

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	14,641	2,593	2,593
	2	Savings and temporary cash investments	18,400	248,042	248,042
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	791,352	918,280	1,175,106
	c	Investments—corporate bonds (attach schedule)	192,746	115,901	119,535
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	687,956	546,476	536,758
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,705,095	1,831,292	2,082,034	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	1,705,095	1,831,292	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> 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 net assets or fund balances (see instructions)	1,705,095	1,831,292	
31	Total liabilities and net assets/fund balances (see instructions) .	1,705,095	1,831,292		

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)	1	1,705,095
2	Enter amount from Part I, line 27a	2	126,197
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	1,831,292
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	1,831,292

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from 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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	20,245
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

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

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

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



Yes



No

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

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015			
2014			
2013			
2012			
2011			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	1,315
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 only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	1,315
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,315
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
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	
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	30
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	1,345
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • 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	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
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)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of BRUCE H MACLEOD Telephone no (240) 482-8911			

Located at **3905 BRADLEY BLVD CHEVY CHASE MD** ZIP+4 **20815**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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 termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b			
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? <input type="checkbox"/> 1c			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose 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). <input type="checkbox"/> 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/> 4a			No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? <input type="checkbox"/> 4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>			5b
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If "Yes" to 6b, file Form 8870</i>			6b No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			7b

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 (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
BRUCE H MACLEOD 3905 BRADLEY LANE CHEVY CHASE, MD 20815	DIRECTOR 000 00	0	0	0
CARLA B MACLEOD 3905 BRADLEY LANE CHEVY CHASE, MD 20815	DIRECTOR 000 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000. ▶				

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3
Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(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

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B
Summary of Program-Related Investments (see instructions)

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	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	1,034,331
b	Average of monthly cash balances.	1b	146,588
c	Fair market value of all other assets (see instructions).	1c	599,515
d	Total (add lines 1a, b, and c).	1d	1,780,434
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,780,434
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	26,707
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,753,727
6	Minimum investment return. Enter 5% of line 5.	6	87,686

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	87,686
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	1,315
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,315
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	86,371
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	86,371
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	86,371

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	59,400
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	59,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	59,400

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 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				86,371
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			50,529	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>59,400</u>				
a Applied to 2015, but not more than line 2a			50,529	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2016 distributable amount.				8,871
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				77,500
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).				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed BRUCE H MACLEOD 3905 BRADLEY BLVD CHEVY CHASE, MD 20815 (240) 482-8911	
b The form in which applications should be submitted and information and materials they should include	
c Any submission deadlines	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	

Part XV **Supplementary Information** (continued)**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	59,400
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments					7,067
4 Dividends and interest from securities.					37,278
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					6,023
8 Gain or (loss) from sales of assets other than inventory					16,359
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e).					66,727
13 Total. Add line 12, columns (b), (d), and (e).					66,727

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign
Here**

* * * * *


Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**


Print/Type preparer's name COURTNEY G SPRINGIRTH CPA	Preparer's Signature	Date 2017-11-06	Check if self-employed <input type="checkbox"/>	PTIN P00659686
Firm's name ► COURTNEY G SPRINGIRTH CHARTERED				Firm's EIN ► 52-1796985
Firm's address ► 17830 NEW HAMPSHIRE AVE STE 301 ASHTON, MD 20861				Phone no (301) 260-2820

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ACLU 125 BROAD STREET NEW YORK, NY 10023	NONE	501C3	CHARITABLE - NONE	1,000
ALHEIMER'S FOUNDATION 322 8TH AVE NEW YORK, NY 10001	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
ANNE K TAYLOR FUND 2724 ARVIN RD BILLINGS, MT 59102	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
BETHESDA CHEVY CHASE RESCUE SQUAD 5020 BATTERY LANE BETHESDA, MD 20814	NONE	501C3	CHARITABLE - NO RESTRICTIONS	150
BHUTAN FOUNDATION 2100 PENNSYLVANIA AVE NW WASHINGTON, DC 20037	NONE	501C3	CHARITABLE - NO RETRICTIONS	500
Total ▶ 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIG CAT RESCUE 12802 EASY ST TAMPA, FL 33625	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
BISHOP JOHN T WALKER SCHOOL 3640 MLK JR AVE SE WASHINGTON, DC 20032	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
BRADY UROLOGICAL INSTITUTE 100 N CHARLES ST BALTIMORE, MD 21201	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
CAMP KABEYUN 43 CAMP KABEYUN ALTON BAY, NH 03810	NONE	501C3	CHARITABLE - NONE	1,000
CHESAPEAKE BAY FOUNDATION 725 8TH ST SE WASHINGTON, DC 20003	NONE	501C3	CHARITABLE - NONE	150
Total 				59,400
3a				

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S HOSPITAL 111 MICHIGAN AVE WASHINGTON, DC 20010	NONE	501C3	CHARITABLE - NO RESTICTIONS	150
CITIZENS FOR FAUQUIER COUNTY PO BOX 3486 WARRENTON, VA 20188	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
COLUMBUS BUSINESS SCHOOL 33 WEST 60TH ST NEW YORK, NY 10023	NONE	501C3	CHARITABLE - NONE	250
DOCTORS WITHOUT BORDERS 333 7TH AVE NEW YORK, NY 10001	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
ENVIROMENTAL DEFENSE FUND 1875 CONNECTICUT AVE WASHINGTON, DC 20009	NONE	501C3	CHARITABLE - NO RESTRICTIONS	10,000
Total ▶ 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAUQUIER SPCA PO BOX 733 WARRENTON, VA 20188	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
FOREST TRENDS 1203 19TH ST NW WASHINGTON, DC 20036	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
GREENDOOR 1221 TAYLOR ST NW WASHINGTON, DC 20011	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS, GA 31709	NONE	501C3	CHARITABLE - NONE	150
HOLTON ARMS ANNUAL FUND 7303 RIVER ROAD BETHESDA, MD 20817	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total 				59,400
3a				

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOSPITAL FOR SPECIAL SURGERY PO BOX 209174 NEW YORK, NY 10087	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
INTERCONNECTION 21 PO BOX 960 WILSON, WY 83014	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
INTERNATIONAL COLLEGE OF BEIRUT 215 PARK AVE S 2016 NEW YORK, NY 10003	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
KENNEDY CENTER 2700 F STREET NW WASHINGTON, DC 20566	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
LANDON ANNUAL DRIVE 6101 WILSON LANE BETHESDA, MD 20817	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total ► 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL AUDUBON SOCIETY 225 VARICK ST NEW YORK, NY 10014	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
NATIONAL PARK CONSERVATION 777 6TH ST NW WASHINGTON, DC 20001	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
NATIONAL RESOURCE DEFENSE COUNCIL 40 W 20TH ST NEW YORK, NY 10011	NONE	501C3	CHARITABLE - NO RESTRICTIONS	10,000
NATIONAL TRUST FOR HISTORIC PRESERV 1785 MASSACHUSETTS AVE WASHINGTON, DC 20036	NONE	501C3	CHARITABLE - NO RESTRICTIONS	10,000
ORLEAN VOLUNTEER FIRE AND RESCUE 6838 LEEDS MANOR RD ORLEAN, VA 20128	NONE	501C3	CHARITABLE - NO RESTRICTIONS	150
Total ► 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PIEDMONT ENVIROMENT COUNCIL 45 HORNER ST WARRENTON, VA 20186	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
PIH 888 COMMONWEALTH AVE BOSTON, MA 02215	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
RED CROSS 8550 ARLINGTON BLVD FAIRFAX, VA 22031	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
SPS ALUMNI FUND 325 PLEASANT ST CONCORD, NH 03301	NONE	501C3	CHARITABLE - NO RESTRICTIONS	2,000
THE KREEGER MUSEUM 2401 FOXHALL RD NW WASHINGTON, DC 20007	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total 				59,400
3a				

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR ARLINGTON, VA 22203	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
TRUSTEES OF TUFTS COLLEGE 419 BOSTON AVE MEDFORD, MA 02155	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
VIRGINIA OUTDOORS 39 GARRETT ST WARRENTON, VA 20186	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
WAMU 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 20016	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
WETA 3939 CAMPBELL AVE ARLINGTON, VA 22206	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
WHITE ROSE FOUNDATION BNOX 143309 LAS COLINAS S IRVING, TX 75014	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
WILD AID 744 MONTGOMERY STREET SAN FRANCISCO, CA 94111	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
WORLD RESOURCE INSTITUTE 10 G STREET NE WASHINGTON, DC 20002	NONE	501C3	CHARITABLE - NO RESTRICTIONS	150
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20090	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
PAVA FOUNDATION PO BOX 22386 SANTA FE, NM 87502	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total ▶ 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AVALON THEATER PROJECT 5612 CONNECTICUT AVE NW WASHINGTON, DC 20015	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
SMITHSONIAN CONSERVATION 1500 REMOUNT RD FRONT ROYAL, VA 22630	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
OCEAN CONSERVANCY 1300 19TH ST NW WASHINGTON, DC 20036	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
MALALA FUND PO BOX 53347 WASHINGTON, DC 20009	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
EARTHJUSTICE 1625 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
Total ▶ 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SIERRA CLUB MEMBER SVCS 2101 WEBSTER ST OAKLAND, CA 94612	NONE	501C3	CHARITABLE - NO RESTRICTIONS	2,500
WINDY HILL FOUNDATION 102 W WASHINGTON ST MIDDLEBURG, VA 20117	NONE	501C3	CHARITABLE - NO RESTRICTIONS	500
SUSTAINABLE NORTHWEST 812 SW WASHINGTON ST PORTLAND, OR 97205	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
WILDNET 209 MISSISSIPPI ST SAN FRANCISCO, CA 94107	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
K9 LIFESAVER DOG RESCUE 721 ERIE AVE TAKOMA PARK, MD 20912	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total ► 3a				59,400

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CANTER USA CANTER DR NORTH LAS VEGAS, NV 89032	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
DAYS END EQUINE 1372 WOODBINE RD WOODBINE, MD 21797	NONE	501C3	CHARITABLE - NO RESTRICTIONS	1,000
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER RESTON, VA 20190	NONE	501C3	CHARITABLE - NO RESTRICTIONS	250
Total ▶ 3a				59,400

TY 2016 Accounting Fees Schedule**Name:** SKYEMAR FOUNDATION**EIN:** 26-1605692

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	1,875	1,875		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Gain/Loss from Sale of Other Assets Schedule

Name: SKYEMAR FOUNDATION

EIN: 26-1605692

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
1281 229 SHS BUFFALO SMALL CAP GROWT	2015-12	PURCHASE	2016-03		21,127	24,933			-3,806	
19 454 SHS DODGE & COX BALANCE		PURCHASE	2016-04		1,828	1,936			-108	
310 263 SHS HOTCHKIS & WHILEY VALUE	2015-12	PURCHASE	2016-04		7,121	8,910			-1,789	
1801 914 SHS BUFFALO SMALL CAP GROWT		PURCHASE	2016-03		29,714	45,527			-15,813	
315 136 SHS DODGE & COX BALANCE		PURCHASE	2016-04		29,613	31,368			-1,755	
501 102 SHS FIDELITY CONTRAFUND	2009-05	PURCHASE	2016-12		50,000	26,901			23,099	
1817 095 SHS HOTCHKIS & WHILEY VALUE		PURCHASE	2016-04		41,702	52,180			-10,478	
2406 047 SHS JANUS CONTRARIAN FUND		PURCHASE	2016-12		47,543	56,217			-8,674	
100 SHS GENERAL ELECTRIC	2014-09	PURCHASE	2016-04		30,440	25,679			4,761	
1000 KKR FINANCIAL HOLDING	2012-02	PURCHASE	2016-11		25,000	26,550			-1,550	
CASH IN LIEU LAMB WESTON	2010-11	PURCHASE	2016-11		33	11			22	
2500 MERRILL LYNCH PFD CA 7 28%	2009-11	PURCHASE	2016-01		62,500	50,295			12,205	

TY 2016 Investments Corporate Bonds Schedule**Name:** SKYEMAR FOUNDATION**EIN:** 26-1605692

Name of Bond	End of Year Book Value	End of Year Fair Market Value
1000 DUETSCHKE BANK CONTINGENT	24,250	25,260
2500 MERRILL LYNCH 7.28%		
1000 HSBC HOLDING	25,000	25,800
35000 AIG 8.175 FIX ED	41,911	44,275
1000 KKR FINANCIAL HOLDINGS 8.		
1000 QWEST CORPORATION	24,740	24,200

TY 2016 Investments Corporate Stock Schedule

Name: SKYEMAR FOUNDATION

EIN: 26-1605692

Name of Stock	End of Year Book Value	End of Year Fair Market Value
100 SHS UNITED PARCEL SVC	10,488	11,464
1000 SHS GE		
1000 SHS MARKET VECTOR	50,285	51,340
1057 SELECT SECTOR SPDR	30,582	51,338
1100 SHS CONAGRA FOOD INC	18,802	43,505
1100 SHS DOW CHEMICAL	48,820	62,942
111 SHS BANCO SANTANDER SA ADR	860	575
113 SHS BANCO SANTANDER SA ADR	826	585
1900 SHS SPECTRA ENERGY CORP	50,914	78,071
200 SHS CHEVRON CORP	18,149	23,540
250 SHS CUMMINS INC.	29,126	34,168
263 SHS VERIZON		14,039
300 SHS CHEVRON CORP	25,494	35,310
300 SHS NOVARTIS ADR	30,427	21,852
300 SHS SCHLUMBERGER LTD	24,397	25,185
300 SHS SCHLUMBERGER LTD	23,479	25,185
300 SHS SCHLUMBERGER LTD	23,330	25,185
3000 SHS ALPS ALERIAN MLP	48,408	37,800
400 SHS JOHNSON & JOHNSON	25,929	46,084
400 SHS NOVARTIS	22,548	29,136
400 SHS NOVARTIS ADR	35,495	29,136
400 SHS UPS	25,158	45,856
4000 SHS BANCO SANTANDER SA ADR	29,040	20,720
405 SHS JPMORGAN CHASE	18,899	34,947
5000 SHS BANCO SANTANDER SA	42,191	25,900
525 SHS APPLE	24,820	60,806
550 SHS JPMORGAN CHASE	24,885	47,460
560 SHS APPLE	40,347	64,859
75 SHS JOHNSON & JOHNSON	7,755	8,641
750 SHS BERKSHIRE HATHAWAY	123,713	122,235

Name of Stock	End of Year Book Value	End of Year Fair Market Value
89 SHS BANCO SANTANDER SA ADR	494	461
900 SHS VERIZON COMMUNICATIONS	24,882	48,042
107 SHS BANCO SANTANDER	464	554
600 SHS DOW CHEMICAL	31,500	34,332
366 SHS LAMB WESTON HOLDINGS	5,773	13,853

TY 2016 Investments - Other Schedule**Name:** SKYEMAR FOUNDATION**EIN:** 26-1605692

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BUFFALO SMALL CAP FUND	AT COST		
DODGE & COX BALANCE	AT COST		
FIDELITY CONTRAFUND	AT COST	59,066	50,866
FIDELITY DISCOVERY	AT COST	105,428	123,705
FIDELITY SELECT BIOTECH	AT COST	97,806	82,843
HOTCHKIS & WILEY VALUE	AT COST		
JANUS CONTRARIAN FUND	AT COST		
OAKMARK GLOBAL SELECT	AT COST	54,950	55,907
PRIMECAP ODYSSEY GROWTH FUND	AT COST	64,701	66,990
PRIMECAP ODYSSEY AGGRESSIVE GROWTH	AT COST	108,124	110,071
VANGUARD HEALTH CARE INVESTOR	AT COST	56,401	46,376

TY 2016 Other Expenses Schedule**Name:** SKYEMAR FOUNDATION**EIN:** 26-1605692**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
INVESTMENT EXPENSES - ACCOUNT	405	405		
MISCELLANEOUS EXPENSES	1,808	1,808		

TY 2016 Other Income Schedule

Name: SKYEMAR FOUNDATION

EIN: 26-1605692

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME	6,023	6,023	6,023

TY 2016 Taxes Schedule**Name:** SKYEMAR FOUNDATION**EIN:** 26-1605692

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	755	755		

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>	OMB No 1545-0047 2016
	Name of the organization SKYEMAR FOUNDATION	Employer identification number 26-1605692

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization SKYEMAR FOUNDATION	Employer identification number 26-1605692
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRUCE H MACLEOD 3905 BRADLEY LANE CHEVY CHASE, MD 20815	\$ 123,713	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>

Name of organization SKYEMAR FOUNDATION	Employer identification number 26-1605692
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Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	750 SHS BERKSHIRE HATHAWAY INC	\$ 123 713	2016-12-01
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization
SKYEMAR FOUNDATION**Employer identification number**

26-1605692

Part III **Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of **exclusively** religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee