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Form **990-PF** Department of the Treasury Internal Revenue Service

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. OMB No 1545-0052

Fore	alen	dar year 2015 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
		CODE FAMILY FOUNDATION			47-2584053	
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		WEST STREET	 	200	410-404-83	77
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
		APOLIS, MD 21401			2 4 5	abadi bara
G (песк	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		2, Foreign organizations me check here and attach co	eting the 85% test,
	book	type of organization: X Section 501(c)(3) ex	Name change		1	
" - C	~	· · · · · · · · · · · · · · · · · · ·	Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)	
L Fa		rket value of all assets at end of year J Accounti		X Accrual	}	• •
		1	ther (specify)	(22) Accidar	If the foundation is in a under section 507(b)(1)	
<i>\\\</i>		967,667. (Part I, colu		pasis.)		(10), ondok hore
_		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
تــــــــــــــــــــــــــــــــــــــ		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	26,500.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments			}	
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
d)	6a	Net gain or (loss) from sale of assets not on line 10				
ž	b	Gross sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, time 2)		0.		
æ	8	Net short term carit fram EIVED		·		
	9	Income roodifications Gross sales less eturns				<u> </u>
	10a	Gross sale less eturns and allowarces MAY 2 5 2016				<u> </u>
	b	Less Cost of goods sold				<u> </u>
	C	Gross profit or (1055)				<u> </u>
	11	Other income OGDEN, UT				
	12	Total. Add lines 1 through 11	26,500.	<u> </u>	}	<u> </u>
	13	Compensation of officers, directors, trustees, etc	0.	0.	 	0.
	14	Other employee salaries and wages				ļ
es	15	Pension plans, employee benefits			ļ	
		Legal fees STMT 1	1,525.	1,525.	ļ	0.
ē.		Accounting fees STMT 2	1,933.	1,933.	 	0.
ű	ľ	Other professional fees	<u> </u>		 	
tive		Interest	<u> </u>		}	ļ
Operating and Administrative Expens		Taxes	<u> </u>		 	
inis	19	Depreciation and depletion	}			
Ē	20	Occupancy			 	ļ
φ)	Travel, conferences, and meetings			 	
an	22	Printing and publications	075	075	 	ļ
ting	23	Other expenses STMT 3	875.	875.	 	0.
era	24	Total operating and administrative	1 222	1 222	[^
ŏ	O.F	expenses. Add lines 13 through 23	4,333. 54,500.	4,333.	 	0. 54,500.
-	(Contributions, gifts, grants paid	34,300.		 	54,500.
	26	Total expenses and disbursements.	58,833.	4,333.		54,500.
	97	Add lines 24 and 25 Subtract line 26 from line 12:	30,033.	4,333.	 	34,300 ·
			-32,333.			
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	-34,333.	0.	 	
		Adjusted net income (if negative, enter -0-)	 	<u> </u>	N/A	
		rajustou net modine (a negative, enter -0-)	L		1 47/42	L

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

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For	m 99	Q-PF (2015) DEA CODE FAMILY FOUNDAT			2584053 Page 2
P	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
_	-	Cash - non-interest-bearing	1,000,000	967,667.	967,667.
	1	-	1,000,000.	301,001.	301,001.
	ì	Savings and temporary cash investments Accounts receivable		~ -	
i	3	Less; allowance for doubtful accounts		}	
	4	Pledges receivable			
	4	Less: allowance for doubtful accounts		ł	
	5	Grants receivable			
1	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	Į.	1	
	7	Other notes and loans receivable			
	•	Less; allowance for doubtful accounts ▶	}		
S.	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		ļ	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶	1		
		Less accumulated depreciation			····
	15	Other assets (describe ►)		· · · · · · · · · · · · · · · · · · ·	
	16	Total assets (to be completed by all filers - see the			
	 	instructions. Also, see page 1, item I)	1,000,000.	967,667.	<u>967,667.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ä	21	Mortgages and other notes payable			
~	22	Other liabilities (describe >)			
		T . 10 . 100			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	1		
S		and complete lines 24 through 26 and lines 30 and 31.	1,000,000.	967,667.	
Š	24	Unrestricted Temporarily restricted	1,000,000.	307,007.	
3ale	25 26	Permanently restricted			
Net Assets or Fund Balances	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
et/	30	Total net assets or fund balances	1,000,000.	967,667.	
Z	30	Total liet assets of fully balances	1,000,000	307,007.	
	31	Total liabilities and net assets/fund balances	1,000,000.	967,667.	
P	art				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)			1,000,000.
	•	r amount from Part I, line 27a		2	-32,333.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	967,667.
		eases not included in line 2 (itemize)		5	0.

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

0.

0.

54,500.

NONE

<u>1</u>a

b C

е

b

d e

¢ d (e) Gross sales price

(i) F.M.V. as of 12/31/69

2 Capital gain net income or (net capital loss)

If (loss), enter -0- in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

If section 4940(d)(2) applies, leave this part blank.

(a) Base period years

Calendar year (or tax year beginning in)

the foundation has been in existence if less than 5 years

Enter 1% of net investment income (1% of Part I, line 27b)

Enter the net value of noncharitable-use assets for 2015 from Part X, line 5

2 Total of line 1, column (d)

Multiply line 4 by line 3

7 Add lines 5 and 6

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Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate,

2-story brick warehouse; or common stock, 200 shs. MLC Co.)

(f) Depreciation allowed

(or allowable)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(j) Adjusted basis

as of 12/31/69

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Enter the appropriate amount in each column for each year; see the instructions before making any entries.

Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years

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.

(b)

Adjusted qualifying distributions

If gain, also enter in Part I, line 7

If (loss), enter -0- in Part I, line 7

				Fc	orm 990-PF (2015)
	4				
2015.03040	DEA	CODE	FAMILY	FOUNDATION.	301000K1

6

(b) How acquired P - Purchase D - Donation

2

(c)

(g) Cost or other basis

plus expense of sale

(k) Excess of col. (i)

over col. (j), if any

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2015) DEA CODE FAMILY FOUNDATION, INC	C 4040(b) 4040(c)	47-	25840	053	F	Page 4
Par			or 4948 ·	- see in	istru	CUOI	15)
	exempt operating foundations described in section 4940(d)(2), check here and entity		1	1			
	Date of ruling or determination letter: (attach copy of letter if neces						^
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1_1_	 			0.
	of Part I, line 27b	10 11 10 10	}	}			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			}			^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -U-)	2	 			<u>0.</u>
	Add lines 1 and 2		3_	 			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	iers enter -u-)	4	 			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	 			0.
	Credits/Payments:	0. 1		}			
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		1			
	Exempt foreign organizations - tax withheld at source	6b		1			
	Fax paid with application for extension of time to file (Form 8868)	6c		1			
	Backup withholding erroneously withheld	6d		}			Λ
	Total credits and payments. Add lines 6a through 6d	د	7	 			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	160	8	 			
	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	 			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	المام المام	10				
11 0	t VII-A Statements Regarding Activities	Refunde	1 ▶ 11	<u> </u>			
						Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legisla	tion or did it participate or inte	ervene in	-		162	
	any political campaign?			ŀ	1a		<u>X</u>
	Old it spend more than \$100 during the year (either directly or indirectly) for political purpose			}	1b		<u>X</u>
	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies of any materials pu	blished or	}	1	}	
	distributed by the foundation in connection with the activities.			1		}	
	Oid the foundation file Form 1120-POL for this year?			}	1c		_X_
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y		^	1	- {	}	
(1) On the foundation. > \$ 0 . (2) On foundation managers.	> \$	0.	1	- [{	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	ire tax imposed on foundation		}]	
	nanagers. ► \$O . Has the foundation engaged in any activities that have not previously been reported to the IRS	22			2		X
	if "Yes," attach a detailed description of the activities.	J:		Ì	-		
	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	strument, articles of incorpora	tion, or		}	}	1
t	oylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	5		1	3	. }	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			ſ	4a		X
ьi	f "Yes," has it filed a tax return on Form 990-T for this year?		N	[/A	4b		
	Nas there a liquidation, termination, dissolution, or substantial contraction during the year?			[5		X
1	f "Yes," attach the statement required by General Instruction T.			[
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	ner:		l	- {		
•	By language in the governing instrument, or			1	1		
	 By state legislation that effectively amends the governing instrument so that no mandatory 	directions that conflict with th	e state law	}	{	}	v
ſ	remain in the governing instrument?			j	6	}	X
7 {	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part II, col. (c), and Pa	art XV	ſ	7	X	
				ſ			
	Enter the states to which the foundation reports or with which it is registered (see instructions	s) ►					
-	MD			!		ļ	
	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	orney General (or designate)		ł		ا پ	
	of each state as required by General Instruction G? If "No," attach explanation	40404545		}	8b	X	<u> </u>
	s the foundation claiming status as a private operating foundation within the meaning of sect		or calendar	ł	.	1	
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," col		a====	١ ۾ ١	9		<u> X</u>
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule	listing their names and addresses	STMT		10	X	<u> </u>
				Forr	n 990	,-rr	(2015)

		84053		Page 5
P	art VII-A Statements Regarding Activities (continued)			
		}	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1	ļ	{
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	•	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12	}	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A	سننسب		
14	The books are in care of ► KENNETH CODE, TREASURER Telephone no. ► (410)) 404	-83	77
• •		21401		
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	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,			No
	securities, or other financial account in a foreign country?	16	1	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	/		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1:	During the year did the foundation (either directly or indirectly):			<u> </u>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	ا م	1	}
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		}	ł
	a disqualified person?	n {	1	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N		l	-
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?]	ļ
	(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)?	. \	}	1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	•	1	{
	If the foundation agreed to make a grant to or to employ the official for a period after		İ	{
	termination of government service, if terminating within 90 days.)		į	1
,	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	٠	Į	}
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	A 16		}
	· · · · · · · · · · · · · · · · · · ·		 	
	organizations rolying on a dutron notice regarding diseases assistance of lock note	_	}	1
•	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		X
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)):		}	
í	t At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? Yes X N	.	1	{
		0	1	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,		1	Ì
ľ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		}	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			}
	statement - see instructions.) N/F	A 2b	 	
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	į	1	1
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ţ	1	
38	L—1 ——1	.	}	1
	during the year?	0	}	}
t	of f'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		1	1
	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,		{	1
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/F	A 3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u>4a</u>		X
ì	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	}	}	
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
		Form 99 0	0-PF	(2015)

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			s X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1 1
4945(d)(4)(A)? (see instructions)			es X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			es X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	/-	.
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	ib
Organizations relying on a current notice regarding disaster assistance check h				1 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. —		} }
expenditure responsibility for the grant?		「/A	es L No	1 1
If "Yes," attach the statement required by Regulations section 53 4945			l	} {
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		(7	1 1
a personal benefit contract?		Ye	es X No	.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		_ _	Sb X
If "Yes" to 6b, file Form 8870.		<u> </u>	r == 1	1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s		! Ye	es X No	
b If Yes, did the foundation receive any proceeds or have any net income attribu				<u>'b </u>
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	/	
List all officers, directors, trustees, foundation managers and their	compensation			
List all officers, directors, director, foundation managers and their		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
KENNETH S. CODE	to position DIRECTOR	enter -0-)	compensation	allowalices
1131 ASQUITH DRIVE	DIRECTOR			
ARNOLD, MD 21012	0.00	0.	0.	0.
	DIRECTOR			<u>.</u>
1131 ASQUITH DRIVE	DIRECTOR	1		
ARNOLD, MD 21012	0.00	0.	0.	0.
ARMODD, MD 21012	0.00		-	
		}	{	
		}	}	
		1	 	· · · · · · · · ·
				
		{		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	'	
/ Managed address of each artilline and address of each	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	·			
			İ	
Total number of other employees paid over \$50,000				0
			Form	990-PF (2015)

11-24-15

Total. Add lines 1 through 3

	rm 990-PF (2015) DEA CODE FAMILY FOUNDATION, INC	47-	2584053 Page 8
Р	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b		1b	991,664.
C		1c	
d	Total (add lines 1a, b, and c)	1d	991,664.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	}	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	991,664.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,875.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	976,789.
6	Minimum investment return. Enter 5% of line 5	6	48,839.
P	Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations at	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	48,839.
2a	Tax on investment income for 2015 from Part VI, line 5		
ь]	
C		20	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	48,839.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	48,839.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	48,839.
	Part XII		
ш	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	54,500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
	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	54,500.
5	Foundations that qualify under section AQAI(a) for the reduced rate of tay on nat investment		

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

Form **990-PF** (2015)

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				48,839.
2 Undistributed income, if any, as of the end of 2015				i -
a Enter amount for 2014 only			2,834.	
b Total for prior years:		0		
5		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010	-			
b From 2011 c From 2012	į	į		
d From 2013		1		
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ▶\$ 54,500.				
a Applied to 2014, but not more than line 2a			2,834.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				48,839.
e Remaining amount distributed out of corpus	2,827.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	· · · · · · · · · · · · · · · · · · ·		0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,827.			
b Prior years' undistributed income. Subtract				,
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		<u> </u>
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		<u> </u>
e Undistributed income for 2014. Subtract line		ı		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must			,	_
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010			<u> </u>	 ,
not applied on line 5 or line 7	0.		,	
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	2,827.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015 2,827.				
				Form QQ0-DF (2015)

Form **990-PF** (2015)

	E FAMILY FO		INC	47-25	84053 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	it it is a private operating	1		
foundation, and the ruling is effective fo	r 2015, enter the date of	the ruling	▶ Ì		
b Check box to indicate whether the found	dation is a private operati	ng foundation described	in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 yea	ırs	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed			}		
b 85% of line 2a			1		
c Qualifying distributions from Part XII.					
line 4 for each year listed	}	1	}	}	}
d Amounts included in line 2c not	ļ	 	 		
used directly for active conduct of	}	ļ	Ì	}	Ì
exempt activities			1		}
e Qualifying distributions made directly	 	{			
for active conduct of exempt activities.	1	}	}	ļ	}
	ł		1	ł	
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·	 	 	 	
alternative test relied upon:	1	}	}		1
a "Assets" alternative test - enter:	ł	}	}		
(1) Value of all assets	<u> </u>	 			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	1		1		
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		1	- 		
(1) Total support other than gross	}			}	
investment income (interest,	1	1	1	į	
dividends, rents, payments on	j	}	}	1	
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt			1	1	
organizations as provided in	}		}	}	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			}		
an exempt organization		 			
(4) Gross investment income	madian (Carant	sta this most only	if the found	lation had \$5 000 as an	ore in coasts
Part XV Supplementary Info			n the lound	iation nad \$5,000 or m	ore in assets
					
1 Information Regarding Foundation	_	u on the call		The distriction of the color of	
a List any managers of the foundation wh			itributions receive	d by the foundation before the clo	ose of any tax
year (but only if they have contributed n	nore man po,000). (See	section 507(a)(2).)			
NONE					_
 b List any managers of the foundation who other entity) of which the foundation ha 			ı (or an equally ları	ge portion of the ownership of a p	partnership or
	Sa 10% of greater filtere	151.			
NONE			 		
2 Information Regarding Contribut					
Check here ► if the foundation of	•	•	-	. ,	
the foundation makes gifts, grants, etc.					a a.
a The name, address, and telephone num		the person to whom app	ilications should b	e addressed:	
KENNETH S. CODE, 410	216-6120				
1131 ASQUITH DRIVE,	ARNOLD, MD	21012			
b The form in which applications should t	oe submitted and informa	ation and materials they	should include:		
N/A					
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable field:	s, kınds of ınstitutio	ons, or other factors:	
MUST BE A TAX EXEMPT					
					

HOTCHKISS FUND	•		TO FOSTER & SUPPORT	
11 INTERLAKEN ROAD			DONEE'S CHARITABLE	
LAKEVILLE, CT 06039		 	MANDATE	1,000.
		ļ		1
		}		}
		}		ļ
JUVENILE DIABETES RESEARCH FOUNDATION			TO FOSTER & SUPPORT	}
26 BROADWAY, 14TH FLOOR		1	DONEE'S CHARITABLE	ļ
NEW YORK, NY 10004	·		MANDATE	1,000.
	NTINUATION SHEE	T(S)	<u>▶ 3a</u>	54,500.
b Approved for future payment		1		}
		1		
		}		
NONE				
		1	1	
				{
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		}		}
	<u> </u>	1	<u> </u>	
Total			<u>▶ 3b</u>	0.
523611			F	orm 990-PF (2015)

PASADENA, MD 21122

MANDATE

1,000.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Aillount	
a b			 		
	l 1		 		
	, ,		+		
de	1				
f	-	· · · · · · · · · · · · · · · · · · ·	 -		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities				· · · · · · · · · · · · · · · · · · ·	
5 Net rental income or (loss) from real estate:			1		
a Debt-financed property					
 Not debt-financed property 					
6 Net rental income or (loss) from personal	1			ĺ	
property					
7 Other investment income .					
8 Gain or (loss) from sales of assets other			[]	1	
than inventory					
9 Net income or (loss) from special events	-				
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue:					
a		 	 -		
b	1 1		┼┼-		
·	3 3		 -		
d	-				
e		0.	 -	0.	
12 Subtotal. Add columns (b), (d), and (e)	 		ــــــــــــــــــــــــــــــــــــــ		<u>0</u> 0
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	1			10	0
Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	ncome is reported in	column (e) of Part XVI-A		·	plishment of
523621 11-24-15					Form 990-PF (201

orm 990			ODE FAMI							2584053		ige 13
Part)	(VII	Information Re		nsfers To a	and T	ransactions a	an	d Relations	hips With No	ncharitabl	е	
4 0.4	46	Exempt Organ									Yes	No
	-	ganization directly or indi		-	-	-			1011 50 1(0) 01	}	163	140
		other than section 501(c)					IIIIZZ	allons				Ì
		from the reporting found	ation to a noncharit	table exempt or	ganızatı	on or.				4-(4)		- T
	Cash									1a(1)		X
٠,	Other									1a(2)		X
		sactions:									}	37
٠,,		of assets to a noncharital								1b(1)	├	X
٠,		ases of assets from a no	•	t organization						1b(2)	 	X
		l of facilities, equipment,								1b(3)	┼	X
٠,,		oursement arrangements								1b(4)	├──	X
		or loan guarantees								1b(5)	├	X
٠,,		mance of services or me	•	-						1b(6)	├	X
	_	facilities, equipment, ma	•							1c		X
		er to any of the above is		-		• •					seis,	
		given by the reporting for				tnan fair market vai	iue i	ın any transactior	or snaring arrange	ment, snow in		
		the value of the goods,	,	of noncharitable		t organization		(d) Decrease				
(a) Line no	-	(b) Amount involved	(c) Name		exemp	t organization		(u) Description	of transfers, transaction	ons, and sharing a	rangeme	ents
			 	N/A			{					
			 					<u> </u>				
-			 									
			 					 				
			 							· - · · · ·		
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			L					L				
		idation directly or indirect	•				nızat	tions described				_
		501(c) of the Code (other		(c)(3)) or in sect	tion 527	?				Yes	LX	∃ No
b If "Y	es, co	mplete the following sch										
		(a) Name of org	janization		(b) ly	pe of organization	-		(c) Description of re	elationship		
		N/A			 		+					
					<u> </u>		-					
					 		4_					
			 	 .	<u> </u>		+					
				 	<u> </u>		ㅗ.	 	,			
•		penalties of perjury, I declare lief, it is true, correct_and cor								May the IRS return with the	discuss	this
Sign Here		1 611	1/2/3					L		s <u>hown</u> below	(see ins	<u>str</u>)?
Here	2/		ne			May (2//6	<u> </u>	TREAST	JRER		s L	oN لـ
	Sign	ature of officer or trustee		Dunn 2011-1-	1	Date		Title	Chack 1 .4	DTIN		
		Print/Type preparer's na	ame	Preparer's s	ignature	;	10	Date	Check if	PTIN		
Paid				go	.n=-			4/07/16	self- employed	20005		
	ror		I, CPA		REE		U	4/27/16	Te	P00056		
-	Preparer Firm's name ► GRAY, GRAY & GRAY, LLP Use Only						Firm's EIN ► 0	4~20883	800			

(781) 407-0300 Form **990-PF** (2015)

Firm's address ► 150 ROYALL STREET, SUITE 102 CANTON, MA 02021

Phone no.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

2015

Name of the organization

Employer identification number

D	EA CODE FAMILY FOUNDATION, INC	47-2584053		
Organization type (check	one):			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	ule. See instructions		
General Rule				
_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin y one contributor. Complete Parts I and II. See instructions for determining a contributor			
Special Rules				
sections 509(a)(1 any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, Inne 1. Complete Parts I and II	, or 16b, and that received from		
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				
year, contribution is checked, enter purpose. Do not o	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from as exclusively for religious, chantable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because site, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box s, charitable, etc.,		
but it must answer "No" o certify that it does not mee	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	Form 990-PF, Part I, line 2, to		

Name of organization

Employer identification number

DEN CODE ENMITTY ECHNIDATION

47_25Q4053

DEA C	ODE FAMILY FOUNDATION, INC	<u></u>	7-4304033
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KENNETH S. AND CATHERINE DEA CODE 1131 ASQUITH DRIVE ARNOLD, MD 21012	\$ 26,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash 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.)
(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

Employer identification number

DEA CODE FAMILY FOUNDATION, INC

47-2584053

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(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

Name of orga	of organization Employer identification n		
DEA CO	DE FAMILY FOUNDATION, I	NC	47-2584053
Part III	Exclusively religious, charitable, etc., contribute year from any one contributor. Complete col completing Part III, enter the total of exclusively religious.	utions to organizations described i lumns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or i	in section 501(c)(7), (8), or (10) that total more than \$1,000 for
(a) No.	Use duplicate copies of Part III if additional	space is needed.	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, and	I ZIP + 4	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, and	(e) Transfer of gift	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, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.	(h) D	(a) He a de sit	(d) Description of how sift is held
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferen's name address and	(e) Transfer of gift	
	mansieree s name, audi ess, alli	Sett TT	
	Transferee's name, address, and		Relationship of transferor to transferee

Part XV Supplementary Information 3 Grants and Contributions Paid During the			· · · · · · · · · · · · · · · · · · ·	-
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LACES			TO FOSTER & SUPPORT	
4319 WEST CLARA LANE #193			DONEE'S CHARITABLE	
MUNCIE, IN 47304			MANDATE	1,000
LEADERSHIP FOUNDATION OF INDIA			TO FOSTER & SUPPORT	
P.O. BOX 341960	1		DONEE'S CHARITABLE	
BETHESDA, MD 20827			MANDATE	20,000
LIVE ARTS MARYLAND			TO FOSTER & SUPPORT	
801 CHASE STREET			DONEE'S CHARITABLE	
ANNAPOLIS, MD 21401			MANDATE	1,000
MARYLAND LEAGUE OF CONSERVATION			TO FOSTER & SUPPORT	
VOTERS			DONEE'S CHARITABLE	
86 MARYLAND AVENUE			MANDATE	
ANNAPOLIS, MD 21401			- 	1,000
COMPANY DARY COMMITTING COMPANY			TO FOSTER & SUPPORT	
SEVERNA PARK COMMUNITY CENTER 623 BALTIMORE ANNAPOLIS BLVD			DONEE'S CHARITABLE	
SEVERNA PARK, MD 21146			MANDATE	1,500
SEVERNA RIVERKEEPER PROGRAM			TO FOSTER & SUPPORT	
329 RIVERVIEW TRAIL			DONEE'S CHARITABLE	
ANNAPOLIS, MD 21401			MANDATE	1,000
	}			
		 		
Total from continuation sheets			_ 	25_500

FORM 990-PF	LEGAL FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
LEGAL FEES	1,525.	1,525.			0.
TO FM 990-PF, PG 1, LN 16A =	1,525.	1,525.			0.
FORM 990-PF	ACCOUNTI	NG FEES	S'	PATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS	
ACCOUNTING FEES	1,933.	1,933.			0.
TO FORM 990-PF, PG 1, LN 16B	1,933.	1,933.			0.
FORM 990-PF	OTHER EXPENSES		STATEMENT		3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS	
BANK CHARGES LICENSES & PERMITS	25. 850.				0.
TO FORM 990-PF, PG 1, LN 23	875.	875.			0.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

KENNETH AND CATHERINE DEA CODE

1131 ASQUITH DRIVE ARNOLD, MD 21012