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# Form **990-PF**

## **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

2016

OMB No 1545-0052

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.irs.gov/form990pf.

Open to Public Inspection

Form **990-PF** (2016)

	endar year 2016 or tax year beginning	, 2016	, and ending			
Name of f				Α	Employer identification nun	nber
	hers Patriot Foundation Inc nd street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	В	26-1097880 Telephone number (see instru	ictions)
3412	N. Buchanan Street	,			(703) 533-188	
City or tov	vn, state or province country, and ZIP or foreign postal code			С	If exemption application is p	nonding check here
	ngton		22207	- }	ii exemplion application is p	Defining, check here.
G Che	eck all that apply Initial return	Initial return of a formed	er public charity	D 1	Foreign organizations, chec	ck here
	Address change	Name change		2	Foreign organizations meet	ing the 85% test, check
H Che		(c)(3) exempt private for	undation	┤	here and altach computation	
<u>"""""""""""""""""""""""""""""""""""""</u>	Section 4947(a)(1) nonexempt charitable trus		rivate foundation	E	If private foundation status	was terminated
I Fair	<del></del>	ounting method X C		1	under section 507(b)(1)(A),	
(fror	m Part II, column (c), line 16)	Other (specify)		F	If the foundation is in a 60-i	month termination
<b>►</b> \$	303,372:   (i =it i)	column (d) must be on c	ash basis )	<u>1</u>	under section 507(b)(1)(B),	check here ▶ □
Part		(a) Revenue and	(b) Net investmen	n	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	`	income	for charitable purposes
	sarily equal the amounts in column (a)					(cash basis only)
	(see instructions) )  1 Contributions gifts, grants, etc received (attach schedule)	0.				
	2 Check ► X if the foundation is not required to attach Sch B	· · · · · · · · · · · · · · · · · · ·				
		1 105				
	Interest on savings and temporary cash investments      Dividends and interest from securities	1,126. 4,229.	1,12 4,22	26.		
	5a Gross rents	4,229.	4,22	29.		·
	b Net rental income or (loss)					<u> </u>
R	6 a Net gain or (loss) from safe of assets not on line 10				,	
E V	b Gross sales price for all assets on line 6a					
È	7 Capital gain net income (from Part IV, line 2)					
N U	8 Net short-term capital gain		* *			
Ĕ		Sign of the second seco	- 1			*
	returns and allowances					ı
	<b>b</b> Less Cost of goods sold			5 1		· «
	C Gross profil or (loss) (altach schedule)		11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	11 Other income (attach schedule)					7. *\$ <sup>*</sup>
	12 Total Add lines 1 through 11	5,355.	E 2E			, <u>, , , , , , , , , , , , , , , , , , </u>
	13 Compensation of officers, directors, trustees etc.	3,333.	5,35	33.		
	14 Other employee salaries and wages					
	15 Pension plans, employee benefits	<del>*************************************</del>				
A	16 a Legal fees (attach schedule)					
D <b>M</b>	<b>b</b> Accounting fees (attach sch)L-16b Stmt.	986.		86.		
O N	c Other professional fees (attach sch) L-16C Stmt.	10.	1	10.		
O I P S E T	17 Interest ; 18 Taxes (attach schedule)(see instrs) See Line. 18 Stmt	107	3.0	77	· ·	
RRAA	19 Depreciation (attach	107.	10	07.	· · · · · · · · · · · · · · · · · · ·	
ÎÎ	schedule) and depletion					,
N V G E	20 Occupancy					
	21 Travel, conferences, and meetings.					
A E N X D P	23 Other expenses (attach schedule)	7.2				
E N	S NOV 2 0 2017	, (S-O				
E N S E S	24 Total operating and administrative	I				
s	expenses. Add lines 13 through 23	1,103. 36,068.	1,10	03.		26.000
	25 Contributions, gifts grants paid . OGDEN, U	30,008.		<del>-  </del>		36,068.
	Add lines 24 and 25	37,171.	1,10	03.		36,068.
	27 Subtract line 26 from line 12				· · · · · · · · · · · · · · · · · ·	,
	a Excess of revenue over expenses and disbursements	31,816.				
	<b>b</b> Net investment income (if negative, enter -0-)	31,010.	4,25	52		
	C Adjusted net income (if negative, enter -0-)		1	<u></u>		
BAA F	or Paperwork Reduction Act Notice, see ins	tructions.	TEEA0301 12	2/16/16		Form <b>990-PF</b> (2016)

Total inabilities or fund balances (see instructions)  Part III   Analysis of Changes in Net Assets or Fund Balances (see instructions)  Total net assets or fund balances (see instructions)  Total net assets or fund balances (see instructions)  Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Add lines 1, 2, and 3  Other increases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases not included in line 2 (tiemize).  Add lines 1, 2, and 3  Decreases			Attached schedules and amounts in the description	Beginning of year	End of	<u> </u>
2 Savings and temporary cash investments 188, 190. 17, 457. 17, 457. 3 Accounts receivable Less allowance for doubtful accounts   4 Piedges receivable   Less allowance for doubtful accounts   5 Grants receivable   6 Recoveble des from direct, directors, Invises, and differ despelled persons (littles shedule) (see restructions)   7 Other news and tours received (starbs ship)   8 Investments – U.S. and state government obligations (attach schedule)   9 Prepare expenses and deferred charges   10 a investments – U.S. and state government obligations (attach schedule)   1 to restrict s – corporate both (allach schedule)   2 to the restrict s – corporate both (allach schedule)   2 to the restrict s – corporate both (allach schedule)   2 to the restrict s – corporate both (allach schedule)   3 to restrict s – corporate both (allach schedule)   3 to restrict s – corporate bot	Part	E	column should be for end-of-year amounts only (See instructions )	(a) Book Value		<del></del>
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A Accounts receivable Less allowance for doubtful accounts  4 Piedges receivable  6 Recorptise due two doubtful accounts  5 Grants receivable  6 Recorptise due two doubtful accounts  7 Other receivable Less allowance for doubtful accounts  8 8 8 Inventores for sale or use  9 Prepad expenses and deserverse delicitation objection of the delicitation objection objection objection of the delicitation objection object		2	Savings and temporary cash investments	188,190.	17,457.	17,457.
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Less allowance for doubtful accounts *		6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
S 10 a Investments — U.S and state government obligations (attach schedule). L-1,0,b. Stmt.	1	7	Other notes and loans receivable (attach sch)	-		
S 10 a Investments — U.S and state government obligations (attach schedule). L-1,0,b. Stmt.	A					
S 10 a Investments — U.S and state government obligations (attach schedule). L-1,0,b. Stmt.	s	8				
S 10 a Investments — U.S and state government obligations (attach schedule). L-1,0,b. Stmt.	Ę	9	Prepaid expenses and deferred charges			<del></del> _
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taltach schedule)  15 Other assets (describe   16 Total assets (to be completed by all filers   17 Accounts payable and accrued expenses.  18 Grants payable   19 Deferred revenue   20 Loans from officers, directors, trustees, & other disqualified persons   21 Mortgages and other notes payable (attach schedule)   22 Other liabilities (add lines 17 through 22)    Foundations that follow SFAS 117, check here   23 Total liabilities (add lines 17 through 26 and lines 30 and 31    N F E UN   24 Unrestricted   25 Temporarily restricted   26 Permanently restricted   27 Capital stock, trust principal, or current funds   28 Paid-in or capital surplus, or land, bldg , and equipment fund   00 E QR Retained earnings, accumulated income, endowment, or other funds   30 Total net assets or fund balances (see instructions)   31 Total liabilities and net assets/fund balances   32 Enter amount from Part I, line 27a   33 Other increases not included in line 2 (tiemze)   44 Add lines 1, 2, and 3   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   44 906, 167   5 Decreases not included in line 2 (tiemze)   45 Decreases not included in line 2 (tiemze)   46 Decreases not included in line 2 (tiemze)   5 Decreases not included in line 2 (ti		14	Land, buildings, and equipment basis		eu amount	
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18   Grants payable   19   Deferred revenue   20   Loans from officers, directors, trustees, & other disqualified persons   21   Mortgages and other notes payable (attach schedule)   22   Other liabilities (describe   23   Total liabilities (describe   24   Unrestricted   26   Permanently restricted   26   Permanently restricted   26   Permanently restricted   27   Capital stock, trust principal, or current funds   28   Pad-in or capital surplus, or land, bldg, and equipment fund   29   Retained earnings, accumulated income, endowment, or other funds   937, 983   903, 572   31   Total net assets or fund balances (see instructions)   937, 983   903, 572   28   Part III   Analysis of Changes in Net Assets or Fund Balances   37, 983   903, 572   29   Part III   Analysis of Changes in Net Assets or Fund Balances   37, 983   903, 572   31   Total net assets or fund balances (see instructions)   37, 983   903, 572   31, 816   30   Other increases not included in line 2 (itemize)   Adjustment to books for 2016   5   2,595   50   Decreases not included in line 2 (itemize)   Adjustment to books for 2016   5   2,595   50   2,5		16	see the instructions. Also, see page 1, item l)		903,572.	903,572.
B 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe    E 23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31  P F U 25 Temporarily restricted 26 Permanently restricted 3 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 5 N S N 28 Pad-in or capital surplus, or land, bldg, and equipment fund C OE 29 Retained earnings, accumulated income, endowment, or other funds 3 Total rela assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions)  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemze)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (	Ļ	17				
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21   Mortgages and other notes payable (attach schedule)	В	19				
Total liabilities (describe	Ė	20				
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31  N F UN D D 26 Permanently restricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total liabilities and net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  31 Total ret assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3  4 906, 167  5 Decreases not included in line 2 (itemize)  Add use for 2016  Add use for 2016  Foundations that follow SFAS 117, check here  A part III and liabilities (add lines 12 through 22)  Part III and liabilities (add lines 17 through 22)  Add lines 1, 2, and 3  4 906, 167  5 Decreases not included in line 2 (itemize)  Add use for 2016  Add lines 1, 2, and 3  Add lines 1 (itemize)  Add lines 1 (it	I T	21				
S 23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31  N F E U Unrestricted  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances  (see instructions)  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3  Decreases not included in line 2 (itemize)  Add junes 1, 2, and 3  Decreases not included in line 2 (itemize)  Add junes 1, 2, and 3  Ad	<u>i</u>	22	Other liabilities (describe			/% * * * * * * * * * * * * * * * * * * *
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31  N F U T N D 24 Unrestricted	E S	23	Total liabilities (add lines 17 through 22)			
E U N D 25 Temporarily restricted			Foundations that follow SFAS 117, check here			
E U N D 25 Temporarily restricted	NF	24	Unrestricted			<u></u>
D 26 Permanently restricted	ΕŲ	Į.				1
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 937, 983 903, 572.  28 Paid-in or capital surplus, or land, bldg and equipment fund 937, 983 903, 572.  29 Retained earnings, accumulated income, endowment, or other funds 937, 983 903, 572.  30 Total net assets or fund balances (see instructions) 937, 983 903, 572.  21 Total liabilities and net assets/fund balances (see instructions) 937, 983 903, 572.  22 Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 937, 983  2 Enter amount from Part I, line 27a 937, 983  3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 906, 167  5 Decreases not included in line 2 (itemize) 4 Add pustment to books for 2016 5 2, 595		1				1
E			Foundations that do not follow SFAS 117, check here		-	
28 Paid-in or capital surplus, or land, bidg, and equipment fund	EL	27		937.983	903.572	
R S 30 Total net assets or fund balances (see instructions)		1	· · · · · · · · · · · · · · · · · · ·		_505,572.	1
Solution	C	l				1
31 Total liabilities and net assets/fund balances (see instructions)		١		937, 983	903.572	1
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  2 Enter amount from Part I, line 27a	•	1	Total liabilities and net assets/fund balances			1
1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	Par	t III				
2		Tota	al net assets or fund balances at beginning of year – Part II, column	(a), line 30 (must agree	with	027 002
3 Other increases not included in line 2 (itemize)	2		• • • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·	
4 Add lines 1, 2, and 3						-31,010.
5 Decreases not included in line 2 (itemize) • Adjustment to books for 2016 5 2,595					<del></del>	906 167
	6					903,572

(a) List and describe	Losses for Tax on Investment the kind(s) of property sold (e.g., real e buse, or common stock, 200 shares ML	estate,	(b) How acqu P — Purcha D — Donati	se (mo, day, yr	
1a					
,b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale			or (loss) minus (g)
b b					
С					
d					
e					
Complete only for assets show	ng gain in column (h) and owned by the	foundation on 12/31/69		(I) Gains	(Col (h)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col (l than -0-) <b>or</b> Losse	(), but not less
а					
b					
С					
d					
е					
2 Capital gain net income or (net	capital loss) If gain, also e	enter in Part I, line 7 r -0- in Part I, line 7		2	
3 Net short-term capital gain or (le	loss) as defined in sections 1222(5) and	I (6)	<u> </u>		
If gain, also enter in Part I, line	8, column (c) (see instructions) If (loss	), enter -0-		3	
	er Section 4940(e) for Reduced		ont Inco		
	tion 4942 tax on the distributable amour fy under section 4940(e) Do not compl	• • • • • • • • • • • • • • • • • • • •	eriod?	Y	es No
1 Enter the appropriate amount in	n each column for each year, see the in	structions before making a	ny entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	Distribu	(d) ition ratio ded by col (c))
2015	95,418.	<del></del>	0.		0.00000
2014	106,875.	<del></del>	0.		0.00000
2013	130,943.		0.		0.00000
2012	115,036.	<del></del>	0.		0.0000
2011					
2 Total of line 1, column (d)				2	0.0000
3 Average distribution ratio for the number of years the foundation	e 5-year base period — divide the total on has been in existence if less than 5 ye	on line 2 by 5, or by the		3	0.0000
4. Enterthe not value of an in		uno F		4	
4 Enter the net value of nonchard	table-use assets for 2016 from Part X, I	me o		·	(
	table-use assets for 2016 from Part X, I			5	
5 Multiply line 4 by line 3			<u> </u>	5	(
<ul><li>Multiply line 4 by line 3</li><li>Enter 1% of net investment income</li></ul>	ome (1% of Part I, line 27b)				43
<ul><li>Multiply line 4 by line 3</li><li>Enter 1% of net investment inco</li><li>Add lines 5 and 6</li></ul>				6	43

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	s)	•	
	Exempt operating foundations described in section 4940(d)(2), check here • and enter 'N/A' on line 1			
	Date of ruling or determination letter 02/04/08 (attach copy of letter if necessary – see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V,			43.
	check here . ► X and enter 1% of Part I, line 27b			
	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-)			0.
3	Add lines 1 and 2			43.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			43.
	Credits/Payments			
	2016 estimated tax pmts and 2015 overpayment credited to 2016			
	Exempt foreign organizations — tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d			0.
_	Enter any panalty for undernayment of estimated tax. Check here		_	<u> </u>
8	Little any penalty for underpayment of estimated tax effects from			43.
9	Tax due il the total of lifes 5 and 6 is more than life 7, effet amount owed			0.
10	Overpayment if the 71s more than the total of the 5 s and 6, enter the amount overpaid			
11	Lines the amount of the Toto of Created to 2017 estimated tax			
	t VII-A Statements Regarding Activities	1	Van	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1 a	Yes	No
	participate or intervene in any political campaign?	1 4	-	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?.	1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	, ,		
	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation	-		1
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$			2
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	<del>-</del> ,		1 3
		X **	14.38	
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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	<u> </u>	X
t	off "Yes," has it filed a tax return on Form 990-T for this year?	4 b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ	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	١.	Į,	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	7	X	<del>                                     </del>
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		<del>  ``</del>	$\vdash$
	VIRGINIA			
	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			,
•	(or designate) of each state as required by General Instruction G <sup>2</sup> If 'No,' attach explanation	8 t	)	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names			
BAA	and addresses	10	)0-PE	X (2016)
	Г	OHH 35	, J - I - I	(2010)

TEEA0304 12/16/16

Par	t VII-A	Statements Regarding Activities (continued)		<del></del>	
11	At any ti within th	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	Yes	No X
12	advisory		12		Х
13	Did the f	oundation comply with the public inspection requirements for its annual returns and exemption application?	13		X
	Website	address		. <del></del> -	
14	The boo	ks are in care of Matilda J. Smithers Telephone no (703)	_5 <u>33</u>	<u>-188</u>	0
	Located	at 3412 N. Buchanan St Arlington VA 217+4 22201		·	
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		, -	Ш
		,		Yes	No
16	At any ti bank, se	me during calendar year 2016, did the foundation have an interest in or a signature or other authority over a curities, or other financial account in a foreign country?	16		Х
	enter the	instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' e name of the foreign country			
Par	<del></del>	Statements Regarding Activities for Which Form 4720 May Be Required	T	1	T
		m 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 а		he year did the foundation (either directly or indirectly)			
		age in the sale or exchange, or leasing of property with a disqualified person? Yes 🗓 No			
	disc	row money from, lend money to, or otherwise extend credit to (or accept it from) a ualified person?			
		nish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person? Yes XNo			
	(5) Trai	nsfer any income or assets to a disqualified person (or make any of either available he benefit or use of a disqualified person)?			
	four	ee to pay money or property to a government official? (Exception. Check 'No' if the indation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days )	>		
t	Regulat	nswer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in ions section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	Organiz	ations relying on a current notice regarding disaster assistance check here	, ,		, ,
Ć	Did the that wei	foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, re not corrected before the first day of the tax year beginning in 2016?	1 0		- X
2	Taxes of private	in failure to distribute income (section 4942) (does not apply for years the foundation was a operating foundation defined in section 4942(j)(3) or 4942(j)(5))		, , , ,	
á	At the e	nd of tax year 2016, did the foundation have any undistributed income (lines 6d			
		Part XIII) for tax year(s) beginning before 2016? Yes X No	, ,	1.78	
	it Yes,	list the years ► 20 , 20 , 20 , 20		1, 1,	
ı	(relating	re any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) it o incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to s listed, answer 'No' and attach statement — see instructions )	2 t		
	•	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		<u></u>	ļ
		_ , 20 , 20 , 20			
3 8	Did the enterpri	foundation hold more than a 2% direct or indirect interest in any business se at any time during the year?			
ı	or disqu by the ( (3) the i	did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation lalified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or apse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	``		, -
	aetermi	ne if the foundation had excess business holdings in 2016)	3 t	<u> </u>	1
4 :	a Did the charitat	foundation invest during the year any amount in a manner that would jeopardize its ble purposes?	4 8		Х
	jeopard	foundation make any investment in a prior year (but after December 31, 1969) that could ize its charitable purpose that had not been removed from jeopardy before the first day of year beginning in 2016?	41		

Form 990-PF (2016) Smithers Patriot F	oundation Inc		26-109	7880	Page 6
Part VII-B   Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (continued)		
5 a During the year did the foundation pay or incur ar			О., С		
(1) Carry on propaganda, or otherwise attempt to	influence legislation (se	ction 4945(e))?	· · · · Yes X	No	
<ul> <li>(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration</li> </ul>	n drive?				
(3) Provide a grant to an individual for travel, stu-	dy, or other similar purpo	ses?	· · · Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc., organi	zation described	Yes X	No	
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite f cruelty to children or ar	rary, or nimals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice renarding.	disaster assistance		5 b	×
Organizations relying on a current notice regarding	ng disaster assistance ch	eck here	• 🗍		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible			_	No	
If 'Yes,' attach the statement required by Regulat					
6 a Did the foundation, during the year, receive any for a personal benefit contract?				No	
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	n a personal benefit con	tract?	. 6b	X
If 'Yes' to 6b, file Form 8870	an a martir to a probibitor	l tou shelter transpotion?	□vec ☑	No	
7 a At any time during the tax year, was the foundation b If 'Yes,' did the foundation receive any proceeds					
Part VIII Information About Officers, D					
and Contractors	ircotoro, rruotoco,	· oundution manag	3010, 111gmy 1 and 2	p.io, oo	-,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).		
(a) Name and address	(b)Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expens other a	e account, llowances
Matılda J. Smithers					
3412 N. Buchanan Street	President	i			
Arlington VA 22207	1.00	0.	0.		0.
			·		
		<u> </u>			
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1 – see i	nstructions). If none, e	nter '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)Contributions to employee benefit plans and deferred compensation		e account, llowances
None			- Componibation		
~				<del>                                     </del>	
	1				
	<del> </del>	<del> </del>	<del> </del>	<u> </u>	
			1		
	` <u> </u>	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·		. <u> </u>	<u> </u>	None

Form 990-PF (2016)

BAA

## Part XIII Undistributed Income (see instructions)

,		(a) Corpus	(b) Years prior to 2015	(c) 2015	( <b>d)</b> 2016
1 Distributable amount for 20 line 7	16 from Part XI,				0.
2 Undistributed income, if any, as of	f the end of 2016				<u> </u>
a Enter amount for 2015 only				0.	
b Total for prior years 20 .	20 , 20				
3 Excess distributions carryover, if a	any, to 2016				
a From 2011	101,000.				
b From 2012	115,076.				
c From 2013	130,990.				
d From 2014	106,902.				
e From 2015	95,500.				
f Total of lines 3a through e		549,468.			
4 Qualifying distributions for 2	2016 from Part				
XII, line 4 🕨 Ş	36 <b>,</b> 068.				
a Applied to 2015, but not mo					
<ul> <li>Applied to undistributed inco (Election required — see ins</li> </ul>	ome of prior years structions)				
<ul> <li>Treated as distributions out (Election required — see ins</li> </ul>	structions)				,
d Applied to 2016 distributable					
e Remaining amount distribut	ed out of corpus .	36,068.			
5 Excess distributions carryover app			***************************************		
(If an amount appears in co same amount must be show	vn in column (a) )		,		
			,	,	
6 Enter the net total of each indicated below:	column as				*
a Corpus Add lines 3f, 4c, and 4e	Subtract line 5	585,536.			
		383,336.	, ', ', ', ', ', ', ', ', ', ', ', ', ',	<u> </u>	*
b Prior years' undistributed in- line 4b from line 2b	come Subtract	, <u>, , , , , , , , , , , , , , , , , , </u>	0.		3.4
c Enter the amount of prior ye	· ·	3	0.	* · · · · · · · · · · · · · · · · · · ·	TVC 1
income for which a notice of been issued, or on which th	f deficiency has	· · ·			
tax has been previously ass	sessed				· · · · · · · · · · · · · · · · · · ·
d Subtract line 6c from line 6b	. Tavahla	(			3, 7, 1
amount — see instructions			0.		
e Undistributed income for 2015 S					
line 2a Taxable amount — see in	istructions	**		0.	***************************************
f Undistributed income for 20	116 Subtract lines		, , , , , , , , , , , , , , , , , , , ,	* , , ,	
4d and 5 from line 1. This a distributed in 2017	mount must be	, ,	, , ,		
7 Amounts treated as distribu		·		,	0.
corpus to satisfy requirement	nts imposed by				
section 170(b)(1)(F) or 4942 may be required - see insti	2(g)(3) (Election		,		ı
,	· · · · · · · · · · · · · · · · · · ·				
8 Excess distributions carryov applied on line 5 or line 7 (s	ee instructions).	101,000.			
9 Excess distributions carry	vover to 2017.				
Subtract lines 7 and 8 from	line 6a	484,536.			
10 Analysis of line 9					
a Excess from 2012	115,076.				,
b Excess from 2013	130,990.				1
C Excess from 2014	106,902.				!
d Excess from 2015	95,500.				
e Excess from 2016	36,068.				

Form 990-PF (2016) Smithers Patriot	Foundation	Inc	/II-A guestion 9	26-1097880	) Page <b>10</b> N/A
Part XIV Private Operating Foundat  1 a If the foundation has received a ruling or det	espection letter that	Litus a private operat	ing foundation, and	the ruling	N/A
is effective for 2016, enter the date of the rul	ing			· · <u>_ ·</u> · · · · · · • •	4042(1)(5)
b Check box to indicate whether the foundation		ng toundation descri		4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	(e) Total
investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities 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()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					<u> </u>
Part XV Supplementary Information	(Complete this	part only if the	foundation ha	d \$5,000 or more	in
assets at any time during th		nstructions.)			
1 Information Regarding Foundation Mana a List any managers of the foundation who ha		than 2% of the total	contributions receiv	ed by the foundation	hefore the
close of any tax year (but only if they have o	contributed more that	n \$5,000) (See secti	on 507(d)(2) )	ed by the loundation	before the
b List any managers of the foundation who ov a partnership or other entity) of which the fo	vn 10% or more of th undation has a 10%	ne stock of a corporat or greater interest	tion (or an equally la	irge portion of the owi	nership of
	····				
2 Information Regarding Contribution, Gra					
Check here $\stackrel{\blacktriangleright}{}$ $\overline{X}$ if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions to gifts, grants, etc (se	o preselected charita e instructions) to ind	ble organizations an ividuals or organizat	id does not accept un tions under other cond	solicited ditions,
a The name, address, and telephone number	or e-mail address of	the person to whom	annications should	he addressed	
	o, o man address si	The person to whom	applications should	oc addressed	
b The form in which applications should be su	bmitted and informa	ition and materials th	ey should include		<del></del>
			•		
c Any submission deadlines		· · ·			
d Any restrictions or limitations on awards, su	ch as by geographic	al areas, charitable f	ields, kinds of institu	itions, or other factors	<u> </u>
ВАА	TI	EEA0310 12/16/16			Form <b>990-PF</b> (2016)

Form 990-PF (2016) Smithers Patriot Foundation Inc

[Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	<u> </u>				
a Paid during the year			Ballanahina s			
Yellow Ribbon Fund			Fellowships &			
7200 Wisconsin Ave #310		<u> </u>	Assistance	0		
Bethesda MD 20814		Grant		0.		
Wounded Warrior Project			Fellowships &			
7020 A.C. Skinner Pkw #100			Assistance,	0.		
Jacksonville FL 32256		Grant	Iraq troops	0.		
Segs4Vets			Fellowships &			
500 Fox Ridge Road			Assistance	^		
St. Louis MO 63131		Grant		0.		
Freedom Alliance			Fellowships &			
22570 Markey Ct. #240			Assistance			
Dulles VA 20166		Grant		2,068.		
The Aleethia Foundation			Fellowships &			
1718 M Street, NW #1170			Assistance			
Washington, DC 20036		Grant		10,000.		
Salute America's Heroes			Fellowships &			
P.O. Box 1073			Assistance			
Springfield VA 22151		Grant		20,000.		
Blinded Veterans Assn			Fellowships &			
477 H Street, NW			Assistance			
Washington, DC 20005		Grant		0.		
USO			Fellowships &			
P.O. Box 96860			Assistance			
Washington DC 20077	•	Grant		0.		
Paralyzed Veterans of America			Fellowships &			
801 18th Street, NW			Assistance			
Washington DC 20018	:	Grant		0.		
See Line 3a statement						
				4,000.		
				1,000.		
Total	· · · · · · · · · · · · · · · · · ·	<del>'</del>	▶ 3a	36,068.		
b Approved for future payment	<u> </u>	1		30,000.		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1				
				<b>!</b>		
		1				
		1				
			Ì			
		1				
				1		
Total			3b			

Part XVI	A   Analysis of Income-Producing	ACTIVITIES				T
nter gross	amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 51	4 (e)
	.  1 Program service revenue		(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
1 Progra	am service revenue	<u> </u>		code		<del> </del>
		-		<b>-</b>		<del>                                     </del>
ь						
c			<del></del>		<del></del>	
d		l				
e				<del> </del>		<del> </del>
' <u>-</u>		<del>  -</del>				<del> </del>
<del>-</del>	and contracts from government agencies	<del></del>	<del></del>	<del>                                     </del>		<del></del>
	pership dues and assessments					
	t on savings and temporary cash investments	522100	1,126.			
	ends and interest from securities	522100	4,229.			
	ental income or (loss) from real estate	<del> </del>		<del> </del>		
	financed property			ļ		
	ebt-financed property	<b> </b>		<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	
	ntal income or (loss) from personal property			<del>                                     </del>	·	
	investment income					
	r (loss) from sales of assets other than inventory			+ +-	<del></del>	
	ncome or (loss) from special events	ļ			·	<del></del>
	s profit or (loss) from sales of inventory					
11 Other	revenue			<del> </del>		
a				-		
b						<del> </del> -
c				-		
d		<del>                                     </del>		<del>                                     </del>		
_						
е		ļ				
12 Subto	otal Add columns (b), (d), and (e)	,	5,355.	,		
12 Subto	l. Add line 12, columns (b), (d), and (e)		5,355.		13	5,355
12 Subto 13 Total (See works	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>heet in line 13 instructions to verify calculation</li> </ul>	s)				5,355
12 Subto 13 Total (See works Part XV	l. Add line 12, columns (b), (d), and (e)	s) e Accompli	shment of Exem	pt Purpo	ses	
12 Subto 13 Total (See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV	l. Add line 12, columns (b), (d), and (e)	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation   -B   Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total (See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total (See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the
12 Subto 13 Total (See works Part XV Line No.	heet in line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation    Relationship of Activities to the Explain below how each activity for which inc	s ) e Accompli	shment of Exem	pt Purpo	ses	to the

Form 990-PF (2016)

Form 990-PF (2016) Smithers Patriot Foundation Inc 26-1097880

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

<u>-</u>	Exempt Organiz	ations									
describe	organization directly o ed in section 501(c) of to political organizatio	the Code (other	ige in any of the f r than section 501	following with 1(c)(3) organiz	any other o	rganization n section 527,				Yes	No
•	rs from the reporting for		oncharitable exe	mot organizat	on of						
(1) Cas									1 a (1)		х
	er assets								1 a (2)		X
b Other tra											
	es of assets to a nonc	haritable exemp	t organization.						1 b (1)		х
	chases of assets from								1 b (2)		Х
(3) Ren	ital of facilities, equipm	nent, or other as	ssets					[	1 b (3)		X
	mbursement arrangen							[	1 b (4)		X
	ns or loan guarantees							[	1 b (5)		Х
(6) Perl	formance of services	or membership o	or fundraising sol	icitations				[	1 b (6)		Х
c Sharing	of facilities, equipmen	nt, mailing lists,	other assets, or p	oaid employee	s			[	1 c		X
the good	iswer to any of the abo ds, other assets, or se esaction or sharing arm	rvices given by	the reporting four	ndation If the	foundation goods, oth	received less the er assets, or ser	an fair market vices received	value ir	า		
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exem	pt organization	(d)	Description of trans	sfers, transaction	s, and sh	arıng arran	gement	<u>s</u>
	<del></del>										
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										-	
	···										
			<del></del>			<u></u>					
describe	oundation directly or in ed in section 501(c) of complete the following	the Code (othe	d with, or related ir than section 50	to, one or mo 1(c)(3)) or in s	re tax-exem section 527	pt organizations			. Ye:	s [X	]No
(a	a) Name of organization	on	(b) Type	of organization	on	(c	) Description (	of relation	onship		
				*							
Sign	penalties of perjury, I declare t, and complete Declaration	e that I have examine of preparer (other tha	d this return, including in taxpayer) is based o	accompanying sci on all information o	nedules and sta f which prepare	itements, and to the b r has any knowledge	est of my knowled	ge and be	May the		uss
Here Sign	ature of officer or trustee	South	ers/	Nov./5		Trustee			this retur preparer (see inst	n with the shown t	e below
	Print/Type preparer's nan	ne	R PORCE	phaye A	Inden A	Date	Check	ıf	PTIN	1.03	
Paid	Richard L. A	Anderson,	_	d L. Ander	son Tr	·  .  11/15/17	self-employe	⊔" ו		7400	
Preparer	Firm's name		ON COMPANY		10 11100	· 1 ± ± / ± J / ± /	<del> </del>		P0011	1409	
Use Only	<u> </u>		WY STE 240					) 4 - T 2	76820		
	<u>l</u>	ARLINGTON	210 240	<del></del>	VA 22	207-3412	Phone no	17021	242	0605	:
BAA					VA 66	<u> </u>	1	(103)	243-	0005	(2046)

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
US Treasury User Fee	82.	82.		
Virginia SCC registration	25.	25.		l
	' <u></u> '			

Total \_\_\_\_\_\_107. \_\_\_\_107.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient  Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
Kip West Outdoors, Inc			Fellowships &	Person or
PO Box 1003			Assistance	Business
Wakefield VA 23888		Grant		3,000.
Navy Safe Harbor Foundation			Fellowships &	Person or
3631 Ransom Place			Assistance	Business
Alexandria VA 22306		Grant		0.
Northern Virginia Alliance League			Fellowships &	Person or
3200 N. Woodrow Street			Assistance	Business
Arlington VA 22207		Grant		0.
Fisher House Foundation			Fellowships &	Person or
111 Rockville Pike #420			Assistance	Business
Rockville MD 20850		Grant		0.
Disabled Americans Veterans			Fellowships &	Person or
3725 Alexandria Pike			Assistance	Business
Cold Spring KY 41076		Grant		0.
Semper Fi Fund			Fellowships &	Person or
825 College Boulevard			Assistance	Business
Oceanside CA 92057		Grant		0.
Gene Vance Jr. Foundation			Fellowships &	Person or
P.O. Box 912			Assistance	Business
Rutherfordton NC 28139		Grant		0.
College of William and Mary Foundation			Veterans Counseling	Person or X
PO Box 1693			Center	Business
Williamsburg VA 23187		Grant		0.
Heal The Warriors			Lyperbaric therapy	Person or X
129 W. Virginia Beach Blvd			Warriors with	Business
Norfolk VA 23510		Grant	Brain Injury	0.
Virginia Hospital Center			Treats combat	Person or X
1701 N. George Mason Dr.			wounded with	Business
Arlington VA 22205		Grant	addiction problems	0.
San Diego WW Tennis Program	<del>                                     </del>	1	Tennis camps	Person or X
2221 Morley Field Drive			for wounded	Business
	1	1 —	12400411404	1 - 40111000

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient  Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year Metal of Honor Museum P.O. Box 309 Mount Pleasant SC 29465		 Grant	Building and Development of Museum	Person or X Business 1,000.

Total

4,000.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RL Anderson Co.	Tax prepration	986.			

Total

986.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
US Post Office	Postage	10.			

Total

10.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
Fidelity Investments #Z71-724912	653,472.	653,472.	
Total	653,472.	653,472.	

#### **Supporting Statement of:**

Form 990-PF, pl/Line 1(a)

Description	Amount
No contributions to Foundation in 2016	0.
Total	0.

#### **Supporting Statement of:**

Form 990-PF, p2/Line 1(a)

Description	Amount
Wells Fargo Bank #2000049335608608 United Bank, Checking #70077045	26,046. 38,878.
Total	64,924.

### Supporting Statement of:

Form 990-PF, p2/Line 2(a)

Description		Amount	
	Savings #200003469363 Savings #00001373956941	37,436. 150,754.	
Total		188,190.	

#### Supporting Statement of:

Form 990-PF, p2/Line 1(b)

Description	Amount
Capital One Bank #00001373956941	151,671.
United Bank, Checking #70077045	38,916.
Wells Fargo Bank #2000049335608608	42,056.
Total	232,643.

#### **Supporting Statement of:**

Form 990-PF, p2/Line 1(c)

Description	Amount
Capital One Bank #00001373956941	151,671.
United Bank, checking #70077045	38,916.
Wells Fargo Bank #2000049335608608	42,056.
Total	232,643.

#### Supporting Statement of:

Form 990-PF, p2/Line 2(b)

	Description	Amount
Wells Fargo Bank,	Savings #200003469363	17,457.
Total		17,457.

#### Supporting Statement of:

Form 990-PF, p2/Line 2(c)

Description	Amount
Wells Fargo bank, Savings #200003469363	17,457.
Total	17,457.

#### Supporting Statement of:

Form 990-PF,p12/Line 3 Column (b)

Description	Amount
Wells Fargo Bank, #2000034669363	20.
Capital One Bank, #00001373956941	917.
United Bank	39.
Fidelity Investments #Z71-724912	150.
Total	1,126.

## Supporting Statement of:

Form 990-PF,p12/Line 4 Column (b)

Description	Amount
Fidelity Investments #271-724912	4,229.
Total	4,229.