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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2015

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

iiile	mai nev	information about Form 990-PF and its se	eparate instructions is	s a <u>l www</u> ,i	15.909/10/111	990pi	ra i princ washecrinit
Fo	r caler	dar year 2015 or tax year beginning	06-01 , 2015,	and endin	g	05-	31 ,2016
		foundation MARY BYRD WYMAN MEMORIAL				identification number	 -
		aka DOUGLAS G OBER PRESIDENT			52-0783		
	lumber	and street (or P O box number if mail is not delivered to street address)	R	oom/suite		number (see instructions)
		OX 623			1 '	36-3235	,
		own, state or province, country, and ZIP or foreign postal code					abaali baaa
		ON, WY 83001-0623			C if exempt	on application is pending,	cneck nere
			of a former public char	ity	D 1 Foreig	n organizations, check he	re ▶
•	0,,00,,	Final return Amended re	•	•••	in ording	n organizations, oncon ne	
		Address change Name change				n organizations meeting th	
Н	Check	type of organization: X Section 501(c)(3) exempt priv				here and attach computat	
Ï	7		taxable private foundat	ion		foundation status was terr 07(b)(1)(A), check here	
1		arket value of all assets at J Accounting method:	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Accrual	1		
		year (from Part II, col (c),		Accidal .		ndation is in a 60-month te ction 507(b)(1)(B), check h	
	line 16				under see	2001 307 (B)(1)(B), G166K 1	
_	art I	,	[<u> </u>		(d) Disbursements
L	WI V 1	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net	ınvestment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	expenses per books		come	income	purposes (cash basis only)
-	1	Contributions, gifts, grants, etc , received (attach schedule)					(cash basis uniy)
	2	Check ► X if the foundation is not required to attach Sch B		 			
	3	Interest on savings and temporary cash investments	·				
	4	Dividends and interest from securities	49,167]	49,167		······································
	1 _	_	49,167	 	49,10/		······································
	5a b	Gross rents				· · · · · · · · · · · · · · · · · · ·	······································
	_	Net gain or (loss) from sale of assets not on line 10	12 402				
Ę,	6a		13,483				······································
鸶	b	Gross sales price for all assets on line 6a 288,977					
Z.	′	Capital gain net income (from Part IV, line 2)			13,483		
35	8	Net short-term capital gain		 		11,774	
	9	Income modifications		ļ			
> > > >	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold		ļ			
2	C	Gross profit or (loss) (attach schedule)					· ·
π	40	Other income (attach schedule)	60 650		60 653	11.554	······································
SCANNED	12	Total. Add lines 1 through 11 Compensation of officers directors trustees etc	62,653		62,653	11,774	
₹,,	13	Other employee telline and warre					
Sec	14	Other employee salaries and wages					
Ğ,	15	Pension plans, employee penefits 4 2016 Legal fees (attact schedule)		L			
X	16a						
Administrative Expe	b	Accounting fees (attach schedule) STM108 Other professional fees (alacid tradue) STM109	2,500	_	2,500		
λţį	C	Annual Control of the	12,509	<u> </u>	12,509		
stra	17	Interest					
Ë	18	Taxes (attach schedule) (see instructions) STM110	184		184		·r ·r ·r · · ·
Ē	19	Depreciation (attach schedule) and depletion					
Ă	20	Occupancy					
and	21	Travel, conferences, and meetings					
D	22	Printing and publications		<u> </u>			
Ë	23	Other expenses (attach schedule)					
era	24	Total operating and administrative expenses.	4	,	, ,		_
Operating	0.5	Add lines 13 through 23	15,193		15,193		115 050
_	25	Contributions, gifts, grants paid	115,050		15 500		115,050
	26	Total expenses and disbursements. Add lines 24 and 25 .	130,243		15,193		115,050
	27	Subtract line 26 from line 12:	,	*		‡	
	a	Excess of revenue over expenses and disbursements .	(67,590	<u>}</u>			***************************************
	b	Net investment income (if negative, enter -0-)			47,460		
	С	Adjusted net income (if negative, enter -0-)	1		1	11.774	

P	art I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	11,329	8,829	8,829
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable		71 - 10 - 10	
		Less: allowance for doubtful accounts			<u> </u>
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		-	
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	ł	Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U S. and state government obligations (attach State1816)	98,179	98,179	106,983
	b	Investments - corporate stock (attach schedule) STM137	1,177,706	1,092,344	1,794,922
	c	· · · · · · · · · · · · · · · · · · ·	111,991	143,002	135,620
	11	Investments - land, buildings, and equipment basis			
		Less. accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans	43,112	31,471	33,470
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶		-, -, -, -, -,	
	ĺ	Less accumulated depreciation (attach schedule)			
	15	Other assets (describe >			<u> </u>
	16	Total assets (to be completed by all filers - see the			_
		instructions. Also, see page 1, item I)	1,442,317	1,373,825	2,079,824
_	17	Accounts payable and accrued expenses	2,434	2,882	2,075,024
	18	Grants payable	63,000	51,000	
es	19	Deferred revenue	03,000	51,000	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		- 	
ఐ	21	Mortgages and other notes payable (attach schedule)			
Ξ	22				
	23	Other liabilities (describe Total liabilities (add lines 17 through 22)	CE 424	F2 000	
	23		65,434	53,882	
		Foundations that follow SFAS 117, check here			
ë	24	,			
an	24	Unrestricted	 		
Net Assets or Fund Balances	25	Temporarily restricted			
ᅙ	26	Permanently restricted			
ָבַׁ,		Foundations that do not follow SFAS 117, check here X			
5		and complete lines 27 through 31.			
S.	27	Capital stock, trust principal, or current funds	1,376,883	1,319,943	
Sel	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
et	30	Total net assets or fund balances (see instructions)	1,376,883	1,319,943	
z	31	Total liabilities and net assets/fund balances (see			
		instructions)	1,442,317	1,373,825	
	rt III				
		net assets or fund balances at beginning of year - Part II, column (a), line 3			
		f-year figure reported on prior year's return)		 +	1,376,883
		amount from Part I, line 27a			(67,590)
		ıncreases not included ın line 2 (itemıze) ▶			
		nes 1, 2, and 3		 1	1,309,293
		ases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	1,309,293
EΑ					Form 990-PF (2015)

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Part IV Capital Gains	and Losses for Tax on Investn	nent Income)			
	be the kind(s) of property sold (e.g., real estate, shouse, or common stock, 200 shs MLC Co.)	,	(b) How acquired P-Purchase D-Donation	(c) Date acq (mo , day		Date sold lo , day, yr)
1a See STM134						
b		·				
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or ot plus expens			(h) Gain or (loss) (e) plus (f) minus (
a 288,977			275,494			13,483
_ b						
С						
						
Complete only for assets show	ring gain in column (h) and owned by the	foundation on 12	2/31/69	(I) G	ains (Col (h) gain	minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col (j),), but not less than osses (from col. (h	
a						13,483
b						
С						
d						
<u>e</u>		 				
2 Capital gain net income or (net	canital loss)	ter in Part I, line	>			
	if (loss), enter-	-0- in Part I, line	/ · · · · ·	2		13,483
, -	loss) as defined in sections 1222(5) and (•	_	j		
	8, column (c) (see instructions). If (loss),	enter -U- In	}	3		11 774
	nder Section 4940(e) for Reduc	and Tay on I	lot Investme			11,774
If section 4940(d)(2) applies, leave	ection 4942 tax on the distributable amoun	nt of any year in t		٠٠)	Y	es X No
	palify under section 4940(e). Do not comp		nakina ony ontrio			
1 Enter the appropriate amount in (a)	n each column for each year; see the insti		naking any enine	<u>ss.</u>	(d)	
Base period years Calendar year (or tax year beginning		Net value of no	(c) incharitable-use as	sets	Distribution rat (col (b) divided by	/ col (c))
2014	104,400	 	2,316,3		0.04507	
2013	97,125		2,182,4		0.044503	
2012	94,800	 	1,979,0		0.047902	
2011	89,935	 	1,904,6		0.047219	
2010	90,000	l	1,863,4	104	0.048299	
				2	0.232993	3
	has been in existence if less than 5 year			3	0.046599	9
4 Enter the net value of noncharit	table-use assets for 2015 from Part X, line	e 5		. 4	2,	168,048
5 Multiply line 4 by line 3				. 5		101,029
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			. 6		475
7 Add lines 5 and 6				. 7		101,504
8 Enter qualifying distributions fro						115,050
If line 8 is equal to or greater that	an line 7, check the box in Part VI, line 1b	, and complete t	hat part using a	1% tax rate. S	iee the	

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	<u>ee instr</u>	ucti	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	(-)				475
	here ▶ X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 2				0
3	Add lines 1 and 2	_			475
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				475
6	Credits/Payments:	1			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 5,253				
b	Exempt foreign organizations - tax withheld at source 6b	1			
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld	ļ			
7	Total credits and payments. Add lines 6a through 6d			5	,253
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				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>		4	<u>,778</u>
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax ▶ 4,778 Refunded ▶ 11	<u> </u>			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-		Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?	· · ·	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?	_	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \$ (2) On foundation managers. \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. \$			i	
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.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	├ -	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	h	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	· · · -	5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or		- 1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		_	7,	
_	conflict with the state law remain in the governing instrument?	• • -	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	· · -	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	MD				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		. 1	. ·	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	· · -	8b	_X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	}	}	1	
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"		<u> </u>		v
	complete Part XIV	· ·	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		.		v
	names and addresses		10	I	X

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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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

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

foundation had excess business holdings in 2015.)

Х

Х

4a

4h

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the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

_	990-PF (2015) MARY BYRD WYMAN ME						52-078		Page 6
Pa	t VII-B Statements Regarding Activit			m 472	May Be	Requi	red (continued	l) -	
5a	During the year did the foundation pay or incur any	amount to	:						
	(1) Carry on propaganda, or otherwise attempt to in	fluence le	egislation (secti	on 4945	(e))?		Yes X No		
	(2) Influence the outcome of any specific public ele	-	· · · · · · · · · · · · · · · · · · ·		-				
	directly or indirectly, any voter registration drive	?					Yes X No		
	(3) Provide a grant to an individual for travel, study,	or other	sımılar purpose	s?			Yes X No		
	(4) Provide a grant to an organization other than a	chantable	, etc , organiza	on desc	ribed in				
	section 4945(d)(4)(A)? (see instructions) .						Yes X No		
	(5) Provide for any purpose other than religious, ch	arıtable, s	cientific, literar	/, or edu	cational				
	purposes, or for the prevention of cruelty to child	iren or an	imals?				Yes X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the tra	nsactions	s fail to qualify t	ınder the	exceptions	describe	d in		
	Regulations section 53.4945 or in a current notice re	garding d	lısaster assista	nce (see	instructions)?		5b	
	Organizations relying on a current notice regarding of	disaster a	ssistance chec	k here			▶ 🔲		
С	If the answer is "Yes" to question 5a(4), does the for	undation o	claım exemptior	from th	e tax				
	because it maintained expenditure responsibility for	the grant?	?				Yes No		
	If "Yes," attach the statement required by Regulation	s section	53.4945-5(d).						
6a	Did the foundation, during the year, receive any fund	ls, directly	or indirectly, to	o pay pre	emiums				
	•						Yes X No		
þ	Did the foundation, during the year, pay premiums, of	lirectly or	indirectly, on a	persona	I benefit con	tract?		6b	X
	If "Yes" to 6b, file Form 8870.								
7a	At any time during the tax year, was the foundation a		•				Yes X No		
_ <u>b</u> _	If "Yes," did the foundation receive any proceeds or							7b	
Pai	t VIII Information About Officers, Di	rectors	, Trustees,	Found	dation Ma	nager	s, Highly Paid	Emplo	yees,
	and Contractors								
_1 L	ist all officers, directors, trustees, foundation ma							·	
		(b) it	le, and average	1 (c) Cc		1 (6)	Contributions to	/ \	
	(a) Name and address		irs per week		ompensation ot paid,		oyee benefit plans		nse account, llowances
	<u> </u>	hou devot	irs per week ted to position	(if n		empl			nse account, llowances
	BLAS G OBER	hou devot	ted to position DENT/TRE	(if n	oot pald, iter -0-)	empl	oyee benefit plans ferred compensation		llowances
P. (CLAS G OBER D. BOX 623, JACKSON, WY 83011	hou devot	irs per week ted to position	(lf n	ot pald,	empl	oyee benefit plans		
P. (GLAS G OBER D. BOX 623, JACKSON, WY 83011 CLES M OBER	hou devot	rs per week ted to position DENT/TRE 1.00	(lf n	oot pald, iter -0-)	empl	oyee benefit plans ferred compensation		llowances 0
P. (CHAI 100(CLAS G OBER D. BOX 623, JACKSON, WY 83011 CLES M OBER D FELL STREET APT 600, MD 21231	PRESI	rs per week led to position DENT/TRE 1.00 EEE 1.00	(lf n	oot pald, iter -0-)	empl	oyee benefit plans ferred compensation		llowances
P. (CHAI	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER FELL STREET APT 600, MD 21231 FERT C MCCABE	PRESI	ITS per week led to position DENT/TRE 1.00 EEE 1.00	(lf n	oot pald, iter -0-) O	empl	oyee benefit plans erred compensation 0		llowances 0
P. (CHAI	CLAS G OBER D. BOX 623, JACKSON, WY 83011 CLES M OBER D FELL STREET APT 600, MD 21231	PRESI	rs per week led to position DENT/TRE 1.00 EEE 1.00	(lf n	oot pald, iter -0-)	empl	oyee benefit plans ferred compensation		llowances 0
P. (CHAI 100(CAL	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER FELL STREET APT 600, MD 21231 FERT C MCCABE	PRESI	ITS per week led to position DENT/TRE 1.00 EEE 1.00	(lf n	oot pald, iter -0-) O	empl	oyee benefit plans erred compensation 0		llowances 0
P. (CHAI 100(CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210	TRUST	ITS per week led to position DENT/TRE 1.00 EE 1.00 EE 1.00	(If n	oot pald, ster -0-) O O	empl and de	oyee benefit plans erred compensation 0 0		llowances 0
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER FELL STREET APT 600, MD 21231 FERT C MCCABE	TRUST	ITS per week led to position DENT/TRE 1.00 EE 1.00 EE 1.00	(If n	oot pald, ster -0-) O O	empl and de	oyee benefit plans erred compensation 0 0		llowances 0
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 CERT C MCCABE WOODLAWN ROAD, MD 21210 COMpensation of five highest-paid employees (oth	TRUST	ris per week led to position DENT/TRE 1.00 EE 1.00 EE 1.00 DEE	(if r	oot pald, ster -0-) O O	empl and de	ovee benefit plans erred compensation 0 0 0 . If none, enter		llowances 0
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 CERT C MCCABE WOODLAWN ROAD, MD 21210 COMpensation of five highest-paid employees (oth	TRUST	ris per week led to position DENT/TRE 1.00 EE 1.00 THE	on line	0 0 0	empl and de	ovee benefit plans erred compensation 0 0 0 (d) Contributions to employee benefit	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	RLAS G OBER D. BOX 623, JACKSON, WY 83011 RLES M OBER FELL STREET APT 600, MD 21231 FERT C MCCABE WOODLAWN ROAD, MD 21210 OMPensation of five highest-paid employees (oth NONE."	TRUST	ris per week led to position DENT/TRE 1.00 EE 1.00 EE 1.00 DEE	on line	oot pald, ster -0-) O O	empl and de	oyee benefit plans erred compensation 0 0 0 the first plans (d) Contributions to	(e) Expen	0 0 0
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,
P. (CHAI 1000 CALV 219	CLAS G OBER C. BOX 623, JACKSON, WY 83011 CLES M OBER C FELL STREET APT 600, MD 21231 PERT C MCCABE WOODLAWN ROAD, MD 21210 Compensation of five highest-paid employees (oth NONE." (a) Name and address of each employee paid more than \$5	TRUST	ITS per week led to position IDENT/TRE 1.00 IDENT/TRE I	on line	0 0 0	empl and de	oyee benefit plans ferred compensation 0 0 0 0 (d) Contributions to employee benefit plans and deferred	(e) Expen	0 0 0 see account,

and Contractors (continued) Five highest-paid independent contractors for professional services (see in	nstructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
Ptal number of others receiving over \$50,000 for professional services		
	<u></u>	
art IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant	statistical information such as the number of	F
organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
NONE		
2		
<u> </u>		
3		
1		
art IX-B Summary of Program-Related Investments (see ins	structions)	
Describe the two largest program-related investments made by the foundation during the tax ye		Amount
NONE		
	· · · · · · · · · · · · · · · · · · ·	
2		
Ill other program related investments. See instructions		
NI other program-related investments. See instructions		
otal. Add lines 1 through 3		
		Form 990-PF (20

qualifies for the section 4940(e) reduction of tax in those years.

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: 1a 2,186,800 а b 1b 14,264 C Fair market value of all other assets (see instructions) 1c ٥ Total (add lines 1a, b, and c) 1d 2,201,064 Reduction claimed for blockage or other factors reported on lines 1a and 2 2 O 3 2,201,064 3 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 4 33,016 5 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 2,168,048 6 108,402 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.) 108,402 Tax on investment income for 2015 from Part VI, line 5 2a 475 2a Income tax for 2015. (This does not include the tax from Part VI.) 2b b C 2c 475 3 3 107,927 4 Recoveries of amounts treated as qualifying distributions 4 5 5 Add lines 3 and 4 107,927 6 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, 7 107,927 Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1a 115,050 а Program-related investments - total from Part IX-B 1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 3 Amounts set aside for specific charitable projects that satisfy the: а 3a b 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 115,050 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 5 475 114,575 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form	990-PF (2015) MARY BYRD WYMAN MEMOR	IAL		52-0781416	Page 9
	t XIII Undistributed Income (see instruc				
·		(a)	(b)	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI,	Corpus	Years pnor to 2014	2014	
	line 7	·····			107,927
2	Undistributed income, if any, as of the end of 2015:				
а	Enter amount for 2014 only			114,995	····
b	Total for prior years:,,				
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
С	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e				·····
4	Qualifying distributions for 2015 from Part XII,				
	line 4: ▶ \$ 115,050				
а	Applied to 2014, but not more than line 2a			114,995	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2015 distributable amount	,			5
e	Remaining amount distributed out of corpus				
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 .				
	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)		1]	
	tax has been previously assessed				
d					
_	amount - see instructions				
е	Undistributed income for 2014. Subtract line				
_	4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2015. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2016				107,87
7	Amounts treated as distributions out of corpus	1,-1			
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be			_	
	required - see instructions)		1		
8	Excess distributions carryover from 2010 not				
o	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
3	Subtract lines 7 and 8 from line 6a		1		
40	Analysis of line 9:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 			
10	Excess from 2011			•	
a	Excess from 2012			1	
b	Excess from 2012				
C					
d	Excess from 2014				
e	Excess from 2015		s l		

10 C

Page 10

Parl	XIV Private Operating Fou	ndations (see ins	tructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or	determination letter that	at it is a private operatin	g		
	foundation, and the ruling is effective for	2015, enter the date of	f the ruling		▶	
b	Check box to indicate whether the found	ation is a private opera	iting foundation describe	ed in section	4942(j)(3) or	4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	
	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	(2) 2010	(0) 2017	(0) 2010	(2) 23.2	
h	85% of line 2a					
			 		-	
С	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 .	<u> </u>				
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c			<u> </u>		
3 a	Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test - enter:					
	(1) Value of all assets(2) Value of assets qualifying under			 		
b	section 4942(j)(3)(B)(i)					
	Part X, line 6 for each year listed "Support" alternative test - enter.					
С	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Informa	tion (Complete t	his part only if the	e foundation had	d \$5,000 or mor	e in assets at
	any time during the yea	r - see instructio	ns.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation who before the close of any tax year (but only	have contributed more y if they have contribute	e than 2% of the total or ed more than \$5,000). (ontributions received b See section 507(d)(2).	y the foundation)	
	NONE					
	List any managers of the foundation who	own 10% or more of t	the stock of a corporation	n (or an equally large	nortion of the	
J	ownership of a partnership or other entity				portion of the	
	NONE					
2	Information Regarding Contribution,					
	Check here ► X if the foundation only unsolicited requests for funds. If the four other conditions, complete items 2a, b, c	ndation makes gifts, gra	o preselected charitable ants, etc. (see instruction	e organizations and do ns) to individuals or or	es not accept ganizations under	
а	The name, address, and telephone num	ber or e-mail address o	of the person to whom a	pplications should be a	addressed [.]	
b	The form in which applications should be	e submitted and informa	ation and materials they	should include:		
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, factors:	such as by geographi	cal areas, charitable fiel	ds, kinds of institutions	s, or other	

52-0781416

MARI BIRD WIMAN MEMORI

Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of contribution Amount any foundation manager recipient or substantial contributor Name and address (home or business) a Paid during the year ODYSSEY SCHOOL GRANT 3257 BRIDLE BRIDGE RIDGE LANE TUTION STEVENSON, MD 21153 NONE PC ASSISTANCE 38,350 CHRISTCHURCH SCHOOL GRANT 49 SEAHORSE LANE TUTION NONE PC ASSISTANCE 38,350 CHRISTCHURCH, VA 23031 THE GUNSTON SCHOOL POST OFFICE BOX 200 TUTION PC ASSISTANCE 38,350 NONE CENTREVILLE, MD 21617 3a 115,050 Approved for future payment SCHOOL SELECTION NOT COMPLETED TUTION ASSISTANCE 51,000 NONE

51,000

3b

52-0781416

MARY BYRD WYMAN MEMORIAL

	Unrelated	d business income	Excluded by se	ection 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue	code				
a			-		
b					
			-		
			-1		
f				··	-
g Fees and contracts from government agencies					
2 Membership dues and assessments		<u>-</u>			
3 Interest on savings and temporary cash investments		-			
4 Dividends and interest from securities					49,10
5 Net rental income or (loss) from real estate				,	
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					13,48
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue: a					
b					
С					
d					
e					
2 Culphotol Add polymers (b) (d) suct (-)					62,65
∠ Sublotal Add columns (b), (d), and (e)	L1				
2 Subtotal Add columns (b), (d), and (e)				. 13	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the	Accompl	lishment of Ex	empt Purpo	ses	62,65
	e Accomplements of the control of th	lishment of Ex ed in column (e) of l er than by providing	empt Purpo: Part XVI-A contri funds for such p	ses buted importantly to th	62,65 e
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt p	e Accomplement is reported burposes (other ARDING GR.	lishment of Exed In column (e) of lear than by providing	empt Purpo: Part XVI-A contri funds for such p	ses buted importantly to th	62,65 e
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt possible. SEE ATTACHED "INFORMATION REGA	e Accomplication is reported burposes (other ARDING GR.	lishment of Exed in column (e) of let than by providing ANT PROGRAMS ANT PROGRAMS	empt Purpo: Part XVI-A contri funds for such p	ses buted importantly to th	62,65 e
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Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt position of the second secon	e Accomplication is reported burposes (other ARDING GR.	lishment of Exed in column (e) of let than by providing ANT PROGRAMS ANT PROGRAMS	empt Purpo: Part XVI-A contri funds for such p	ses buted importantly to th	62,65 e
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Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt position of the second secon	e Accomplication is reported burposes (other ARDING GR.	lishment of Exed in column (e) of let than by providing ANT PROGRAMS ANT PROGRAMS	empt Purpo: Part XVI-A contri funds for such p	ses buted importantly to th	62,65 e
Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt position of the foundation of the foundati	e Accomplication is reported burposes (other ARDING GR.	lishment of Exed in column (e) of let than by providing ANT PROGRAMS ANT PROGRAMS	empt Purpo: Part XVI-A contri funds for such p	ses buted importantly to th	62,65 e
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Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

7	Did the of	ganization direc	ctly or indirectly enga	age in any o	of the following with a	iny other or	ganization de	scribed				Yes	NO
	in section	501(c) of the C	ode (other than sect	tion 501(c)(3	3) organizations) or i	n section 5	27, relating to	political					
	organizat			, ,,			_				,		1
а	-		ing foundation to a n	oncharitable	e evemnt organizatio	on of:							ĺ
u		•	=								4-74		v
	• •										1a(1)		X
	• •										1a(2)	,	X
b	Other tran	nsactions:											
	(1) Sales	of assets to a r	noncharitable exemp	t organizatio	on						1b(1)		X
	(2) Purch	ases of assets	from a noncharitable	e exempt or	ganization						1b(2)		X
			uipment, or other as								1b(3)		X
											1b(4)		X
			ngements										-
			tees								1b(5)		X
	(6) Perfo	rmance of servi	ces or membership of	or fundraisir	ng solicitations .						1b(6)		X
С	Sharing o	f facilities, equip	ment, mailing lists, o	other assets	s, or paid employees						1c_		X
d	If the answ	wer to any of the	e above is "Yes," coi	mplete the f	ollowing schedule. C	Column (b) s	should always	show th	e fair i	market			
			assets, or services		_						et		
		_	or sharing arrangeme										
(2) 10		mount involved											
(a) Lir	ie iio (b) F	amount involved	(c) Name of nor	ichantable ex	empt organization	(a) Des	scription of tran	isiers, trai	isaction	15, 2110 5	namy and	ingeme	1115
_												_	
				:-									
						-	-						
													
													 -
_													
	1				-								
			 .										
			-										
						<u> </u>							
				_									
2a	Is the four	dation directly o	or indirectly affiliated	with, or rela	ated to, one or more	tax-exempt	organization	s					
	described	in section 501(c	c) of the Code (other	than section	on 501(c)(3)) or in se	ction 527?					Yes	s X	No
			owing schedule.		00 1(0)(0)/ 0 00						L	ئت،	
				ı .	(h) Tunn of con		T	(a) D		n of1-1	onch:-		
	(i	a) Name of organi	zation	((b) Type of organizatio	<u>n</u>	 -	(c) Des	scription	n of relati	onsnip		
			 -				ļ <u> </u>					_	
							_						
_													
	Under ne	nalties of penury. Ld	leclare that I have examin	ed this return ii	ncluding accompanying si	chedules and s	tatements, and to	the best o	f my kno	owledge a	nd belief. it i	s true.	
٠	I correct a	nd complete Declar	ation of preparer (other th	an taxpayer) is	based on all information of	of which prepar	er has any knowl	edge					
Sig		$^{\prime}$		ſ	11/0/2010	•			ſ		IRS discuss		
Her	e /`	X my farola	<u></u>		11/7/2016	PRESID	ENT/TRE			with the p	preparer sho いっ でり	wn belov Yes	
	Signa	ature of Afficer or trus	size		Date	Title			l	(306 1131	<u>′ </u>	163	No
		Print/Type prepare	r's name		's signature		Date		Check	X If	PTIN		_
Paid	d	Peter Medi	nger	JY.	אנאת פורף ניד	MIS.	11-03-20	16	self-em		P00531	718	
	parer			100112 = 4 =	a Service	yuu -					<u> </u>		
			Medinger Ac		g services	/		Firm's EIN				-	
Jse	Only	Firm's address	9 Seminole					Phone no					
			Catonsville	MD 212	28				410	<u>-788-</u>	1070		
											F 44.	DF /-	10451

Federal Supporting Statements **2015** PG01 Name(s) as shown on return 52-0781416 MARY BYRD WYMAN MEMORIAL STATEMENT #136 FORM 990PF - PART II - LINE 10(A) INVESTMENTS: U.S. GOVERNMENT OBLIGATION SCHEDULE BOOK VALUE (BOY) BOOK VALUE (EOY) FMV (EOY) CATEGORY INVESTMENTS- U.S. AND STATE 98,179 98,179 106,983 <u>98,179</u> <u>98,179</u> <u>106,983</u> TOTALS PG01 FORM 990PF - PART II - LINE 10(B) STATEMENT #137 INVESTMENTS: CORPORATE STOCK SCHEDULE BOY BOOK VALUE EOY FMV **CATEGORY** INVESTMENTS: CORPORATE STOCK 1,177,706 1,092,344 1,794,922 1,177,706 1,092,344 1,794,922 TOTALS PG01 FORM 990PF - PART II - LINE 10(C) STATEMENT #138 INVESTMENTS: CORPORATE BOND SCHEDULE BOY BOOK VALUE EOY FMV **CATEGORY** 111,991 143,002 135,620 INVESTMENTS: CORPORATE BONDS 111,991 143,002 135,620 TOTALS

		Federal Su	Federal Supporting Statements	ments	2015 PRO1	
Name(s) as shown on return MARY BYRD WYMAN MEMORIAL					ווא ווי	}
	FORM 990PF - PART I	- LINE	16(B) - ACCOUNTING FEES SCHEDULE	снерисе	STATEMENT #108~	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
ACCOUNTING FEES	2,500	2,500	0	0	9	
TOTALS	2,500	2,500	0	0		
	FORM 990PF - PAR	FORM 990PF - PART I - LINE 16(C) - 0	- OTHER PROFESSIONAL FEES SCHEDULE	ES SCHEDULE	PG01 STATEMENT #109~	
DESCRIPTION PORTFOLIO MGT. FEE	REVENUE AND EXPENSES 12,509	NET INVESTMENT 12,509	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
TOTALS	12,509	12,509	0	0		

	Feder	Federal Supporting Statements	ments	2015
Name(s) as shown on return MARY BYRD WYMAN MEMORIAL				Your Social Security Number 52-0781416
	FORM 990PF - PART I	- LINE 18 - TAXES SCHEDULE		STATEMENT #110~
DESCRIPTION FOREIGN TAX	REVENUE NET AND EXPENSES INVESTMENT 184 184	ADJUSTED MENT NET INCOME 184	CHARITABLE PURPOSE 0	
	184	184	0	

		Federal	Supporting	deral Supporting Statements			2015	1050
Name(s) as shown on return MARY BYRD WYMAN MEMORIAL							Your Social Security Number	Securty Number 52-0781414
	FORM 990-PF - PART IV	TV - CADITAL CA	THE AND LOSSES	- FADITAL CAIMS AND LOSCES THERDMATTON CONTENT ON				
		יי כארוואר שא	INS AND LUSSES	INFORMALION COVER	(HOA)		STATE	STATEMENT #134~
	P-PURCHASE					COST OR		GAINS MINUS
COLUMNIA ACCOUNTS	D-DONATION	DATE ACQUIRED	DATE SOLD	- 1	DEPRECIATION	OTHER BASIS	GAIN OR LOSS E	EXCESS OR LOSSES
COLUMBIA ACURN IR	a . 1	06-03-2016	06-03-2016	829			859	829
SOUS RAYONIER INC	۵.	03-14-2012	08-31-2015	12,640		18,506	(5,866)	(5,866)
100S RAYONIER INC	۵.	03-17-2015	08-31-2015	2,298		2,693	(395)	(395)
35S BEAR STEARNS ARM 2003-8 1A1	<u>α</u>	10-22-2009	06-25-2015	35		28	7	7
815S FNR 2011-19 EN	۵.	12-18-2013	06-25-2015	815		843	(58)	(28)
715 JP MORGAN MTG TR 2006-A2 4A1	۵	09-23-2009	06-25-2015	71		99	ī	, rv
35S BEAR STEARNS ARM 2003-08 1A1	α.	12-18-2013	07-25-2015	35		27	∞	∞
778 FNR 2011-19 EN	۵	12-18-2013	07-25-2015	778		805	(27)	(27)
150S JP MORGAN MTG TR 2006-A2 4A1	a	09-23-2009	07-25-2015	150		140	10	10
35S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	08-25-2015	35		28	7	
670S FNR 2011-19 EN	a	12-18-2013	08-25-2015	029		693	(23)	(23)
243S JP MORGAN MTG TR 2006-A2 4A1	۵.	09-23-2009	08-25-2015	243		225	18	18
XXXX								!
39S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	09-25-2015	39		30	6	6
539 FNR 2011-19 EN	<u>α</u>	12-18-2013	09-25-2015	539		558	(19)	(19)
83S JP MORGAN MTG TR 2006-A2 4A1	۵.	09-23-2009	09-25-2015	83		12	, 9	, 9
36S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	10-25-2015	36		59	7	7
498S FNR 2011-19 EN	۵.	12-18-2013	10-25-2015	867		515	(17)	(17)
64S JP MORGAN MTG TR 2006-A2 4A1	۵	09-23-2009	10-25-2015	79		09	7	7
25000 CITIGROUP STEP NOTE	a	11-08-2010	11-16-2015	25,000		25,010	(10)	(10)
35S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	11-25-2015	35		28	2	2
645S FNR 2011-19 EN	۵	12-18-2013	11-25-2015	979		299	(22)	(25)
57S JP MORGAN MTG TR 2006-A2 4A1	a	09-23-2009	11-25-2015	25		53	7	,
77 YYYYY								
OS COLUMBIA ACKON IR	<u>a</u> . (12-09-2015	12-09-2015	5,372			5,372	5,372
SO IVI ASSEI SIRAIEGI I	L	5102-01-21	12-10-2015	1,622			1,622	1,622
OS KOWE I PRICE MID CAP GROWTH	Δ.	12-14-2015	12-14-2015	145			145	145
US ROWE T PRICE MIS CAP GROWTH	a .	12-14-2015	12-14-2015	3,022			3,022	3,022
OS DFA US SMALL CAP VALUE	α.	12-16-2015	12-16-2015	1,179			1,179	1,179
1000S GUGGENHEIM S P GLOBAL WATER	a	05-30-2014	12-23-2015	27,716		29,478	(1,762)	(1,762)
500S CHECK POINT SOFTWARE	α.	12-09-2010	12-23-2015	41,441		22,260	19,181	19, 181
1000S ABERDEEN GLOBAL OPPORTUNITY	۵	12-22-2004	12-23-2015	10,092		20,035	(6,943)	(6,943)
37S BEAR STEARNS ARM 2003-8 1A1	Q.	10-22-2009	12-25-2015	37		29	80	· 80
518S FNR 2011-19 EN	<u>α</u> .	12-18-2013	12-25-2015	518		537	(19)	(19)

		בוסמטים		rederal Supporting Statements		1,00	
Name(s) as shown on return						2015	PG02
MARY BYRD WYMAN MEMORIAL					į	Your Social S	7 our social secunty Number 52-0781416
ŭ.	ORM 990-PF - PART	IV - CAPITAL GA	INS AND LOSSES	FORM 990-PF - PART IV - CAPITAL GAINS AND LOSSES INFORMATION (OVERFLOW)		STA	STATEMENT #134~
	P-PURCHASE				COST OR		GAINS MINUS
DESCRIPTION	D-DONATION	DATE ACQUIRED	DATE SOLD	SALES PRICE DEPRECIATION	OTHER BASIS	GAIN OR LOSS	EXCESS OR LOSSES
114S JP MORGAN TR 2006-A2 4A1	۵	09-23-2009	12-25-2015	114	105	6	6
34S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	01-25-2016	34	27	7	7
694S FNR 2011-19EN	a .	12-18-2013	01-25-2016	769	718	(54)	(54)
64S JP MORGAN MIG TR 2006-A2 4A1	۵	09-23-2009	01-15-2016	99	59	5	
34S BEAR STEARNS ARM 2003-8 1A1	a	10-22-2009	02-25-2016	34	27	2	7
493S FNR 2011-19 EN	a	12-18-2013	02-25-2016	267	510	(11)	(17)
136S JP MORGAN MTG TR 2006-A2 4A1	۵	09-23-2009	02-25-2016	136	126	10	10
XXXX							
500S AMERICAM EXPRESS CO	۵	10-13-1994	03-24-2016	30,151	4,527	25,624	52,624
750 CHICAGO BRIDGE IRON	۵	12-05-2012	04-08-2016	25,682	30,651	(696'5)	
681S IVY ASSET STRATEGY	c .	09-18-2009	04-08-2016	14,285	15,025	(140)	
192S IVY ASSET STRATEGY I	a.	03-19-2012	04-06-2016	4,039	5,025	(986)	(986)
312S IVY ASSET STRATEGY I	a.	02-14-2014	04-08-2016	6,539	10,025	(3,486)	(3,486)
505 COLUMBIA ACORN TR	a.	09-18-2009	04-29-2016	909'6	12,000		
2228S SALIENT MLP ENERGY	۵	09-05-2013	05-27-2016	17,272	23,829	(6,557)	
384S SALIENT MLP ENERGY	<u>α</u>	02-14-2014	05-17-2016	2,977	4,863	(1,886)	(1,886)
355S SALIENT MLP ENERGY	<u>م</u>	05-30-2014	05-27-2016	2,755	4,875	(2,120)	(2,120)
3652S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	03-25-2015	3,652	2,868	784	784
340S FNR 2011-19 EN	۵	12-18-2013	03-25-2016	340	352	(12)	(12)
148S JP MORGAN MTG TR 2006-A2 4A1	۵	09-23-2009	03-25-2016	148	138	10	10
2250S PIMCO UNCONSRAINED BOND	۵	09-05-2013	04-08-2016	22,934	25,025	(2,091)	(2,091)
885S PIMCO UNCONSTRAINED BOND	α.	05-30-2014	04-08-2016	9,020	10,025	(1,005)	(1,005)
19S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	04-25-2016	19	15	7	7
527S FNR 2011-19 EN	۵	12-18-2013	04-25-2016	527	246	(19)	(19)
202S JP MORGAN MTG TR 2006-A2 4A1	۵	09-23-2009	04-25-2016	202	187	15	15
20S BEAR STEARNS ARM 2003-8 1A1	۵	10-22-2009	05-25-2016	20	16	7	7
429S FNR 2011-19 EN	۵	12-18-2013	05-25-2016	627	7 77	(15)	(15)
72S JP MORGAN MTG TR 2006-A2 4A1	۵	09-23-2009	05-25-2016	72	99	9	9
TOTAL				288.977	707 526	12 LRZ	12 7.87

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MARY BYRD WYMAN MEMORIA ASSOCIATION #52-0781416

INFORMATION REGARDING GRANT PROGRAMS FORM 990 PF PARTS XV LINE b & XVI-B

GRANT PROCESS – 2002 TO PRESENT

Commencing in the year 2002, the Board of Trustees of the Mary Byrd Wyman Memorial Association adopted a new process of awarding scholarship grants. Prior thereto, individual student were selected from an applicant pool as the recipients of grants. The applicant pool consisted of students entering or already in independent schools beginning in the ninth grade. Infrequently, consideration was given students in the sixth through eighth grades.

The process adopted by the Trustees in 2002 involves making scholarship grants to independent schools for their distribution to deserving students. The trustees no longer have the administrative assistance required to summarize and review individual applications and recognize the prevailing practice of schools in finding the funds necessary to attract desirable scholarship students from one source or another.

Each Trustee annually researches a number of independent schools which might qualify for support from the Mary Byrd Wyman Memorial Association. Consideration is given, but not limited, to the following: size of student body, diversity within the student body, total amount of scholarship funds available annually relative to total revenues. Each Trustee then recommends a school to the full Board for its consideration for a scholarship grant. The Board selects one or more of the independent schools proposed for grants and allocates the available funds from the Association to the selected school(s).

Each independent school which is a recipient of a scholarship grant is required to notify the Association of the name(s) of the individual(s) benefiting from the grant, including some information about courses taken, grades, extracurricular activities, etc. The Foundation has requested that each school permit a Trustee or Trustees to meet the individual beneficiaries, thus enabling them to understand the school's scholarship selection process and share with the student(s) some information about the Mary Byrd Wyman Memorial Association. The Association places no restriction on the use of the funds granted other than that they be used strictly for scholarships. In other words, schools may choose to make partial scholarship grants to several students or use the entire grant for a single student.

The process established by the trustees does not preclude a Trustee or Trustees from sponsoring the same school in more than one year, but the Trustees are very aware of the number of schools with scholarship needs and generally make an effort to support different

schools. They also recognize that the funds provided by the Association are not a great size and the several years of support can make a feat difference to a school.

In the short period of time that the new process has been in effect, there has been a significant change in the way schools approach the Association for scholarship funds. They have generally been very forthcoming in providing information about the school programs in effect and follow up with the Trustees about student beneficiaries of the scholarships. Whereas in the past there has been very little interaction with schools or students, that is no longer the case. The Trustees' initial conclusion from the change in the grant process is therefore that they are better informed about the beneficiaries of the grants, contacts with schools are increased, and the funds are making a difference in the schools where they are used. After several additional years of using the current process, the Trustees will thoroughly evaluate its usefulness in fulfilling the desires of Mr. Wyman when he established the Association.

MARY BYRD WYMAN ASSOCIATION ASSOCIATION #52-0781416 SCHEDULE OF INVESTMENTS FORM 990 PF PART II FISCAL YEAR ENDING 5/21/2016

	COST	MARKET VALUE
CASH- NON-INTERST BEARING		
SAVINGS	<u>8829</u>	<u>8829</u>
TOTAL CASH /SAVING	8829	8829
EQUITIES		
PAGE 2 LINE 10b		
TOTAL COMMON STOCKS	629,118	1294239
TOTAL PREFERRED STOCKS	19,815	19155
TOTAL REAL ESTATE INVESTMENT TRUSTS	35,070	43120
TOTAL MUTAL FUNDS	408,341	<u>438408</u>
TOTAL EQUITIES	\$ 1,092,344	\$ 1,794,922
BONDS		
PAGE 2 LINE 10c		
FIDELITY CASH MANAGEMENT	27,777	27777
TOTAL U.S. GOV. & MUNICIPAL BONDS	98,179	106983
MORTGAGE BACKED BONDS	31,471	33470
TOTAL CORPORATE BONDS	115,225	107843
TOTAL BONDS	\$ 272,652	\$ 276,073
GRAND TOTAL CASH, EQUITIES AND BONDS	\$ 1,373,825	\$ 2,079,824