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SCANNED JUL 1 8 2016

Form **990-PF**

Department of the Treasury Internal Revenue Service

EXTENDED TO AUGUST 15, 2016 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 Open to Public Inspection

For	cale	ndar year 2015 or tax year beginning 🔀 🦳 🦰	ENICION A	, an <u>d</u> ending				
Na	ame c	of foundation ————————————————————————————————————	ENSION A	MAGILL	A Employer identificatio	n number		
_		RENSKY FOUNDATION, INC.			52-2284925	5		
		and street (or PO box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number			
		08 BALANTRE LANE			301-299-47	725		
		town, state or province, country, and ZIP or foreign p	postal code		C if exemption application is i	pending, check here		
		OMAC, MD 20854			4			
G	Chec	k all that apply: Initial return		former public charity	D 1. Foreign organization	s, check here		
		Final return	Amended return		2. Foreign organizations m	seting the 85% test		
	Charl	Address change	Name change		Foreign organizations mechanisms check here and attach or	omputation		
" -	_	k type of organization: X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust		ladia	E If private foundation sta			
_ <u>_</u> _		arket value of all assets at end of year J Account	Other taxable private found ing method: X Cash	Accrual	under section 507(b)(1			
		· 1 —	ther (specify)	Accidal	F If the foundation is in a			
-	-\$	1,718,519. (Part I, colu		basis.)	under section 507(b)(1)(D), Clieck liefe .		
	art l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements		
		(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received	200,000.		N/A	MARINE TALL		
	2	Check from at the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments	2,187.	2,187.		STATEMENT 1		
	4	Dividends and interest from securities	17,278.	17,278.		STATEMENT 2		
	5a	Gross rents						
	b	Net rental income or (loss)						
9	6a	Net gain or (loss) from sale of assets not on line 10	-1,636.					
Revenue	b	assets on line 6a 374,799.			PEC	ENTED 1		
<u>§</u>	7	Capital gain net income (from Part IV, line 2)		0.	SEE STATE			
	8	Net short-term capital gain				33 33 5 50 D		
	9	Income modifications Gross sales less returns	Treff (4. State Street and a		N JUL	0.8 2016 9		
	10a	and anomalices	\$77 x \$ 241 x 24 x 24 x 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3					
		Gross profit or (loss)	Standing on the Standard Land		PARTITION			
	11	Other income		176 [tht] with the contract of the Little	in the second se	19:1337-12:03:38:3		
	12	Total. Add lines 1 through 11	217,829.	19,465.				
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.		
	14	Other employee salaries and wages	-					
	15	Pension plans, employee benefits		-	· -			
868	16a	Legal fees						
Expens	I .	Accounting fees STMT 3	1,825.	1,460.		365.		
Щ		Other professional fees STMT 4	6,589.	6,589.		0.		
tíve		Interest						
Administrative		Taxes STMT 5.	114.	0.		0.		
Ë		Depreciation and depletion						
Ę	20 21	Occupancy Travel, conferences, and meetings						
ğ	22	Printing and publications						
<u>B</u>	23	Other expenses				 _		
Operating and	24	Total operating and administrative						
Der.		expenses. Add lines 13 through 23	8,528.	8,049.		365.		
ō	25	Contributions, gifts, grants paid	151,500.	Weller in the		151,500.		
		Total expenses and disbursements.						
		Add lines 24 and 25	160,028.	8,049.		151,865.		
		Subtract line 26 from line 12:						
		Excess of revenue over expenses and disbursements	57,801.					
		Net investment income (if negative, enter -0-)	A STATE OF S	11,416.				
5235		Adjusted net income (if negative, enter -0-)			N/A	ALLENS FALLS		

Gaa

Part | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 418,125. 583,572. 2 Savings and temporary cash investments 583,572 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 250,000. 7 Other notes and loans receivable 250,000 250,000. Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 946,316. 588,415. b Investments - corporate stock ... c Investments - corporate bonds 11 investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 14 Land, buildings, and equipment basis ▶ Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,364,441. 1,421,987 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 320. 22 Other liabilities (describe 320 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,364,121 ,421,922 29 Retained earnings, accumulated income, endowment, or other funds 1,364,121 30 Total net assets or fund balances 1,364,441 31 Total liabilities and net assets/fund balances 1.421.987 Part | Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 1,364,121. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a
3 Other increases not included in line 2 (itemize) 57,801. 3 Add lines 1, 2, and 3 4 1,421,922. Decreases not included in line 2 (itemize) ,421,922. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

52-2284925

Form **990-PF** (2015)

Form 990-PF (2015)

Form 990-PF (2015) SHR Part IV Capital Gains	ENSKY FOUNDATION and Losses for Tax on In	, INC.	t Income				52-228	4925	Page 3
(a) List and desc	ribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs	., real estate,		P-F	w acquired Purchase		Date acquired no., day, yr.)	(d) Date (mo., da	e sold
1a FIDELITY ACCT			- 	ויע	Donation P	← —	RIOUS	01/0	
b FIDELITY ACCT				ľ	P		RIOUS	01/0	
c CAPITAL GAINS			<u></u> ::	1	-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	112000	<u> </u>	<u>,, 15</u>
d									
<u>e</u>									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss) plus (f) minus (
a 1,675.			1,69	0.					-15.
b 371,364.			374,74	5.					,381.
c 1,760.								1	<u>,760.</u>
d								<u>-</u>	
e OI-A		N- 6 1 4	40.004.000			_			
Complete only for assets snowin	ng gain in column (h) and owned by t						ns (Col. (h) gain but not less thar		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			Los	sses (from col. (h))	
8				_					<u>-15.</u>
b				\perp		_			381.
<u> </u>						_		1,	760.
_d			-			_			
<u>e</u>				$\overline{}$					
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter -0-			<u>}</u>	2				636.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	, , , , , , , , , , , , , , , , , , , ,	d (6):		٦					
If (loss), enter -0- in Part I, line 8				<u> </u>	3		N/A		
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inves	tment In	com	е		
(For optional use by domestic private If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation does not qual	nis part blank. tion 4942 tax on the distributable ami ify under section 4940(e). Do not coi	ount of any ye	ar in the base peri	iod?				Yes [X No
	each column for each year; see the in	structions bef	ore making any er	ntries.					
(a) Base period years Calendar year (or tax year beginnii	ng in) Adjusted qualifying dist	ributions	Net value of nor	(c) ncharital	ble-use asset	ts	Distrib	(d) ution ratio ded by col. (c))
2014	14:	1,407.		2,2	278,01	4.		.06	2075
2013	130	6,357.			370,81			.09	9471
2012		7,815.			<u> 257,43</u>			.06	1884
2011		2,800.	.		<u>197,57</u>				<u> 2439</u>
2010	4	0,000.		5	<u> 68,18</u>	7.		.07	<u> 0399</u>
2 Total of line 1, column (d)							2	.34	6268
3 Average distribution ratio for the 5 the foundation has been in exister			or by the number (-			3	.06	9254
4 Enter the net value of noncharitab	le-use assets for 2015 from Part X, II	ne 5				L	4 :	L,611,	258.
5 Multiply line 4 by line 3						L	<u>5</u>	111,	586.
6 Enter 1% of net investment incom							6		114.
7 Add lines 5 and 6					- •		7		700.
	Part XII, line 4				·		В		865.
	line 7, check the box in Part VI, line				ax rate.	- [- L		<u> </u>

	m 990-PF (2015) SHRENSKY FOUNDATION, INC.	<u> 52-</u>	<u> 2284</u>	<u> 192:</u>		Page 4
- Y V	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see	instr	uctio	ns)
1	a 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)	1,51,y.,4	133	در ما الأستاني المالية ما	. (3 % s) 	
- 1	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	1		1	14.
	of Part I, line 27b	. B	17 :	1,4	3	132.5
(c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		18 %		in interest in the second seco	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1	14.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1	14.
6	Credits/Payments:		10.4.2			
ŧ	2015 estimated tax payments and 2014 overpayment credited to 2015			126.33		4 3 4 2 7
t	Exempt foreign organizations - tax withheld at source	12 4 3 3 7				
(Tax paid with application for extension of time to file (Form 8868) 6c	*				
C	1 Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7				49.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				65.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
Pa	art VII-A: Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in		45,3%	Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b	1	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or	-		1. 35°C	
	distributed by the foundation in connection with the activities.			A 13	(4) (4)	33
C	Did the foundation file Form 1120-POL for this year?			1c	1	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			26. J. 24.		1 177
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			130.00	1 - 3	***
	managers. ► \$0.					<u></u>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.			, X, 23	1.18	*
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r		, y**,		18 CO.
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			^,, ,^? ^ * \	*	27
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				199	12m
	By language in the governing instrument, or				* 7.7	, <u> </u>
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		\$7.50 \$7.50 \$7.50	' گــن	Æ.
	remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		-	7	X	
				. 53.4	20	1. 36 m 2 m
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				A	\$ 7 m
	MD			1		()
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_			الآيانيا.
of each state as required by General Instruction G? If "No," attach explanation					X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					2.5	
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses . S	TMT	9	10	Х	

Form **990-PF** (2015)

	m 990-PF (2015) SHRENSKY FOUNDATION, INC. 52-228	<u> 4925</u>		Page !
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			
	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			
14	The books are in care of ▶ LEWIS F. SHRENSKY Telephone no.▶301-2	99-4	725	
	Located at ► 10708 BALANTRE LANE, POTOMAC, MD ZIP+4 ►2			
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,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	4.60	. S. 858	338
	foreign country			
Pź	art:VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1884 3847 1.7	grijas viki	4 16 5 8 7 1
الم ال	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1808	Yes	No
1.	a During the year did the foundation (either directly or indirectly):	\$\times \times \	2000 B	8339
,,				
		233		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No		4	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		30 30	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		443	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	\$ 1.00 m	287m	
	for the benefit or use of a disqualified person)? Yes X No	1.15	400	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	\$ 1.5 m		195
	if the foundation agreed to make a grant to or to employ the official for a period after	275 s		ۇ يىلى ئىگى مەندىدىد
	termination of government service, if terminating within 90 days.)	\$ 3		
b	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	K. TOLS		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	50 mate: 245	20 4 8
	Organizations relying on a current notice regarding disaster assistance check here			
C	c 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			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	defined in section 4942(j)(3) or 4942(j)(5)):		, (e), (
8	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	, j.,	, , , , , , , , , , , , , , , , , , ,	
	before 2015?		10.15	200
	If "Yes," list the years >	3 34		
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.	7755	7/3	12,23
	>			
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	of "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after		ران (ئون ^د يون	
_	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b	1.0380.	₹. 50.00 \$30.00
42	a Did the foundation invest during the year any amount in a manner that would reopardize its charitable purposes?	49	-+	

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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:	- " '		i.	[2] 人[6]第
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	s X No	
(2) Influence the outcome of any specific public election (see section 4955); (ectly,		
any voter registration drive?			es 🗶 No 🖟	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization			İ	
4945(d)(4)(A)? (see instructions)		Y	s X No :	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				
· · · · · · · · · · · · · · · · · · ·			es 🗶 No 🏅	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		n Regulations	[2] [3.	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined		
· · · · · · · · · · · · · · · · · · ·			s 🔲 No 🗒	
If "Yes," attach the statement required by Regulations section 53.494		••	* ·	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	` '		** **	
11 51 1 10		☐ Y	s X No	\$ X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p			l [~]	6ь 🖺 Х
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No 🖔	
b if "Yes," did the foundation receive any proceeds or have any net income attribute		•		7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors			У	
List all officers, directors, trustees, foundation managers and their	compensation.			
· · · · · · · · · · · · · · · · · · ·	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
LEWIS F. SHRENSKY	PRESIDENT/TRE		• • • • • • • • • • • • • • • • • • • •	
10708 BALANTRE LANE				
POTOMAC, MD 20854	1.00	٥.	٥.	0.
BARBARA SHRENSKY	VICE PRESIDEN	T/SECRETA	RY	
LO708 BALANTRE LANE				
POTOMAC, MD 20854	1.00	0.	0.	0.
	1			
	1			
]			
Compensation of five highest-paid employees (other than those included)		enter "NONE."	17.5	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(cl) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	1			
Cotal number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Cor	npensation
NONE	(-) .,,,	1,7,1	
NONE			
			
			
		ļ	
		- 	
Total number of others receiving over \$50,000 for professional services		•	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform	nation such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expense	S
1 N/A			
2			
*** * * * * * * * * * * * * * * * * *			
3			
		}	
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	12.	Amount	
1 <u>N/A</u>			
			0.
2			
All other program-related investments. See instructions.	ļ		
3			
		İ	
			
Total Add lines 1 through 3	▶ [ı	Λ

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 884,947. 1a 500,848. Average of monthly cash balances 1b 250,000. Fair market value of all other assets 1c 1d 1,635,795. Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 635,795. Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 24,537. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 1,611,258. 5 Minimum investment return. Enter 5% of line 5 80,563. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) Minimum investment return from Part X, line 6 80,563. 1 Tax on investment income for 2015 from Part VI, line 5 114 2a Income tax for 2015. (This does not include the tax from Part VI.) 2b C Add lines 2a and 2b 2c 114. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 0. 449. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 0. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 449 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 151,865. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 151,865. 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 114. Adjusted qualifying distributions. Subtract line 5 from line 4 151,751. 6 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)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

1. Disch butable amount for 2015 from Part XI, line 7 2. Underhobted moores, if any, as of the and of 2015. a. Enter amount for 2014 only b. Total for prior years: 3. Excess distributions carryover, if any, to 2015. a. From 2010 1. 1, 74.5. b. From 2011 1. 2, 29.9. d. From 2012 1. 2, 2.9. d. From 2013 4. Coulifying distributions for 2015 from Part XI, line 4. ➤ \$ 1.51, 865. a. Appied to 2014, but not more than line 2a b. Appied to 2015 distribution but of corpus (Section required - see instructions) 1. Testal of 10 (10 this but distribution of prior years* (Election required - see instructions) 4. Appied to 2015 distributions on of 2015 from years* (Election required - see instructions) 5. Excess distributions out of corpus (Feeting to 2015 distributions) 6. Enter the net total of each column as indicated below: 1. 2. Expert the net total of each column as indicated below: 1. 2. Expert the amount of prior years* (Corpus Agricus) 6. Enter the net total of each column as indicated below: 1. 2. Expert the amount of prior years* (Long to years*) 6. Enter the net total of each column as indicated below: 1. 2. Expert the amount of prior years* (Long the years*) 6. Enter the net total of each column as indicated below: 1. 2. Expert the mount of prior years* (Long the years*) 6. Enter the net total of each column as indicated below: 1. 2. Expert the mount of prior years* (Long the years*) 6. Enter the net total of each column as indicated below: 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount of prior years* 1. 2. Expert the mount		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
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e 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 e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr. Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016. 7. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3) (Election may be required - see instructions) 8. Excess distributions carryover from 2010 not applied on line 5 or line 7 9. Excess distributions carryover from 2016. Subtract lines 7 and 8 from line 6a 1. Analysis of line 9: 8. Excess from 2011 3, 155. Excess from 2011 15, 29.9. Excess from 2012 15, 29.9. Excess from 2013 68, 062. d Excess from 2014 27, 840.	-				
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may be required - see instructions) 8	corpus to satisfy requirements imposed by				
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c Excess from 2013 68,062. d Excess from 2014 27,840.					
d Excess from 2014 27,840.					
				建筑量等	

Form 990-PF (2015) SHRENS	KY FOUNDATIO	ON, INC.			84925 Page 1
Part XIV Private Operating				N/A	<u></u>
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f			▶ ∟		
b Check box to indicate whether the four		ng foundation described		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 2014	Prior 3 years	1 (4) 0040	(1) 7-4-6
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		<u> </u>	 	<u></u>	
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not			 		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			†		
for active conduct of exempt activities.				l	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					1
Assets' alternative test - enter: (1) Value of all assets					1
(2) Value of assets qualifying					·
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section			ľ		
512(a)(5)), or royalties)			ļ		
(2) Support from general public and 5 or more exempt	ļ				
organizations as provided in					
section 4942(j)(3)(B)(iii)				<u> </u>	
(3) Largest amount of support from					
an exempt organization				-	
(4) Gross investment income		An Abin mand amba	is also seem also in a	L - 1 &C 000	
Part XV Supplementary Info	rmauon (Comple the vear-see instr	te this part only	n the foundation	nad \$5,000 or mo	re in assets
1 Information Regarding Foundation		4040110.1	.		
a List any managers of the foundation wh	_	than 20/ of the total cont	ributions received by the	foundation before the class	a af amutau
year (but only if they have contributed i	nore than \$5.000). (See s	ection 507(d)(2).)	ilbudons received by the	Houndaron before the clos	e or any tax
SEE STATEMENT 10	,,,,	(-7,-7,-7			
b List any managers of the foundation when other entity) of which the foundation ha			or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	Sa 1070 OF Greater Hiteres) L			
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Dr	outaine.		
Check here ► X if the foundation of				not accent uncolieted reque	acte for funde If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations u	nder other conditions, c	omolete items 2a. b. c. and	yere for infinest it
a The name, address, and telephone num					
a 7110 hamo, address, and telephone ham	bei of e mail address of t	ne person to whom appir	Cations Should be addre	35cu.	
b The form in which applications should b	e submitted and informat	ion and materials they sh	rould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s such as hy geographics	l areas chardahla fields	kinds of institutions or	other factore:	
2 . a., . coa leading of minimations on awards	and and an an analysis of the second		rando or moutuudito, Di	outor laviolo.	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or contribution status of Amount Name and address (home or business) recipient a Paid during the year AMERICAN UNIVERSITY PUBLIC CHARITY GENERAL SUPPORT 4801 MASSACHUSETTS AVE, NW #366 WASHINGTON DC 20016 25,000. LUNGEVITY PUBLIC CHARITY GENERAL SUPPORT 6917 ARLINGTON ROAD #352 BETHESDA MD 20814 3,500, MAOR INSTITUTE PUBLIC CHARITY GENERAL SUPPORT 18318 GEORGIA AVENUE OLNEY MD 20832 60,000. MESORAH DC PUBLIC CHARITY GENERAL SUPPORT 10612 WOODSDALE SILVER SPRING MD 20901 7,500. YESHIVAS MIR YERUSHALAYIM PUBLIC CHARITY GENERAL SUPPORT 5227 NEW UTRECHT AVE BROOKLYN NY 11219 7 500 SEE CONTINUATION SHEET(S) Total **▶** 3a 151 500 b Approved for future payment NONE Total **▶** 3b

Part XVI-A	•	Analysis o	of	Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)		
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt		
1 Program service revenue:	code	Amount	code	Amount	function income		
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	900000	2,187.					
4 Dividends and interest from securities	523000	17,278.					
5 Net rental income or (loss) from real estate:			ŽX.				
a Debt-financed property							
b Not debt-financed property				<u> </u>			
6 Net rental income or (loss) from personal							
property							
7 Other investment income					<u></u>		
8 Gain or (loss) from sales of assets other							
than inventory	522100	-1,636.					
9 Net income or (loss) from special events		·	ļ				
10 Gross profit or (loss) from sales of inventory			<u> </u>				
11 Other revenue:			1				
a			<u> </u>				
b			<u> </u>				
c	L		<u> </u>				
d			ļ				
e	2000 N 102 40 W	4					
12 Subtotal. Add columns (b), (d), and (e)		17,829.	, ,,,,,,,	0.	0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	17,829.		
See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incor	ne ic reported :	in column (a) of Part V/I-A	contrib	outed importantly to the accord	nalichment of		
the foundation's exempt purposes (other than b			COIIII	outed importaintly to the accom	iipiisiii tietit oi		
	, p						
				 			
							
			-				

	•	Exempt Organ	izations			•			
1	Did the o	rganization directly or indi	rectly engage in any of the following	ng with any other organization	on described in sect	ion 501(c) of	12,189 137	Yes	No
	the Code	(other than section 501(c)(3) organizations) or in section 5	27, relating to political organ	izations?				1. 3
8	Transfers	from the reporting found	ation to a noncharitable exempt or	ganization of:			悬束		۽ جيءَ آهندن ڪيفيد
	(1) Cash)					1a(1)		X
		r assets					1a(2)		X
		nsactions:					A STATE OF	35	100
_			ble exempt organization				16(1)		X
			ncharitable exempt organization				1b(2)		X
			or other assets		• • • • • • •		1b(3)		X
							1b(4)		X
		s or loan guarantees					1b(5)		X
			mbership or fundraising solicitation				1b(6)		X
			iling lists, other assets, or paid em				1c		X
			"Yes," complete the following sche					ets	
			oundation. If the foundation receiv					οω,	
			other assets, or services received.		o in any bandaoin	or oncoming arrangements	J.1.011 111		
(a) Lıı		(b) Amount involved	(c) Name of noncharitable		(d) Description	of transfers, transactions, and	I sharing arr	angemer	nts
(-/	_	(-)	N/A		(-)				
			14/21						
	-+								
									
		· · · · · · · · · · · · · · · · · · ·			 				
					 				
		· - · · · · · · · · · · · · · · · · · ·			 				
					 				
					 				
									
					 				
									
									
									
					+				
					<u> </u>				
			tly affiliated with, or related to, one	· · · · · · · · · · · · · · · · · · ·	rations described	Г	 -1		1
		• •	than section 501(c)(3)) or in sect	tion 52/?		L	Yes	X) No
<u>b</u>	t "Yes," ce	omplete the following sche		(b) Time of annual land		a) Describe of colors			
		(a) Name of org	anization	(b) Type of organization		c) Description of relations	snip		
		N/A							
	<u>_</u>								
				<u> </u>			_ .		
~ :	and b		that I have examined this return, including pliete. Declaration of preparer (other that			has any knowledge Mi	y the IRS d		
Sig Her	п	Lundo	1000	1/-011/		sh	own below (see instr	()7
Her			Mary	16 a/-10	PRESID	ENT	X Yes	L	No
	Sign	nature of officer of trustee		Date	Title	—			
		Print/Type preparer's na	me Preparer's s	ignature	Date	Check if PTIN			
				1/1/2	6/22/16	self- employed			
Pai		DAVID BUTL		らうくしょ			0175		
	parer	Firm's name ROS	ENBLOOM & BUTLE	R, CPAS, P.C	•	Firm's EIN ► 52-1	6267	05	
Use	Only								
			55 RESEARCH BLV	-					
		RO	CKVILLE, MD 208	50		Phone no. (301)	<u> 762-'</u>	775	5

Form **990-PF** (2015)

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

OMB No 1545-0047

Employer identification number

SH	RENSKY FOUNDATION, INC.	52-2284925
Organization type (check o		
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	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
	filing Form 990, 990-EZ, or 990-PF that received, dunng the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from
year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa ruelty to children or animals. Complete Parts I, II, and III	
year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled mo ere the total contributions that were received during the year for an exclusively religious, implete any of the parts unless the General Rule applies to this organization because it is, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box charitable, etc., received nonexclusively
out it must answer "No" on I	at is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Forther filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

SHRENSKY	FOUNDATION,	INC.
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52-2284925

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEWIS & BARBARA SHRENSKY 10708 BALANTRE LANE POTOMAC, MD 20854	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash 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 Occash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

SHRENSKY	FOUNDATION,	INC.
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52-2284925

Part II.	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(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	nization			Employer identification number
SHRENS	KY FOUNDATION, INC.			52-2284925
Part III	Exclusively religious, charitable, etc., contributor Complete	columns (a) through (e) and the folio	wing line entry. For organization	(10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religiou	is, chantable, etc., contributions of \$1,000 o	r less for the year (Enter this info onc	s ₁ > \$
(a) No.	Use duplicate copies of Part III if addition	ial space is needed.		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-				
} -				
		(e) Transfer of gif	ft	
	* . * .	. 1700 4	D latinaskia of tax	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
-				
-			 	
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-			_	
_				
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
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(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
Part I	(2)1 2. poor o. g	(0) 000 0, giil	(4, 233	
-				
-		(e) Transfer of gif	<u> </u>	
		(e) Italisiei oi gii	•	
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
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(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
				
-				
		(e) Transfer of gif	t	
	_	-		
-	Transferee's name, address, ar	1d ZIP + 4	Relationship of tra	nsferor to transferee
] _				
-				

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Airiodili
YESHIVAS OF GREATER WASHINGTON		PUBLIC CHARITY	GENERAL SUPPORT	
2010 LINDEN LANE				
SILVER SPRING, MD 20910			<u></u>	38,000
COMMUNITY OF HOPE		PUBLIC CHARITY	GENERAL SUPPORT	
4 ATLANTIC STREET, SW				
WASHINGTON DC 20032				10,000
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Total from continuation sheets				40.000

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE		(A REVE PER B	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOM	3
FIDELITY G4 CAPITAL BRIDGE			49. 2,138.		49. 2,138.		
TOTAL TO PART I, LI	NE 3		2,187.		2,187.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
FIDELITY - CAPITAL	13,729			11,969.			-
GAIN DISTRIBUTIONS TO PART I, LINE 4	19,038		$\frac{0.}{0.}$ —	5,309. 17,278.			
FORM 990-PF		ACCOUNTI	NG FEES	5		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		3) IVEST- INCOME	(C) ADJUSTED NET INCOM		
TAX PREPARATION		1,825.		1,460.		36	55.
TO FORM 990-PF, PG	1, LN 16B	1,825.		1,460.		36	55.

FORM 990-PF (THER PROFES	SIONAL FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
AGENCY FEES	6,589.	6,589.		0.	
TO FORM 990-PF, PG 1, LN 16C	6,589.	6,589.		0.	
FORM 990-PF	TAX	ES	S'	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FOREIGN TAX FEDERAL TAX	49. 65.	0.		0.	
TO FORM 990-PF, PG 1, LN 18 =	114.	0.		0.	
	TOOMY	OTES	- C	FATEMENT 6	

FORM 990-PF	CORPORATE STOCK		STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T
SECURITIES - WELLS FA	RGO	588,415.	884,9	47.
TOTAL TO FORM 990-PF,	PART II, LINE 10B	588,415.	884,9	47.
FORM 990-PF	OTHER LIABILITIES		STATEMENT	8
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	
ACCRUED FEDERAL TAXES		320.		65.
TOTAL TO FORM 990-PF,	PART II, LINE 22	320.		65.
FORM 990-PF	LIST OF SUBSTANTIAL CONTRIB PART VII-A, LINE 10	BUTORS	STATEMENT	9
NAME OF CONTRIBUTOR	ADDRESS			
LEWIS F. SHRENSKY	10708 BALANTI POTOMAC, MD			
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGE	RRS .	STATEMENT	10

NAME OF MANAGER

LEWIS F. SHRENSKY BARBARA SHRENSKY