and Joseph Massoud Family Foundation Employer identification number

46-2495320

Part II	Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed	<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	See Additional Data Table	\$	
(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
		\$	

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)

Schedule B (Form 990, 9	990-EZ, or 990-PF) (2015)		Page 4
lame of organization lizabeth and Joseph M oundation	assoud Family		Employer identification number 46-2495320
total more line entry. of \$1,000 o	than \$1,000 for the year from any o	one contributor. Complete co III, enter the total of exclusive mation once. See instruction	ibed in section 501(c)(7), (8), or (10) that lumns (a) through (e) and the following ely religious, charitable, etc., contributions is.) ► \$
(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 gif	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 gif	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 gif	t 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
. =		(a) Transfer of set	
	Transferee's name, address, an	(e) Transfer of gif	Relationship of transferor to transferee
<u>-</u>		—— <u> </u>	

Additional Data

Software ID: Software Version:

EIN: 46-2495320

Name: Elizabeth and Joseph Massoud Family

Foundation

Form 990 Schedule B, Part II - Noncash Property (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
1	ALCENTRA CAPITAL CORPORATION ABDC, 8000 00000000 sh	\$ 108,916	2015-06-24
1	BLACKROCK KELSO CAP CORP BKCC, 9000 00000000 sh	\$ 84,105	2015-06-24
1	GANNETT CO INC GCI, 1000 00000000 sh	\$ 37,420	2015-06-24
1	ISHARES MSCI-JAPAN EWJ, 3000 00000000 sh	\$ 39,195	2015-06-24
1	KINROSS GOLD CORP KGC, 1000 00000000 sh	\$ 2,300	2015-06-24
1	MKT VCTR RUSSIA SBI RSX,8500 00000000 sh	\$ 156,315	2015-06-24
1	MARKET VECTORS AGRIBUSINESS ETF MOO, 1000 00000000 sh	\$ 55,525	2015-06-24
1	PINNACLE FOODS INC PF, 1000 00000000 sh	\$ 47,370	2015-06-24
1	PRIMECAP ODYSSEY AGGRESSIVE GROWTH FUND POAGX, 1704 17800000 sh	\$ 61,538	2015-06-24
1	SPDR S&P 500 ETF TRUST SPY, 473 00000000 sh	\$ 99,954	2015-06-24

Form 990 Schedule B, Part II - Noncash Property (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
1	TRIANGLE CAPITAL CORPORATION TCAP, 7000 00000000 sh	\$ 168,735	2015-06-24
1	VANGUARD HIGH DIV YIELD VYM, 1000 00000000 sh	\$ 69,630	2015-06-24
1	VANGUARD MSCI EUROPEAN ETF VGK, 3000 00000000 sh	\$ 171,705	2015-06-24
1	VANGUARD TOTAL STOCK MARKET ETF VTI, 750 00000000 sh	\$ 82,714	2015-06-24
1	WIDSOMTREE MIDDLE EAST DIVIDEND FUND GULF, 11200 00000000 sh	\$ 220,024	2015-06-24