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Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491135005357

2016

OMB No 1545-0052

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.

Open to Public

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number NEWDAY USA FOUNDATION INC 46-3282193 Number and street (or P O box number if mail is not delivered to street address) 8160 MAPLE LAWN BLVD NO 300 B Telephone number (see instructions) (410) 244-7499 City or town, state or province, country, and ZIP or foreign postal code FULTON, MD $\,$ 20759 ${f C}$ If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ☑ Section 501(c)(3) exempt private foundation H Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), ☐ Other (specify) line 16) \$ 807,542 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment Adjusted net for charitable (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach 1,718,559 schedule) Check ▶ ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 . . 1,718,559 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits . Operating and Administrative Expenses اروه 61,028 16a Legal fees (attach schedule) . . . Accounting fees (attach schedule) Other professional fees (attach schedule) 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings . 22 Printing and publications . . . 23 Other expenses (attach schedule) 1.000 24 Total operating and administrative expenses. Add lines 13 through 23 62,028 863,148 863,148 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 925,176 863,148 27 Subtract line 26 from line 12 Excess of revenue over expenses and 793,383 disbursements Net investment income (If negative, enter -0-) Adjusted net income(if negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form **990-PF** (2016)

14,159

14.159

14,159

14,159

807,542

785.042

22,500

807,542

807,542

2

3

4

5

6

14,159

793,383

807,542

807,542 Form 990-PF (2016)

0

0

807,542

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Investments—corporate stock (attach schedule)

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _ Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Less allowance for doubtful accounts

Inventories for sale or use

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ _____

7

8

9 10a

b

C 11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28

29

31 Part III

Liabilities

Balances

Fund

ō

Assets 27

Net 30

2

3

Assets

7 8,487,606 8 Enter qualifying distributions from Part XII, line 4 8 863,148 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 Form 990-PF (2016)

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (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		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2

За 3b

4

5

863.148

863.148

Form 990-PF (2016)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

2016

Page 9

2.039

2.039

Form **990-PF** (2016)

	,	
rt	XIII	U

b Total for prior years

From 2011. **b** From 2012. c From 2013. . .

d From 2014.

e From 2015.

XII, line 4 > \$

indicated below:

Form 990-PF (2	016)
Part XIII	Un

0-PF (20	016)	
XIII	Undistributed Income (see instruc	tions)

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **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.

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

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 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.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

d Excess from 2015. . . e Excess from 2016. . .

b Excess from 2013. .

Subtract lines 7 and 8 from line 6a

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

same amount must be shown in column (a))

295.820 678,848

737,297

295,820

678.848

737.297

861.109

(a)

Corpus

1,711,965

861.109

2,573,074

2,573,074

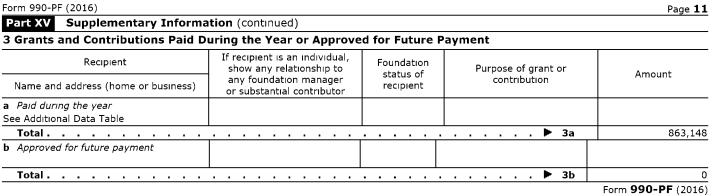
(b)

Years prior to 2015

(c)

2015

See Additional Data Table



er gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
_	and contracts from government agencies					
Interes	ship dues and assessments st on savings and temporary cash					
	ments					
	ds and interest from securities					
	inanced property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	vestment income					
	ory					
	ome or (loss) from special events					
Gross p	rofit or (loss) from sales of inventory					
other r	evenue a					
	•					
e						
e			0	1)
e Subtota Total. /			0	1	3	
Subtota Total. worksh	I Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculatio Relationship of Activities to th	^{ns}) e Accomplish	ment of Exem	pt Purposes	3	
Subtota Total. / worksh	Add Inne 12, columns (b), (d), and (e)	ns) e Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3	
Subtota Total. / worksh rt XVI e No.	I Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Leet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3	
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Subtota Total. // worksh rt XVI	I Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Leet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3	
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Subtota Total. // e worksh irt XVII	I Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Leet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3	

. , – -	/
II	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII	Information Re Exempt Organia		ansfers	s то а	ind Transact	ion	is and F	Relatio	nships With No	ncharit	able		
	anization directly or in ode (other than sectio	directly engag								ion 501		Yes	No
a Transfers fr	om the reporting foun	dation to a no	ncharitab	ble exe	empt organizatio	on o	of						
(1) Cash											1a(1)		No
(2) Other assets											1a(2)		No
b Other trans	b Other transactions												
(1) Sales of assets to a noncharitable exempt organization													
` '				_							1b(2)		No
	of facilities, equipmen	•						• •			1b(3)		No
	ursement arrangemen or loan guarantees.									•	1b(4) 1b(5)		No No
` .	nance of services or m										1b(6)		No
` .	facilities, equipment, n	•		-						-	1c		No
_	er to any of the above												
	s, other assets, or ser saction or sharing arra										e		
(a) Line No	(b) Amount involved	(c) Name of r	noncharitab	ole exer	mpt organization		(d) Desc	ription of	transfers, transactions	s, and shai	rıng arraı	ngemen	ts
2a Is the found	dation directly or indire	ectly affiliated	with, or	related	d to, one or mor	re ta	ax-exemp	ot organ	zations				
described ii	n section 501(c) of the	Code (other	than sect	ion 50	1(c)(3)) or in se	ectio	on 527?.			[Yes	✓ N	0
b If "Yes," co	mplete the following so (a) Name of organization		1	/ 1-) Type of organiza	stion	, I		(c) Descriptio	n of rolatio	nchin		
	(a) Name of organization	711		(1) Type of organiza	ation	ı		(c) Descriptio	II OI Telatic	лізпір		
			-										
of my Sign which	r penalties of perjury, / knowledge and belief n preparer has any kno	, it is true, co								ased on	all infor	mation	n of
теге	****				2017-05-12			****		May the II with the p	reparer s	shown b	elow
V s	ignature of officer or ti	rustee			Date		7 Tit	le		(see instr)? V Y	es 🗆 N	lo
	Print/Type preparer's		Preparer'	's Sıgn	ature		Date		Check if self- employed ▶ □	PTIN	P01071	493	
Paid	DAVID S ROSEN E												
Preparer Use Only	Firm's name ► ROS	EN SAPPERST	EIN & FR	IEDLA	NDER LLC					Firm's E	 IN ▶47	-51538	 865
	Firm's address ► 30	0 RED BROOF	K BLVD SI	UITE 2	200								
OWINGS MILLS, MD 21117						Phone no (410) 581-0800							

Form	990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
a	The name, address, and telephone number of the person to whom applications should be addressed
8 F	ROBERT I POSNER 3160 MAPLE LAWN BLVD SUITE 300 3ULTON, MD 20759 410) 244-7499
b T	he form in which applications should be submitted and information and materials they should include
V	VRITTEN REQUEST DETAILING USE OF REQUESTED FUNDS
c A	ny submission deadlines
N	10
d A	ny restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors NO

orı	m 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
а	The name, address, and telephone number of the person to whom applications should be addressed
	THOMAS C LYNCH 8160 MAPLE LAWN BLVD SUITE 300 FULTON, MD 20759 (410) 244-7499
b	The form in which applications should be submitted and information and materials they should include
	WRITTEN REQUEST DETAILING USE OF REQUESTED FUNDS
С	Any submission deadlines
	NO
d	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
	NO

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Form 990PF Part XV Line 3 - Grant	s and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AMERICAN FREEDOM FOUNDATION INC 10865 HOFFNER EDGE DRIVE RIVERVIEW, FL 33579		PC	UNRESTRICTED USE BY RECIPIENT	25,000
ANNAPOLIS GOLD STAR FAMILY MEMORIAL		PC	SPONSORSHIP	5,000
102 OLD SOLOMONS ISLAND ROAD 3RD FLOOR ANNAPOLIS, MD 21401				
BOULDER CREST RETREAT FOUNDATION 18370 BLUEMONT VILLAGE LANE BLUEMONT, VA 20135		PC	UNRESTRICTED USE BY RECIPIENT	5,000
CONGRESSIONAL MEDAL OF HONOR FOUNDATION 252 NORTH WASHINGTON STREET FALLS CHURCH, VA 22046		PC	UNRESTRICTED USE BY RECIPIENT	1,000
FISHBURNE-HUDGINS EDUCATIONAL FOUNDATION		PC	SCHOLARSHIPS AND COMPUTERS	149,393
PO BOX 988 225 SOUTH WAYNE AVENUE WAYNESBORO, VA 22980				
FORK UNION MILITARY ACADEMY PO BOX 278 FORK UNION, VA 23055		PC	SCHOLARSHIPS	15,000
GEORGIA MILITARY COLLEGE FOUNDATION INC 410 S JEFFERSON STREET SE MILLEDGEVILLE, GA 31061		PC	SCHOLARSHIPS	30,445
JERUSALEM BAPTIST CHURCH 994 THREE CHOPT ROAD MANAKIN SABOT, VA 23103		PC	UNRESTRICTED USE BY RECIPIENT	25,000
JOE TORRE SAFE AT HOME FOUNDATION 55 WEST 39TH STREET SUITE 600 NEW YORK, NY 10018		PC	SPONSORSHIP	8,670
MARINE MILITARY ACADEMY 320 IWO JIMA BOULEVARD HARLINGEN, TX 78550		PC	SCHOLARSHIPS	30,000
NATIONAL GUARD YOUTH FOUNDATION 415 NORTH LEE STREET ALEXANDRIA, VA 22314		PC	UNRESTRICTED USE BY RECIPIENT	4,000
NEEN CARES INC 627 ADMIRAL DRIVE 8304 ANNAPOLIS, MD 21401		PC	UNRESTRICTED USE BY RECIPIENT	5,000
OAK RIDGE MILITARY ACADEMY 2317 OAK RIDGE ROAD OAK RIDGE, NC 27310		PC	SCHOLARSHIPS	7,000
SONGS AND STORIES FOR SOLDIERS INC 15880 SUMMERLIN ROAD STE 300 PMB 136 FT MEYERS, FL 33908		PC	UNRESTRICTED USE BY RECIPIENT	1,000
TEMPLE UNIVERSITY 1852 NORTH 10TH STREET PHILADELPHIA, PA 19122		PC	UNRESTRICTED USE BY RECIPIENT	34,280
Total				863,148

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	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
THE BALTIMORE STATION INC 140 WEST WEST STREET BALTIMORE, MD 21230		PC	UNRESTRICTED USE BY RECIPIENT, SPONSORSHIP	240	
THE KEY SCHOOL 534 HILLSMERE DRIVE ANNAPOLIS, MD 21403		PC	UNRESTRICTED USE BY RECIPIENT	20,000	
THE NATIONAL ASSOCIATION OF THE 10TH MOUNTAIN DIVISION 8199 PINEWOODS ROAD HOUGHTON, NY 14744		PC	UNRESTRICTED USE BY RECIPIENT	25,000	
THE PENTAGON FEDERAL CREDIT UNION FOUNDATION		PC	SPONSORSHIP	78,800	
2930 EISENHOWER AVENUE 6TH FLOOR ALEXANDRIA, VA 22314					
UNITED SERVICE ORGANIZATIONS INC 2111 WILSON BLVD SUITE 1200 ARLINGTON, VA 22201		PC	SPONSORSHIP	22,700	
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION INC 4603 CALVERT ROAD COLLEGE PARK, MD 20740		PC	UNRESTRICTED USE BY RECIPIENT	55,000	
UNIVERSITY OF MARYLAND MEDICAL SYSTEM FOUNDATION INC 22 SOUTH GREENE STREET BALTIMORE, MD 21201		PC	UNRESTRICTED USE BY RECIPIENT	4,620	
US NAVY MEMORIAL FOUNDATION 701 PENNSYLVANIA AVENUE NW STE 123 WASHINGTON, DC 20004		PC	SPONSORSHIP	8,500	
VALLEY FORGE MILITARY ACADEMY FOUNDATION 1001 EAGLE ROAD WAYNE, PA 19087		PC	UNRESTRICTED USE BY RECIPIENT	77,500	
VIETNAM VETERANS MEMORIAL FUND INC 2600 VIRGINIA AVENUE NW SUITE 104 WASHINGTON, DC 20037		PC	UNRESTRICTED USE BY RECIPIENT	100,000	
WARRIORS 4 WIRELESS SCHOLARSHIP FUND 2214 ROCK HILL ROAD STE 500 HERNDON, VA 20170		PC	UNRESTRICTED USE BY RECIPIENT	25,000	
WREATHS ACROSS AMERICA PO BOX 249 4 POINT STREET COLUMBIA FALLS, ME 04623		PC	UNRESTRICTED USE BY RECIPIENT	100,000	

863,148

Total .

3a

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491135005357				
TY 2016 Legal Fees Schedule								
Nan	ne: NEWDAY US	A FOUNDATION IN	NC					
E	IN: 46-3282193							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
LEGAL FEES	61,028	0		0				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491135005357
TY 2016 Other Expenses Schedule				
Name:	NEWDAY USA FOUNDATION INC			
EIN:	46-3282193			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEE	1,000	0		0

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491135005357				
Schedule B (Form 990, 990-EZ,	Schedule of Contributo	rs	OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990- ► Information about Schedule B (Form 990, 990-EZ, or 990-P <u>www.irs.gov/form990</u> .		2016	
Name of the organizat NEWDAY USA FOUNDAT		Employer i	dentification number	
		46-3282193	1	
Organization type (ch	eck one)			
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as	s a private foundation		
	☐ 527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a p	private foundation		
	501(c)(3) taxable private foundation			
141	ation filing Form 990, 990-EZ, or 990-PF that received, during t r property) from any one contributor Complete Parts I and II Se		•	
Special Rules				
under sections received from a	tion described in section 501(c)(3) filing Form 990 or 990-EZ that 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 one contributor, during the year, total contributions of the greine 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	990 or 990-EZ), Part II, line 13,	, 16a, or 16b, and that	
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 990 o total contributions of more than \$1,000 exclusively for religious, the prevention of cruelty to children or animals. Complete Parts	, charitable, scientific, literary, c		
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 of contributions exclusively for religious, charitable, etc., purposes ecked, enter here the total contributions that were received during the complete any of the parts unless the General Rule applies to the parts of the pa	s, but no such contributions tota ig the year for an exclusively re this organization because it rec	aled more than \$1,000 eligious, charitable, etc, ceived <i>nonexclusively</i>	
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rit it must answer "No" on Part IV, line 2, of its Form 990, or chec Form 990PF, Part I, line 2, to certify that it does not meet the filir	k the box on line H of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions Cat No 30613X 30-PF	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2016)	

Name of organization NEWDAY USA FOUNDATION INC

Employer identification number

		46-3282:	L93
Part I	Contributors (see Instructions) Use duplicate copies of Part I if additional spa	ce is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	See Additional Data Table	\$	Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(Complete Part II for noncash contribution) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash
(a) (b) No. Name, address, and ZIP	(b) Name, address, and ZIP + 4	(c) Total contributions	contribution) (d) Type of contribution
			Person
(a)	(b)	(c)	(Complete Part II for noncash contribution)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution Person Payroll Noncash
			(Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person
_ _		s ———	Payroll Noncash (Complete Part II for noncash
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	contribution) (d) Type of contribution
			Person Payroll Noncash
			(Complete Part II for noncash contribution)

Schedule B (Form 99	90, 990-EZ, or 990-PF) (2016)		Page 3
Name of organizatio		Employer ident	ification number
	TION INC	46-32	82193
Part II	Noncash Property		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u></u>		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Additional Data

Software ID:

Software Version:

EIN: 46-3282193

Name: NEWDAY USA FOUNDATION INC

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHRYSALIS HOLDINGS LLC		Person 🗸
	8160 MAPLE LAWN BLVD SUITE 300	£ 1.640.0E0	Payroll 🗌
	FULTON, MD 20759	\$ 1,649,059	Noncash \square
	Totalon, Mb20733		(Complete Part II for nonca contribution)
<u>2</u>			Person 🗸
=	JERRY JOHNSON 1075 GREEN VALLEY ROAD		Payroll 🗌
		\$ 12,500	Noncash \square
	BRYN MAWR, PA19010		(Complete Part II for nonca contribution)
_			Person 🗸
<u>3</u>	REGINA LOWRIE		Payroll 🗌
	155 INVERNESS DRIVE	\$ 12,500	Noncash \Box
	BLUEBELL, PA19422		(Complete Part II for nonca contribution)
_			Person 🗸
<u>4</u>	THOMAS LYNCH		Payroll 🗌
	751 EAGLE FARM ROAD	\$ 12,500	Noncash \square
	VILLANOVA, PA19085		(Complete Part II for nonce contribution)
<u>5</u>			Person 🗸
	WALTER ROLPH		Payroll 🗌
	5 VERNON LANE	\$ 12,500	Noncash \square
	MALVERN, PA 19355		(Complete Part II for nonce
			Person 🗸
<u>6</u>	PETE RETZLAFF		Payroll 🗌
	PO BOX 173	\$ 12,500	Noncash \Box
	LEDERACH, PA 19450		(Complete Part II for nonca

(a) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person BRUCE AND HELEN GIACOMA Pavroll

contribution)



Form 990 Schedule B. Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.