

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

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

Form **990-PF** 

Department of the Treasury Internal Revenue Service

▶ 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.lrs.gov/form990pf.

For calendar year 2016 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
VIRGINIA CRETELLA MARS FOU			13-3798973	
Number and street (or P O box number if mail is not delivered to street	·	Room/suite	B Telephone number	• •
C/O BBH & CO. 140 BROADWAY			212-493-85	
City or town, state or province, country, and ZIP or foreign p NEW YORK, NY 10005	ostal code		C If exemption application is p	ending, check here
G Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
Final return	Amended return		0 -	
Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test, emputation
H Check type of organization X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(1)	(A), check here
I Fair market value of all assets at end of year   J Accounti	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
	ther (specify)		under section 507(b)(1)	(B), check here
▶\$ 15,004,356. (Part I, colu	mn (d) must be on cash b	pasis)		
Part 1 Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X If the foundation is not required to attach Sch. B				
Interest on savings and temporary cash investments	168.	168.		STATEMENT 1
4 Dividends and interest from securities 5a Gross rents	289,164.	289,164.		STATEMENT 2
Net rental income or (loss)	104 546		la New York	
68 Net gain or (loss) from sale of assets not on line 10	494,546.		RECE	MED
b Gross sales price for all 1,827,574.		494,546.	B MOM a	
7 Capital gain net income (from Part IV, line 2)		494,540.	8 NOV 2 0	2017 0
8 Net short-term capital gain 9 Income modifications			OGDEN	
63 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 1,827,574.  7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss)			OGDE	UT
D Less Cost of goods sold				
c Gross profit or (loss)	-	· · · · · · · · · · · · · · · · · · ·		
11 Other income	17,247.	17,247.		STATEMENT 3
12 Total Add lines 1 through 11	801,125.	801,125.		
13 Compensation of officers directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				· · · · · · · · · · · · · · · · · · ·
9 16a Legal fees	10 645			10 645
b Accounting fees STMT 4 c Other professional fees STMT 5	19,645. 77,551.	77,551.		19,645.
G Other professional fees STMT 5	17,551.	17,331.		0.
b Accounting fees STMT 4 c Other professional fees STMT 5  17 Interest 18 Taxes STMT 6  19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	21,263.	6,263.		0.
19 Depreciation and depletion	22,203.	0,203	<del> </del>	<del>                                     </del>
E 20 Occupancy		<del></del>	<del>                                     </del>	
4 21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 7	42,436.	42,031.		405.
23 Other expenses STMT / Total operating and administrative expenses Add lines 13 through 23				
expenses Add lines 13 through 23	160,895.	125,845.	,	20,050.
25 Contributions, girts, grants paid	723,577.			723,577.
26 Total expenses and disbursements	004 470	105 045		F40 605
Add lines 24 and 25	884,472.	125,845.		743,627.
27 Subtract line 26 from line 12	<83,347.			
Excess of revenue over expenses and disbursements     Net Investment income (if accepting enter -0.)	203,347.	675,280	<del> </del>	<del> </del>
b Net Investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)		073,200	N/A	<del>                                     </del>
o Majastea not invento (i negativa, cina -o-)	. <del></del>	l		

Part II Balance Sheets Attached schedules and amounts in the description			Beginning of year	End of	End of year			
Pa	art	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
$\neg$	1	Cash - non-interest-bearing	10.					
	2	Savings and temporary cash investments	679,862.	970,400.	970,400.			
	3	Accounts receivable						
1		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			· · · · · · · · · · · · · · · · · · ·			
	U	1						
	-	disqualified persons						
	′	Other notes and toans receivable						
	_	Less allowance for doubtful accounts ▶	<del></del>		<del>, , , , , , , , , , , , , , , , , , , </del>			
Assets	8	Inventories for sale or use		····				
1ss	9	Prepaid expenses and deferred charges						
`		Investments - U.S. and state government obligations	C 000 700	C 404 073	0 566 015			
		Investments - corporate stock STMT 8	6,808,782.	6,494,072.	8,566,915.			
	C	Investments - corporate bonds STMT 9	2,345.	2,239.	2,434.			
	11	investments - land, buildings, and equipment basis						
		Less accumulated depreciation			·			
	12	Investments - mortgage loans	5 0 5 6 0 4 0	5 054 450	- 161 605			
	13	Investments - other STMT 10	5,076,812.	5,061,453.	5,464,607.			
	14	Land, buildings, and equipment basis						
		Less accumulated depreciation						
	15	Other assets (describe ►)						
	16	Total assets (to be completed by all filers - see the						
		instructions Also, see page 1, item !)	12,567,811.	12,528,164.	15,004,356.			
	17	Accounts payable and accrued expenses						
	18	Grants payable						
S	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
abi	21	Mortgages and other notes payable						
Ξ.	22	Other liabilities (describe >						
	23	Total liabilities (add lines 17 through 22)	0.	0.				
	Γ	Foundations that follow SFAS 117, check here						
	1	and complete lines 24 through 26 and lines 30 and 31.						
Ses	24	Unrestricted						
auc	25	Temporarily restricted						
Bal	26	· · · · · · · · · · · · · · · · · · ·						
ā		Foundations that do not follow SFAS 117, check here	~		,			
F		and complete lines 27 through 31						
ō	27	Capital stock, trust principal, or current funds	0.	0.				
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.				
Assets or Fund Balanc	29		12,567,811.	12,528,164.				
Net	30		12,567,811.	12,528,164.				
2	"		· · · · · · · · · · · · · · · · · · ·	<del>'</del>				
	31	Total liabilities and net assets/fund balances	12,567,811.	12,528,164.				
		Analysis of Changes in Net Assets or Fund B	<del></del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>			
1		al net assets or fund balances at beginning of year - Part II, column (a), line	30		40 565 044			
		ist agree with end-of-year figure reported on prior year's return)		1	12,567,811.			
2		er amount from Part I, line 27a		2	<83,347.>			
3		er increases not included in line 2 (itemize) ► BASIS ADJUS	TMENT	3	61,267.			
4		I lines 1, 2, and 3		4	12,545,731.			
5		creases not included in line 2 (itemize) PRIOR PERIOD A		5	17,567.			
6	Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	12,528,164.			
					Form <b>990-PF</b> (2016)			

Form **990-PF** (2016)

623521 11-23-16

Part IV   Capital Gains a	nd Losses for Tax on In	vestment	Income						
`(a) List and describ 2-story brick ware	be the kind(s) of property sold (e.g. shouse, or common stock, 200 shs	., real estate, s. MLC Co.)		( <b>b</b> )	low acquired - Purchase - Donation	) (c	) Date ac mo., day		(d) Date sold (mo., day, yr.)
1a									
b SEE ATTACHED	STATEMENT								
<u>c</u>			<u> </u>						<del></del>
d				-		+			
<u>e</u>	(f) Depreciation allowed	(a) Cos	t or other basis	Т		!	(h) Gar	n or (loss)	<del></del>
(e) Gross sales price	(or allowable)		xpense of sale			(		(f) minus (	
a							-		
b									
С							_		
d			4 222						104 546
e 1,827,574.			1,333,02	8.					494,546.
Complete only for assets showing	gain in column (h) and owned by					(I) G	ains (Co ) but no	l. (h) gain ot less thar	minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col (ı), ıf any					rom col. (I	
a				_			_		<del></del>
b	***************************************	ļ							
C									<del> </del>
d e									494,546.
	C. ( )	D 4111	<del></del>						474,340.
2 Capital gain net income or (net cap	ital loss) $ \begin{cases} & \text{if gain, also enter} \\ & \text{if (loss), enter -0} \end{cases} $	r in Part I, line - in Part I, line	7	<b>)</b>	2				494,546.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c if (loss), enter -0- in Part I, line 8		nd (6):		}	3			N/A	
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Inv		Inco	me	217 21	
(For optional use by domestic private t	<del></del>								······
If posting 40.40/d/(0) analysis leave the		• •			·				
If section 4940(d)(2) applies, leave thi	s part blank								
Was the foundation liable for the section			•	rıod?					Yes X No
If "Yes," the foundation does not qualif				ntrio	<del></del>				
(a)	ach column for each year; see the	iistructions de	iore making any e						(d)
Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha		ssets		Distrib	oùtion ratio rided by col. (c))
2015	9/	7,884.		15	,123,	515.	·	(6) (1)	.048129
2014		2,933.	<del>",</del>		,006,				.044843
2013		31,011.		13	,646,	362.			.042575
2012		8,622.			,864,				.042026
2011	5.3	6,913.		<u>11</u>	,071,	434.			.048495
2 Total of line 1, column (d)							2		.226068
3 Average distribution ratio for the 5		on line 2 by 5,	or by the number	r ot ye	ears				.045214
the foundation has been in existen	ce ir iess than 5 years						3		.045214
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X,	line 5					4	1	4,915,906
5 Multiply line 4 by line 3							5		674,408
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		6,753
7 Add lines 5 and 6	·						7		681,161
	Part VII. line 4								743,627
8 Enter qualifying distributions from		. 46	nlata that ===4 :		10/ tou == t-		8		143,041
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, line	e io, and comp	piete iliat part usii	ny a	176 tax rate				

Form 990-PF (2016) VIRGINIA CRETELLA MARS FOU	INDATION 13-37	98973	ļ	Page 4
Part VI Excise Tax Based on Investment Income (Section	n 4940(a), 4940(b), 4940(e), or 4948 - se	e instru		
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 lett				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	here X and enter 1%		6,7	53.
of Part I, line 27b				
c 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	s only Others enter -0-) 2			0.
3 Add lines 1 and 2	3		6,7	<del>53.</del>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation:	s only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter	-0- 5		6,7	53.
6 Credits/Payments:				
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a   15,918.			
b Exempt foreign organizations - tax withheld at source	6b			
c Tax paid with application for extension of time to file (Form 8868)	6c			
d Backup withholding erroneously withheld	6d			
7 Total credits and payments Add lines 6a through 6d	7	1	5,9	18.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 222	20 is attached 8			
9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over	erpald 10		9,1	65.
11 Enter the amount of line 10 to be Credited to 2017 estimated tax	9,165. Refunded ▶ 11		<u> </u>	0.
Part VII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national, state, or lo	ocal legislation or did it participate or intervene in	7.,	Yes	No
any political campaign?		1a	-	X
b Did it spend more than \$100 during the year (either directly or indirectly) for politic	al purposes (see instructions for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the aci		-		
distributed by the foundation in connection with the activities	, ,			
c Did the foundation file Form 1120-POL for this year?		10		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d	luring the year:		<b> </b>	<del>                                     </del>
(1) On the foundation $\blacktriangleright$ \$ 0. (2) On foundation in				
e Enter the reimbursement (if any) paid by the foundation during the year for politica	<u> </u>			
managers ▶ \$ 0.	,,,,,,,, .		1	
2 Has the foundation engaged in any activities that have not previously been reported	d to the IRS?	2		Х
If "Yes," attach a detailed description of the activities				$\vdash$
3 Has the foundation made any changes, not previously reported to the IRS, in its go	overning instrument, articles of incorporation, or			i
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the	•	3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more durin	•	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		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) sa	atisfied either.			
By language in the governing instrument, or				
<ul> <li>By state legislation that effectively amends the governing instrument so that no r</li> </ul>	mandatory directions that conflict with the state law			1
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 "Y	es," complete Part II, col. (c), and Part XV	7	X	
	, ,			
8a Enter the states to which the foundation reports or with which it is registered (see	instructions) >		ł	
DE		-	1	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-Pl	F to the Attorney General (or designate)	~	1	
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 mean			$\vdash$	$\top$
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If		9		x
10. Did any nersons become substantial contributors during the tay year? # "year" attack	sh a sekadula liation their comes and address.	10	1	Y

Form 990-PF (2016) VIRGINIA CRETELLA MARS FOUNDATION 13-3798973 Page 5

Pa	rt 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			77
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		1	32
	If "Yes," attach statement (see instructions)	12	37	<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A  The hooks are in care of ► BROWN BROTHERS HARRIMAN & CO. Telephone no ► (212)	493	_ o n	00
14	The books are in care of p		- 60	<del></del>
		003		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1NT	/A	ш
	and enter the amount of tax-exempt interest received or accrued during the year  15	1/	Yes	No
15	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	16	162	X
	securities, or other financial account in a foreign country?	<del>  10</del>		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Pa	foreign country ►  irt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	, 2,	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	İ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	}		
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after	İ		
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ļ '	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
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 2016?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		Ì
	defined in section 4942(j)(3) or 4942(j)(5)).			
ê	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			}
	before 2016? Yes X No			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	1	Ì	
Ţ	o Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1	}	1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	١	ļ	
	statement - see instructions )  N/A	2b		<del>-</del>
,	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1	ļ	
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?  Yes X No		1	
ł	of f "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
ľ	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 2016)  N/A	36	1	}
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del> </del>	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	$\vdash$
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	]	Х

Part VIII   Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 990-PF (2016) VIRGINIA CRETELLA MARS F			13-37989	73 Page 6
(1) Carry or propagation, or otherwise attempt to influence legislation (section 4945(s)?	Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	_
(2) Inflaence the outcome of any spendic public election (see section 4955), or to carry on, deneity or indirectly, any voter registation fever (see special provide a grant to an individual for trivell, study, or other similar purposes?  (3) Provide a grant to an origanization other than a cliantable, etc. origanization described in section  4945(c)(4)/(4) (see instruction registrous characters, conganization described in section  4945(c)(4)/(4) (see instruction registrous characters, conganization described in section  4945(c)(4)/(4)/(4) (see instruction registrous) characters (in the grant provided of the conganization of creating to distinct or early original sections (see instructions)?  Originazionis relying on a current notice regarding disaster assistance (see sinstructions)?  Originazionis relying on a current notice regarding disaster assistance sheek here  I the answer sins of sinst original section of the see sections of the section of the s	5a During the year did the foundation pay or incur any amount to:				
any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section  4945(6)(4)(A)* (see instructions)  (5) Provide for any purpose other than religious, charitable, scenatulic, literary, or educational purposes, or for the prevention of cruelly to children or animals?  If any answers "Yes" to \$11(1)(5), did say of the transactions fall to quality under the exceptions described in Regulations section 34,945 or in a current inotice regarding diseaster assistance (see instructions)?  Organizations religing on acurrent notice regarding diseaster assistance (see instructions)?  Organizations religing on acurrent notice regarding diseaster assistance (see instructions)?  If "Yes" calculate the statement required by Regulations section 53,4945-5(d)  8a bid the foundation, during the year, receive any funds, directly or indirectly, to any preniums on a personal behelic contact?  If "Yes" calculate the statement required by Regulations section 53,4945-5(d)  8b	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	s X No	
(3) Provide a grant to an individual tot tavel, study, or other similar purposes?	(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire			
(4) Provide a grant to an organization other than a chanlable, etc., organization described in section  495(d)(4)(A)? (see existructions)  (5) Provide for any purpose other than religious, chantable, scentific, literary, or educational purposes, or for the grevelation of cruelty to children or animals?  10 I may narwer "ves" to \$11(5), did asy of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  10 Departations relying on a current notice regarding disaster assistance (see instructions)?  10 Departations relying on acurrent notice regarding disaster assistance (see instructions)?  11 Provide any service of current notice regarding disaster assistance (see instructions)?  12 I all any any any any any any any any any any	any voter registration drive?				
4945(d)4(A)(A)(A)(as matructions)  (5) Provide for any purpose other than religious, chaniable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  I lary answer is "Yes" to Sa(1)(5), du' any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding desaster assistance (see instructions)?  Organizations relying on a current notice regarding desaster assistance (see instructions)?  Organizations relying on a current notice regarding desaster assistance check here if the analysis "See" to question 654() does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes", attach the statement required by Regulations section 53 4945-5(d)  But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a passonal benefit contract?  If "Yes" to 60, the Form 8870  Tax I any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  If I see the foundation receive any proceeds or have any relicione attributable to the transaction?  It is all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  International foundation managers and their compensation.  (b) Text, and average hours any proceeds or have any relicional process or have any relicional process. Trustees, Foundation Managers, Highly Paid Employees, and Contractors  Compensation of five highest-paid employees (other than those included on line 1), If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1), If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1), If none, enter "NONE."  (e) Expense (a) None and address of each employee pad more than \$50,000  (c) Compensation of five highest-paid employees (other than those included on line 1), If none, enter "NONE."  (e) Com	(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	s X No	
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If lary answer is "Yes" to Sql (1)-(3), did any of the transactions faul to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding desister assistance check here city of the contraction stelling on a current notice regarding desister assistance check here city of question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes", "attach the statement required by Regulations section 53 4945-5(d)  8a Dd the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" Sol, the Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  Part Viti Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  (a) Name and address  (a) Name and address  (b) Title, and average hours preview and proceeds or have any new morning and their compensation.  (b) Title, and average hours preview and the compensation of five highest-paid employees (other than those included on line 1). If none, enter "NoNE."  (c) Compensation (G) Compensation		n described in section		_	
b II any answer is "Yes" to \$(1)*-(5), die (1)*-(5), die (1)*-(6), die (				s X No	
b If any answer is "Yes" to Sa(1)-(3), did any of the transactions fall to quality under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here it is answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for this grant?  If "Yes," attach the statement required by Regulations section 53 4945-5(d)  6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," attach the statement required by Regulations section 53 4945-5(d)  6b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," one of the Form 887 to foundation a party to a prohibited tax sheller transaction?  If "Yes," one of the foundation of the bundation remains attributable to the transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Paid Employees, and Contractors  1. List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average house for week devoted (c) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (e) Compensation (d) Compensation (e) Compensat		or educational purposes, or t			
section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of it the answer is Yes' to cuestion 53(4), does the Idundation drain exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes are tracted the statement required by Regulations section 53 4945-5(d)  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes's to 6b, file Form 8270  b If Yes's to 6b, file Form 8270  b If Yes's, did the foundation receive any proceeds or have any net income attributable to the transaction?  b If Yes's, did the foundation receive any proceeds or have any net income attributable to the transaction?  1 List all officers, directors, trustees, foundation managers and their companiestion.  (a) Name and address  (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1). If none, enter *NONE.*  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter *NONE.*  (c) Compensation  (c) Compensation  (d) Compensation  (e) Expense account, other allowances are allowances allowances.  (e) Compensation  (f) Compensation  (h) Title, and average hours per week devoted to position  (f) Compensation  (g) Compensation  (h) Title, and average hours per week devoted to position  (g) Compensation  (h) Compensation	•		<del></del>	s X No	
Organizations relying on a current notice regarding disaster assistance check here  c It the answer is "Yes" to question 5x(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," stratch the statement required by Regulations section 53 4945-5(d)  But the foundation, during the year, receive any funds, directly or indirectly, no apparemians on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, no a personal benefit contract?  b H "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted for the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position of five highest-paid employees and contractors.  NONE  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Title, and average hours per week devoted to position of five highest-paid employees and count, other address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position.  (c) Compensation of five highest-paid employees and more than \$50,000 (c) Title, and average hours per week.  (c) Compensation of five highest-paid employees are allowed to position.		•	ın Regulations		
c It the answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, 'attach the statement required by Regulations section 53 4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes's' to 6b, file Form 8870  7a At any time during the tax year, was the foundation a perty to a prohibited tax sheller transaction?  Yes X No  b If Yes, 'did the foundation receive any proceeds on have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted in position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense altowances  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense account, other acceptances to compensation of five highest-paid employees paid more than \$50,000  (b) Title, and average hours per week devoted to position of five highest-paid employees paid more than \$50,000  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense account, other acceptances to the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of the paid of		•		N/A	5b
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, lile Form 8870  7a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 6b, lile Form 8870  7a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  (b) Title, and average the devoted to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Name and address of each employee paid more than \$50,000  (e) Expense account, other additional party of the week, devoted to position of the party of the week, devoted to position of the posi					
6a Did the foundation, during the year, received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b 'Yes' To 6b, the Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If 'Yes' to 6b, the Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1. List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation (If not paid, enter-0-)  camperagen  (d) Cambabases to del country, on the party of the party of the past of					
58 Dtd the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  # 'Yes' to 6b. ## Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  # I'Yes' to 6b. ## Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  ## I'Yes' to 6b. ## Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  ## Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors    List all officers, directors, trustees, foundation managers and their compensation of position   (a) Name and address   (b) Title, and average hours part week devoted for position   (b) Title, and average hours part week devoted for position   (c) Compensation   (d) Compensation   (d) Compensation   (d) Compensation   (d) Compensation   (e) Expense account, other allowances   (e) Forms   (e) For	•		N/A [] Y	s L No	1
a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  l' Yes 'C b, life Form 8870  7a At any time during the lax year, was the foundation a party to a prohibited tax sheller transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (a) Name and address  (b) Title and average hours personated the responsibility of the position  (b) Title and average hours personated the responsibility and average (c) Compensation (for a total discontinum and address)  SEE STATEMENT 11  0.0.0.0.0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average devoted to position  NONE  (b) Title, and average (c) Compensation (d) Compensa		• •			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 60, the Form 8870  7 At At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 60, the Form 8870  7 At At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours park week devioled to position  (b) Title, and average hours park week devioled enter -0.)  SEE STATEMENT 11  0.0.0.0.0.  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average though park average though par		pay premiums on	<del></del>	( <del>.</del>	
## Yes" to 6b, file Form #870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  **NA**  **NO**  **Part VIII**  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  **(a) Name and address**  **(b) Title, and average hours per week devoted to position  **(c) Compensation (d) controvers to employee states gains account, other actions to employee states gains account, other actions to employee and more than \$50,000  **(b) Title, and average hours per week devoted to position  **(c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  **(d) Compensation of	·		Ye	1	.     ,,
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?    N/A   70		ersonal Denetit Contract?		Ļ.	60 X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?    Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors   List all officers, directors, trustees, foundation managers and their compensation.   (b) Title, and average hours week devoted to position   (if not paid, enter -0-)   (if not paid, enter -0-		hallar transaction of	[	. ( <del>V</del> ),	
Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors   List all officers, directors, trustees, foundation managers and their compensation.   (b) Titls, and average hours per week devoted to position   (fl not paid, enter -0-)   (fl not paid, enter			Y6		75
Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (b) Title, and average hours per week devoted to position  (c) Expense additions and address  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation  (fl not paid, enter -0-)  (a) Name and address of each employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Compensation  (d) Compensation  (e) Expense account, other enter address of each employee paid more than \$50,000  NONE  (e) Expense account, other enter address of each employee paid more than \$50,000 to position  (e) Compensation  (f) Title, and average hours per week devoted to position			nogoro Highli		/0
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (c) (in to paid, enter -0-) (c) to position (c) (in to paid, enter -0-) (c) to position (c) (in to paid, enter -0-) (c) to position (c) (in to paid, enter -0-) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c		ees, roundation ma	magers, mgm	,	
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (c) (in to paid, enter -0-) (c) to position (c) (in to paid, enter -0-) (c) to position (c) (in to paid, enter -0-) (c) to position (c) (in to paid, enter -0-) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	1 List all officers, directors, trustees, foundation managers and their	compensation.			
SEE STATEMENT 11  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position NONE  (c) Compensation employees account, other allowances				(d) Contributions to	(e) Expense
SEE STATEMENT 11  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Commensation employee secretical plans account, other allowances  (e) Expensa account, other allowances	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred	account, other allowances
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combusions to employee paid more than \$50,000 account, other allowances  (e) Expense account, other allowances		<u> </u>	,	compensation	
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combusions to employee paid more than \$50,000 account, other allowances  (e) Expense account, other allowances					
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and wards for employee bands paid employee bands paid employee bands paid debrid and debrid devoted to position  NONE  (c) Compensation  (d) Compensation employee bands plans account, other allowances	SEE STATEMENT 11		0.	0.	0.
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances	Victoria de la compansión de la compansi		:		
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee paid more than \$50,000  (e) Expense account, other allowances					
(a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation employee bearing plans and deterred compensation account, other allowances	2 Compensation of five highest-paid employees (other than those inc		, enter "NONE."	(d) Contributions to	(-) Evpansa
NONE Compensation allowances	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	t employee benelit plans	account, other
	NONE	devoted to position		compensation	allowances
Total number of other employees paid over \$50,000	NONE				
Total number of other employees paid over \$50,000					
Total number of other employees paid over \$50,000		1			
Total number of other employees paid over \$50,000			<del> </del>		
Total number of other employees paid over \$50,000		{			
Total number of other employees paid over \$50,000			+		
Total number of other employees paid over \$50,000		{			
Total number of other employees paid over \$50,000			1	<u> </u>	
Total number of other employees paid over \$50,000		1			
	Total number of other employees paid over \$50,000	<del> </del>	<del></del>	<b></b>	0

Form 990-PF (2016) VIRGINIA CRETELLA MARS FOUNDATION	13~3	798973 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<b>&gt;</b> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, $\frac{1}{1}$ N/A	etc	
11/12		
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 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions		· , .
3		
Total. Add lines 1 through 3	<u> </u>	0 . Form <b>990-PF</b> (2016)

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 13,788,970. a Average monthly fair market value of securities 1a 1,354,082. 1b b Average of monthly cash balances 1c c Fair market value of all other assets 15,143,052. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 15,143,052. Subtract line 2 from line 1d 3 227,146. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 14,915,906. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 745,795. Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here > and do not complete this part ) 745,795. Minimum investment return from Part X, line 6 6,753. 2a Tax on investment income for 2016 from Part VI, line 5 2a Income tax for 2016 (This does not include the tax from Part VI.) 2b 6.753. 2c Add lines 2a and 2b 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 6 Ō. Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. <u>739</u> 042. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 743,627. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) За b Cash distribution test (attach the required schedule) 3b 743,627. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 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 5 в Adjusted qualifying distributions Subtract line 5 from line 4 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 (2016)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				739,042.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			723,577.	
b Total for prior years				
		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011		ì		
b From 2012				
c From 2013				
dFrom 2014				
e From 2015	_	1		
f Total of lines 3a through e	0	•		
4 Qualifying distributions for 2016 from				
Part XII, line 4 ► \$ 743,627.		1		
a Applied to 2015, but not more than line 2a			723,577.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0	•		
d Applied to 2016 distributable amount				20,050.
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0	•		0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				· · · · · · · · · · · · · · · · · · ·
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				718,992.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	C	).		
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	C	).		
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a		).		
10 Analysis of line 9.				
a Excess from 2012			j	
b Excess from 2013				
c Excess from 2014				
d Excess from 2015		1		
e Excess from 2016				Form <b>990-PF</b> (2016)

	A CRETELLA			13-37	98973 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo		-	<b>▶</b>		
b Check box to indicate whether the found	lation is a private operatir	ng foundation described i	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a			,		
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					<del></del>
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			-		
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter.					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative 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					
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				<u> </u>	··
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	ore in assets
at any time during				•	
1 Information Regarding Foundation	on Managers:		<del></del> -	<del></del>	
a List any managers of the foundation wh		than 2% of the total cont	ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed r			•		
NONE					
b List any managers of the foundation wh	no own 10% or more of the	ne stock of a corporation	or an equally large portion	on of the ownership of a pa	ortnership or
other entity) of which the foundation ha			(or an expan) large perm	o o	p oi
NONE					
2 Information Regarding Contribut	non Grant Gift Loan	Scholarshin etc. Pr	ourame.	·	
				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	<del></del>	<del></del>			
		ролоон во нивин арр.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SEE STATEMENT 12					
b The form in which applications should	pe submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines					
d An anatomic of the later of t	lo quah aa hu aaaasah	inlarence charitable fields	lunds of institutions	other factors:	
d Any restrictions or limitations on award	is, such as by geographic	ai ai eas, chai hadie heids,	, KIIIUS OI IIISIIIUUUUIIS, OF (	טנווטו ומטוטוס.	

623601 11-23-16

Form **990-PF** (2016)

13-3798973 VIRGINIA CRETELLA MARS FOUNDATION Page 11 Form 990-PF (2016) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year NONE PUBLIC CHARITY GENERAL SUPPORT ANSONIA MUSIC OUTREACH 330 WADSWORTH AVENUE, 2G 501(C)(3) NEW YORK, NY 10040 20,000. CAPITAL PARTNERS FOR EDUCATION NONE PUBLIC CHARITY GENERAL SUPPORT 1413 K STREET, NW THIRD FLOOR 501(C)(3) WASHINGTON, DC 20005 40,000. EVERYBODY MATTERS NONE PUBLIC CHARITY GENERAL SUPPORT 11444 N 28TH DRIVE #4 501(C)(3) PHOENIX, AZ 85029 15,000. BIG APPLE CIRCUS NONE PUBLIC CHARITY GENERAL SUPPORT 1 METROTECH CENTER, 3RD FLOOR 501(C)(3) BROOKLYN, NY 11201-3949 30,000. FREE LIBRARY OF PHILADELPHIA NONE PUBLIC CHARITY GENERAL SUPPORT 1901 VINE ST. STE. 111 501(C)(3) PHILADELPHIA, PA 19103 10,000. CONTINUATION SHEET(S) 723,577. SEE **▶** 3a Total b Approved for future payment

CHILDREN'S ART GUILD 550 J GRAND STREET, SUITE 11F NEW YORK, NY 10002	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	120,000.
FRINGE ARTS 140 N. COLUMBUS BLVD. (AT RACE ST.) PHILADELPHIA, PA 19106	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	15,000.
JENKINS ARBORETUM & GARDENS 631 BERWYN BAPTIST RD. DEVON, PA 19333	NONE	- 501(C)(3)	GENERAL SUPPORT	25,000.
Total SEE CC	NTINUATION	SHEET (S)	<b>▶</b> 3b	500,000.

Part XVI-A	Analysis of Income-Producing	<b>Activities</b>
I WILLY I TO	Analysis of moonie i readening	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

nter gross amounts unless otherwise indicated.	Unrelate	l business income		y section 512, 513, or 514	(e)	
•		(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue	code		code	711100111		
a	_					
b			_			
C						
d						
е						
f		<del> </del>				
g Fees and contracts from government agencies						
! Membership dues and assessments						
Interest on savings and temporary cash		-				
investments			14	168.		
Dividends and interest from securities			14	289,164.		
Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal						
property						
7 Other investment income			14	17,247.		
B Gain or (loss) from sales of assets other						
than inventory			18	494,546.		
9 Net income or (loss) from special events						
Cross profit or (loss) from sales of inventory						
1 Other revenue	-	,	<del></del>			
a						
		<del></del>		-		
C	<del>  </del>					
· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del>  </del>		· · · · · · · · · · · · · · · · · · ·	
e	<del>-</del> -		-			
2 Subtotal Add columns (b), (d), and (e)			<del>)                                      </del>	801,125.	, <del></del>	
3 Total Add line 12, columns (b), (d), and (e)	<u> </u>		<u>                                   </u>	13	801,12	
	٥.\			10		
See worksheet in line 13 instructions to verify calculation		<del></del>				
Part XVI-B Relationship of Activitie	es to the Acco	emplishment of	Exempt P	urposes		
Line No Explain below how each activity for which	income is reported i	n column (e) of Part XV	/I-A contributed	importantly to the accom	plishment of	
▼ the foundation's exempt purposes (other				•		
		***************************************			······································	

Form 990					FOUNDATIO		13-379			ge 13
Part 2			ransfers	To and	Transactions a	nd Relations	ships With Nonch	aritable	3	
<del></del>	Exempt Organ					· · · · · · · · · · · · · · · · · · ·				
1 Did	the organization directly or indi	irectly engage in	any of the fo	llowing with	h any other organizatio	in described in sec	tion 501(c) of	, t	Yes	No
the	Code (other than section 501(c	;)(3) organizatio	ns) or in secti	on 527, rel	ating to political organ	ızatıons?				
<b>a</b> Tra	nsfers from the reporting found	lation to a nonch	naritable exem	npt organiza	ation of.					
(1)	Cash							1a(1)		X
(2)	Other assets							1a(2)		X
<b>b</b> Oth	er transactions									
(1)	Sales of assets to a noncharita	able exempt org	anization					16(1)	1 1	Х
(2)	Purchases of assets from a no	oncharitable exe	mpt organizat	ion				1b(2)		X
(3)	Rental of facilities, equipment,	, or other assets						1b(3)		X
(4)	Reimbursement arrangements	S						1b(4)		X
	Loans or loan guarantees							1b(5)		X
(6)	Performance of services or me	embership or fu	ndraising soli	citations				1b(6)		X
	ring of facilities, equipment, ma				es			10		X
	e answer to any of the above is	-				ways show the fair	market value of the goods	other ass	sets,	
	ervices given by the reporting t	•		•		•	7		•	
	ımn (d) the value of the goods,					•				
(a)Line n	(b) Amount involved	(c) Na	me of noncha	rıtable exer	npt organization	(d) Description	on of transfers, transactions, ar	nd sharing ar	rangeme	ents
		<del>- </del>	N.	/A			<del></del>			
	<del></del>	<del></del>			· · · · · · · · · · · · · · · · · · ·		<del></del>			
	<u> </u>					<u> </u>	<del> </del>			
		<del> </del>				<del></del>	<del></del>			
	<u> </u>	<del></del>								
*		<del> </del>		<del></del>						
~				· · · · · ·		-				—
		+						_		
		+								
•		<del> </del>				1				
	<del></del>	<del> </del>			<del></del>		***************************************			
		<del> </del>				+				
	<del></del>					<del></del>				
	<del></del>	+	<del></del>				<del></del>			
		<del></del>				<del></del>	· <del>···</del>			
	<del> </del>	<del> </del>				<del></del>				
20 101	he foundation directly or indirec	athy affiliated with	b or related t	0.000.00	acce toy ayamat areas	rations described				
	section 501(c) of the Code (other	•	•	•	, ,	izations described		Yes	Γ¥	T No
			301(0)(3)) 01	iii seciion a	121 *			163	L <u>#3</u>	טוו נ
<u> </u>	Yes," complete the following sci (a) Name of or			(h)	Type of organization	T	(c) Description of relatio	nship		
	N/A	gamzanon			rype or organization		(0) Doson priori or rolatio			
	N/A									
	<del></del>									
	<del></del>					ļ				
			<del></del>	<del></del> -		ļ. <del>.</del>	<del></del>			
	Under penalties of perjury, I declare	e that I have evam	ned this return	including acc	romnanving schedules and	statements and to the	ne hest of my knowledge -	<del></del>		
Sign	and belief, it is the correct and co						rer has any knowledge	May the IRS return with ti	discuss	this rer
Here			X 1	<del>-/&gt;</del>	ulalin			shown belov	v (see ins	str )?
	Signature of officer or truste		192M	<del>~</del>	Date	Title	<del></del>	X Ye	š	_] No
	Print/Type preparer's r	11	Drana	rer's signat		Date	Check   if PTI	N		
	I min type higherer 2 t	101116	Frepa	ioi a aiyilal	ui o	Jaio	self- employed	1.4		
Paid	שראזע נווואייי	C		1-	/	1,1/1	1 1	00300	2615	,
Prep	arer Firm's name ► BRO		<u>ੂੰ</u> ਜਾਮੂ ਦੇ ਦੇ ਟ	HARRI	MAN & CO	11/10/1	Firm's EIN > 13-	00308		
Use		OMM DEC	THEIRD	TUUUT	TENTA OF CO	' '	LIIIII 2 CIIA > T 2 -	<b>4</b> )   3	-7	
							1			

Phone no 212-493-8000 Form **990-PF** (2016)

Firm's address > 140 BROADWAY, 4TH FL NEW YORK, NY 10005

CONTINUATION FOR 990-PF, PART IV 13-3798973 PAGE 1 OF 1 VIRGINIA CRETELLA MARS FOUNDATION Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo, day, yr) (mo, day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation 1a SEE STATEMENT ATTACHED P VARIOUS VARIOUS P VARIOUS b EXCESS DISTRIBUTION BBH PEP III VARIOUS c BBH - ALTAROCK PARTNERS P VARIOUS VARIOUS BARES MID-LARGE CAP P VARIOUS VARIOUS d BBH P VARIOUS VARIOUS BURGUNDY EMERGING MARKET e BBH  $\overline{P}$ BBH CLARKSTON CAPITAL PARTNERS VARIOUS VARIOUS REMS GROUP P VARIOUS VARIOUS BBH P h BBH SELECT EQUITIES SERIES VARIOUS VARIOUS P ALTAROCK PARTNERS VARIOUS VARIOUS BBH P BARES MID-LARGE CAP VARIOUS VARIOUS BBH BURGUNDY EMERGING MARKET  $\overline{P}$ VARIOUS BBH VARIOUS ı BBH CLARKSTON CAPITAL PARTNERS p VARIOUS VARIOUS P VARIOUS VARIOUS m BBH REMS GROUP n BBH SELECT EQUITIES SERIES  $\overline{P}$ O CAPITAL GAINS DIVIDENDS (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 1,721,972 1,276,511 445,461. 22,335. 22,335. h 12,996. <12,996.> С 9,068. <9,068.> d 361. <361.> 682. 682. 6,344. 6,344. g 7,094. <7,094.>h 2,761. 2,761. <26,392.> 26,392. 606. <606.> 1,953. 1,953. 1 8,294. 8,294. m 21,291. 21,291. n 41,942. 41,942. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (k) Excess of col. (i) (j) Adjusted basis (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 445,461. 22,335. b <12,996.> С <9,068.>d <361.> 682. 6,344. g <7,094·> h 2,761. < 26.392. ><del><606.</del>> 1,953. 8,294. 21,291. n 41,942. 0

{ If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }

2

494,546.

N/A

623591 04-01-16

2 Capital gain net income or (net capital loss)

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

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

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

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		r	<del>,</del>	<del> </del>
• Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CHILDREN'S ART GUILD 550 J GRAND STREET, SUITE 11F NEW YORK, NY 10002	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	40,000.
YOUTH SERVICE LEAGUE, INC. 181A 29TH STREET BROOKLYN, NY 11232	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	25,000.
FRINGE ARTS 140 N. COLUMBUS BLVD. (AT RACE ST.) PHILADELPHIA, PA 19106	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	15,000.
URBAN DOVE 2600 NORTH HOWARD ST., SUITE 1300 BALTIMORE, MD 21218	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	15,000.
INSTITUTE FOR LOCAL SELF-RELIANCE 2720 EAST 22ND STREET MINNEAPOLIS, MN 55406	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	30,000.
JENKINS ARBORETUM & GARDENS 631 BERWYN BAPTIST RD. DEVON, PA 19333	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	25,000.
LAKE SUNAPEE PROTECTIVE ASSOCIATION 63 MAIN STREET, PO BOX 683 SUNAPEE, NH 03782	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000.
LONDOWNTOWNE SYMPHONY ORCHESTRA P.O. BOX 926 EDGEWATER, MD 21037	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000.
NATIONAL AQUARIUM 111 MARKET PLACE, SUITE 800 BALTIMORE, MD 21202	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000.
SOCIETY FOR THE PROTECTION OF NH FORESTS 54 PORTSMOUTH STREET CONCORD, NH 03301	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000.
Total from continuation sheets			<del></del>	608,577.

VIRGINIA CRETELLA MARS FOUNDATION

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	<del></del>	<del>,</del>	<del></del>	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
igaine and address (nome of business)	or substantial contributor	recipient		<u> </u>
NATURAL LANDS TRUST	NONE		GENERAL SUPPORT	
HILDACY FARM, 1031 PALMERS MILL ROAD		- 501(C)(3)		50.000
MEDIA, PA 19063	<del> </del>	<u> </u>		50,000.
N				
NEIGHBORHOOD GARDENS TRUST 100 N. 20TH STREET, 5TH FLOOR	NONE	- 501(C)(3)	GENERAL SUPPORT	
PHILADELPHIA, PA 19103		301(0)(3)		25,000.
PENNSYLVANIA BALLET	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
1819 JFK BOULEVARD, SUITE 201		- 501(C)(3)		
PHILADELPHIA, PA 19103	<u> </u>			20,000.
ROSEMOUNT CENTER	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
2000 ROSEMOUNT AVE, NW		- 501(C)(3)		
WASHINGTON, DC 20010	<del> </del>	-		10,000.
SMITH MEMORIAL PLAYGROUND AND	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
PLAYHOUSE		- 501(C)(3)		
3500 RESERVOIR DR.		1	;	
PHILADELPHIA, PA 19121				25,000.
SPARK PHILADELPHIA 1501 CHERRY ST.	NONE	- 501(C)(3)	GENERAL SUPPORT	
PHILADELPHIA, PA 19102		- 301(C)(3)		25,000.
			<del></del>	25,00
ST. JAMES SCHOOL	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
3217 WEST CLEARFIELD STREET		- 501(C)(3)		
PHILADELPHIA, PA 19132				50,000.
THE AUSBON SARGENT LAND PRESERVATION	NONE		GENERAL SUPPORT	
PO BOX 2040, 71 PLEASANT ST.		- 501(C)(3)		
NEW LONDON, NH 03257-2040				50,000.
THE FRIENDS OF GREEN CHIMNEYS	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	
400 DOANSBURG ROAD, BOX 719 BREWSTER, NY 10509-0719		302(0)(3)		20,000
THE LITERACY LAB	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
1003 K ST. NW, 5TH FLOOR		- 501(C)(3)		
WASHINGTON, DC 20001		<u> </u>		30,000
Total from continuation sheets				

VIRGINIA CRETELLA MARS FOUNDATION 13-3798973

3 Grants and Contributions Paid During the Y	ear (Continuation)			
• Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
THE READING TEAM 2090 ADAM CLAYTON POWELL, JR. BLVD., SUITE 100 NEW YORK, NY 10027	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	40,000
THEATRE BREAKING THROUGH BARRIERS 400 W. 43RD ST., #43R NEW YORK, NY 10036	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	25,00
TOURNIQUET PO BOX 333, WHITESTONE STATION FLUSHING, NY 11357	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	3,57
TWW, INC. 317 CLERMONT AVENUE, #2M BROOKLYN, NY 11205	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,00
			,	
Total from continuation sheets				

Part XV Supplementary Information  3 Grants and Contributions Approved for Fut		<del></del>		T
Recipient	If recipient is an individual,	1	<u> </u>	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Of Substantial Contributor	Toolpiont		
LAKE SUNAPEE PROTECTIVE ASSOCIATION	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
63 MAIN STREET, PO BOX 683		- 501(C)(3)		
SUNAPEE 03782				40,000.
NATURAL LANDS TRUST	NONE	DIIBI.IC CHARITY	GENERAL SUPPORT	
HILDACY FARM, 1031 PALMERS MILL ROAD	None -	- 501(C)(3)		
MEDIA 19063				50,000.
ROSEMOUNT CENTER	NONE	1	GENERAL SUPPORT	
2000 ROSEMOUNT AVE, NW WASHINGTON 20010		- 501(C)(3)		20,000
THE AUSBON SARGENT LAND PRESERVATION	NONE	PUBLIC CHARITY	GENERAL SUPPORT	Ì
PO BOX 2040, 71 PLEASANT ST.		- 501(C)(3)		
NEW LONDON 03257-2040				50,000.
THE FRIENDS OF GREEN CHIMNEYS	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
400 DOANSBURG ROAD, BOX 719		- 501(C)(3)		
BREWSTER 10509-0719				60,000
THE READING TEAM	NONE	DIIBLIC CHARITY	GENERAL SUPPORT	
2090 ADAM CLAYTON POWELL, JR. BLVD.,	NONE	- 501(C)(3)	DENDINE DOLLOW	
SUITE 100 NEW YORK 10027				40,000
TWW, INC.	NONE	PUBLIC CHARITY - 501(C)(3)	GENERAL SUPPORT	
317 CLERMONT AVENUE, #2M BROOKLYN 11205		- 301(0)(3)		30,000
YOUTH SERVICE LEAGUE, INC.	NONE	i i	GENERAL SUPPORT	
181A 29TH STREET BROOKLYN 11232		- 501(C)(3)		50,000
Total from continuation sheets				340,000
. 710. 11 71. 70.11.10.10.10.10			<del> </del>	

FORM 990-PF INTERES	T ON SAVINO	GS AND	TEMPOR	ARY C	ASH I	NVESTMENTS	SI	PATEMENT	1
SOURCE					(B) NVESTMENT NCOME		(C) ADJUSTED NET INCOME		
BROWN BROTHERS HARRIMAN & CO			1	58.		168.			
			1	68.		168.			
FORM 990-PF	DIVIDENDS	AND I	NTEREST	FRON	I SECU	RITIES	Sī	PATEMENT	2
SOURCE	GROSS AMOUNT	GA	ITAL INS DENDS	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTI NET INC	
BBH - ALTAROCK PARTNERS BBH - BARES	10,727.		0.	-	LO,727	. 10,72	27.		
MID-LARGE CAP	7,957.		0.		7,957	7,95	57.		
BBH - BURGUNDY EMERGING MARKET BBH - CLARKSTON CAPITAL PARTNERS	15,311.		0.	:	15,311	15,31	11.		
SMALL-MID CAP BBH - LBC CREDIT	5,831.		0.		5,831	5,83	31.		
PARTNERS III BBH - REMS GROUP	52,455. 6,448.		0. 0.	!	52,455 6,448				
BBH - SELECT EQUITY	14,940.		0.	:	14,940	14,94	10.		
BROWN BROTHERS HARRIMAN CO	217,437.	4	1,942.	1	75,495	175,49	95.		
TO PART I, LINE 4	331,106.	4	1,942.	21	39,164	289,16	54.		
FORM 990-PF		ОТН	ER INCO	ME	<u></u>	····	S	PATEMENT	3
DESCRIPTION				(A) VENU BOO		(B) NET INVEST MENT INCOM		(C) ADJUSTE NET INCO	
PASS-THROUGH ENTITY			-	17	,247.	17,24	 7.		
TOTAL TO FORM 990-P.	F, PART I,	LINE 1	1	17	,247.	17,24	<del></del> -		

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE		
ACCOUNTING FEES	19,645.	0.		19,64	15.	
TO FORM 990-PF, PG 1, LN 16B	19,645.	0.		19,64	5.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT .	 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE		
INVESTMENT ADVISORY FEES AGENT FEE	77,551. 0.				0.	
TO FORM 990-PF, PG 1, LN 16C	77,551.	77,551.			0.	
FORM 990-PF	TAX	ES	S'	TATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE		
FOREIGN TAXES PAID FEDERAL TAX	6,263. 15,000.				0.	
TO FORM 990-PF, PG 1, LN 18	21,263.	6,263.			0.	
FORM 990-PF	OTHER E	EXPENSES	S	TATEMENT	7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
CT CORPORATION SYSTEM INVESTMENT EXPENSE STATE FILING FEE	380. 64. 25.	64.			80. 0. 25.	
PASSTHROUGH PORTFOLIO DEDUCTIONS	41,967.	41,967.			0.	
	•	42,031.	<del></del>		05.	

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
			FAIR MARKET
DESCRIPTION		BOOK VALUE	VALUE
MICROSOFT CORP		97,058.	239,550.
UNITED PARCEL SERVICE CL. B		40,520.	83,114.
WAL-MART STORES, INC		65,990.	103,265.
OCCIDENTAL PETROLEUM		0.	0.
WASTE MANAGEMENT INC.		23,871.	61,408.
BERKSHIRE HATHAWAY INC		257,622.	664,143.
NOVARTIS AG-ADR		132,191.	169,353.
COMCAST CORP		54,043.	224,343.
CHUBB CORP		0.	0.
DENTSPLY INTL INC		13,782.	31,982.
DIAGEO PLC- SPONSOORED ADR		124,045.	205,282.
EBAY INC		0.	0.
LIBERTY INTERACTIVE CORP.		78,449.	149,610.
NESTLE S A SPONS ADR		66,960.	111,197.
PROGRESSIVE CORP OHIO		34,465.	88,395.
EOG RESOURCES INC		0.	0.
U S BANCORP		150,494.	347,261.
BAXALTA INC.		0.	0.
SOUTHWSTN ENERGY CO		0.	0.
WELLS FARGO & CO		239,417.	425,725.
HENRY SCHEIN INC		26,095.	53,099.
BBH LIMITED DURATION FUND CL N		2,957,296.	2,909,018.
BED BATH & BEYOND INC		212,631.	150,327.
ALPHABET INC CL C		325,016.	594,301.
QUALCOMM INC		232,910.	254,476.
CELANESE CORP SERIES A		122,125.	222,677.
PRAXAIR INC		156,375.	172,855.
SCHLUMBERGER LTD		0.	0.
UNILEVER N V-NY SHARES		64,990.	69,802.
ZOETIS INC		226,981.	401,528.
ORACLE CORP		316,557.	307,600.
PAYPAL HOLDINGS		60,033.	132,225.
DISCOVERY COMMUNICATIONS		128,329.	129,883.
LIBERTY GLOBAL PLC		90,248.	86,130.
PERRIGO CO PLC		113,418.	89,555.
NIELSEN HOLDING		35,516.	34,609.
FLEETCOR TECHNOLOGIES INC		46,645.	54,202.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	6,494,072.	8,566,915.

FORM 990-PF	CORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
GNMA POOL #518506	•	2,239.	2,434.
TOTAL TO FORM 990-PF, PART II, L	INE 10C	2,239.	2,434.
FORM 990-PF O	THER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BBH INTERNATIONAL EQUITY FD. CLN LONGLEAF PARTNERS SMALL CAP FD BBH - LBC CREDIT PARTNERS III	FMV FMV	216,256. 200,000. 377,628.	396,586. 242,630. 383,005.
AIT GLOBAL EMERGING MARKETS OPPORTUNITY FUND BBH - REMS GROUP BBH - ALTAROCK BBH - BARES	FMV FMV FMV	0. 325,090. 621,176. 960,720.	0. 334,808. 687,015. 1,004,774.
BBH - CLARKSTON BBH - SELECT EQUITY BBH - BURGUNDY	FMV FMV FMV	386,312. 1,292,524. 681,747.	430,636. 1,325,425. 659,728.
TOTAL TO FORM 990-PF, PART II, L	JINE 13	5,061,453.	5,464,607.

1 - 1 - 1 - 1 +

FORM 990-PF P.		LIST OF OFFICERS, DIS		STATI	EMENT 11
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
VALERIE A. MARS C/O BBH & CO, 140 B (PB-TAX) NEW YORK, NY 10005	ROADWAY	DIRECTOR 1.00	0.	0.	0.
PAMELA D. MARS-WRIG C/O BBH & CO, 140 B (PB-TAX) NEW YORK, NY 10005		VICE PRESIDENT	0.	0.	0.
MARIJKE E. MARS C/O BBH & CO, 140 B (PB-TAX) NEW YORK, NY 10005	BROADWAY	DIRECTOR	0.	0.	0.
VICTORIA B. MARS C/O BBH & CO, 140 E (PB-TAX) NEW YORK, NY 10005	BROADWAY	TREASURER	0.	0.	0.
STEPHANIE J. SCHUET C/O BBH & CO, 140 E (PB-TAX) NEW YORK, NY 10005		PRESIDENT	0.	0.	0.
BERNADETTE RUSSELL C/O BBH & CO, 140 E (PB-TAX) NEW YORK, NY 10005	BROADWAY	VICE PRESIDENT	0.	0.	0.
KIMBERLY V. SPINA C/O BBH & CO, 140 H (PB-TAX) NEW YORK, NY 10005	BROADWAY	SECRETARY	0.	0.	0.
CHRISTOPHER M. WHITCOMER CO. 140 IN (WM-TAX) NEW YORK, NY 10005		DIRECTOR	0.	0.	0.
JUSTIN F. WHITE C/O BBH & CO, 140 (PB-TAX) NEW YORK, NY 10005	BROADWAY	DIRECTOR 1.00	0.	. 0.	0.
TOTALS INCLUDED ON	990-PF, F	PAGE 6, PART VIII	0	. 0	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

KENNETH MOY, C/O BBH & CO. (VC MARS FOUNDATION) 140 BROADWAY (PB-TAX) NEW YORK, NY 10005

### FORM AND CONTENT OF APPLICATIONS

WRITTEN SUMMARY IN LETTER FORM WITH BRIEF DESCRIPTION OF ORGANIZATION, FUNDING REQUIREMENTS AND DETAILS OF GRANT PURPOSES. MUST INCLUDE COPY OF 501(C)(3) STATUS LETTER FROM INTERNAL REVENUE SERVICE.

#### ANY SUBMISSION DEADLINES

REQUESTS MUST BE RECEIVED BY OCTOBER 31.

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

INTEREST IN SUPPORTING PHILADELPHIA, BALTIMORE, WASHINGTON D.C. AND NEW HAMPSHIRE AREA ORGANIZATIONS. ONLY U.S. CHARITIES WITH 501(C)(3) APPROVED STATUS FROM INTERNAL REVENUE SERVICE.