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# Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2017

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.

Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

Ford	alen	dar year 2016 or tax year beginning		, and ending				
Nar	ne of	foundation			A Employer identification number			
		MSONBRIDGE FOUNDATION			47-437665	3		
_		nd street (or P O box number if mail is not delivered to street	B Telephone number					
_3		ETHESDA METRO CENTER		960	301-761-4	<del></del>		
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here		
_		HESDA, MD 20814						
G	песк	all that apply: Initial return	<del></del>	rmer public charity	D 1. Foreign organization	ns, check here		
		Final return Address change	Amended return  Name change		Foreign organizations makes here and attach of the control of	neeting the 85% test,		
H (	hock	type of organization: X Section 501(c)(3) ex	<del></del>		1			
<u> </u>	_		Other taxable private founda	ition	E If private foundation st under section 507(b)(			
I Fa		rket value of all assets at end of year J Accounting		Accrual	F If the foundation is in a			
		· · · · · · · · · · · · · · · · · · ·	her (specify)		under section 507(b)(			
•		6517775 . (Part I, colu	mn (d) must be on cash t	pasis)		,		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received	6000000.		N/A	1		
	2	Check if the foundation is not required to attach Sch B			†			
	3	Interest on savings and temporary cash investments			1			
	4	Dividends and interest from securities	83821.	83821.		STATEMENT 1		
	5a	Gross rents				<u> </u>		
	b	Net rental income or (loss)			ļ			
ā	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	13		ļ	<del> </del>		
Revenue	_b	assets on line 6a	3/3/		<del> </del>	<del>                                     </del>		
Ŗ,	7	Capital gain net income (from Part IV, line 2)	2011   157	0.	· <del> </del>	+		
	9	Net short-term capital gain Income modifications	5011 /2/		<del> </del>	<del>- </del>		
	10a	Gross sales less returns	13	·	<del></del>	<del> </del>		
	١.	and allowances Less Cost of goods sold	EN.					
	J	Gross profit or (loss)						
	11	Other income						
	12	Total Add lines 1 through 11	6083821.	83821.				
) >	13	Compensation of officers, directors, trustees, etc	246860.	0.		147772.		
<b>P</b>	14	Other employee salaries and wages	31502.	0.	<del></del>	130590.		
1	ı	Pension plans, employee benefits	33853.	<u> </u>	<u> </u>	33853.		
j ĝ	I	Legal fees			<del> </del>	<u> </u>		
Expenses		Accounting fees STMT 2	6800.	0.	<del></del>	6800.		
		Other professional fees STMT 3	36499.	0.	+	36499.		
ڇَٰ `c	17	Interest Taxes	J		<del></del>	<del> </del>		
istr.	19	Depreciation and depletion		<del></del>	<del>                                     </del>	<del></del>		
d im	20	Occupancy		<del></del> I	† <del>-</del>	† · · · · · · · · · · · · · · · · · · ·		
A d	,	Travel, conferences, and meetings	1201.	0.	,	1201.		
ğ	22	Printing and publications						
ğ	23	Other expenses STMT 4	34890.	0.		34890.		
Chuc U V. Operating and Administrative	24	Total operating and administrative						
þe		expenses. Add lines 13 through 23	391614.	0.	<u> </u>	391614.		
J	ļ	Contributions, gifts, grants paid	341360.		<del> </del>	341360.		
	26	Total expenses and disbursements.	722074	^		722074		
	07	Add lines 24 and 25	732974.	0.	<u></u>	732974.		
	1	Subtract line 26 from line 12:	5350847.					
	l .	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	3330047.	83821				
		Adjusted net income (if negative, enter -0-)		00000	N/A			

For	m 99	0-PF (2016) CRIMSONBRIDGE FOUNDATION	47-	.7-4376653 Page 2			
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of			
	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	773542.	490973.	490973.		
		Savings and temporary cash investments			<del></del>		
	3	Accounts receivable -					
		Less: allowance for doubtful accounts					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts					
		Grants receivable					
	6	Receivables due from officers, directors, trustees, and other	}	}			
		disqualified persons					
	7	Other notes and loans receivable					
		Less; allowance for doubtful accounts					
şţ	8	Inventories for sale or use					
ssets		Prepaid expenses and deferred charges					
⋖	10a	Investments - U.S. and state government obligations					
	b	Investments - corporate stock					
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis	Ì				
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	investments - other STMT 6	0.	6026802.	6026802.		
	14	Land, buildings, and equipment: basis	1				
	 	Less accumulated depreciation					
	ı	Other assets (describe					
	16	Total assets (to be completed by all filers - see the			4		
_	ļ	instructions. Also, see page 1, item I)	773542.	6517775.	6517775.		
	)	Accounts payable and accrued expenses		404.			
	18	Grants payable					
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
Ē	21	Mortgages and other notes payable	<del></del>				
_	22	Other liabilities (describe	<del></del>				
		7		404			
	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	0.	404.			
		,					
S		and complete lines 24 through 26 and lines 30 and 31.	772542	6517271			
Net Assets or Fund Balances	24	Unrestricted	773542.	6517371.			
ala	25	Temporarily restricted	· · · · · · · · · · · · · · · · · · ·				
Ö	26	Permanently restricted	<del></del>				
Ē	}	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
ğ	27	Capital stock, trust principal, or current funds					
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<del></del>				
Ass	29	Retained earnings, accumulated income, endowment, or other funds	<del></del>				
et/	30	Total net assets or fund balances	773542.	6517371.			
Z	30	Total liet assets of fully paralless	7733 ± 2.	0317371.			
	31	Total liabilities and net assets/fund balances	773542.	6517775.			
_				<u> </u>			
P	art	Analysis of Changes in Net Assets or Fund Ba	aiances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30				
		st agree with end-of-year figure reported on prior year's return)		<u>  1</u>	773542.		
2		r amount from Part I, line 27a		2	5350847.		
		r increases not included in line 2 (itemize)   UNREALIZED (	GAIN ON INVEST	MENTS 3	418917.		
4	Add	lines 1, 2, and 3	——————————————————————————————————————	4	6543306.		
5	Decr	eases not included in line 2 (itemize)	SEE STA	TEMENT 5 5	25935.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	6517371.		
					Form <b>990-PF</b> (2016)		

(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 ac - Purch ) - Dona	quired = -{ nase ition	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a									
b NC	NE								
<u>C</u>									
<u>d</u>	<del> </del>								
<u>e</u>	(f) Depreciation	n allowed (a)	Cost or other basis		<u> </u>		(h) Gain or (loss	<u> </u>	
(e) Gross sales price	(or allow		us expense of sale		1		(e) plus (f) minus		
a	a								
b									
<u>C</u>									
<u>d</u>	ļ				<del> </del>			<del></del>	
Complete only for assets show	na asin in column (h	) and owned by the founds	tion on 12/21/60			40.4	2 (0.1 (5)	<del></del>	
Complete only for assets showi	(j) Adjuste	<del></del>	) Excess of col. (i)		ł	còl. (	Gains (Col. (h) gain k), but not less tha	n -0-) <b>or</b>	
(i) F.M.V. as of 12/31/69	as of 12/		over col. (j), if any			`	Lösses (from col. (	(h)) ´	
a									
b									
C									
d								<del></del>	
<u>e</u>	<u> </u>				<u> </u>				
n O		f gain, also enter in Part I, I		J	1 . 1				
2 Capital gain net income or (net c	•	f (loss), enter -0- in Part I,	line 7	3	2		<del></del>		
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8		tions 1222(5) and (6):		٦	1 1				
If (loss), enter -0- in Part I, line 8				þ	3				
Part V Qualification (	<b>Inder Section</b>	4940(e) for Reduc	ed Tax on Ne	t Inv	estm	ent Inco	me		
Was the foundation liable for the seing "Yes," the foundation does not qual Enter the appropriate amount in	alify under section 49	40(e). Do not complete thi	s part.					Yes X No	
(a) Base period years Calendar year (or tax year beginn	ana in) Adjust	(b) ed qualifying distributions	Net value of n	( <b>c</b> ) ioncha		use assets	Distrit	(d) oution ratio uded by col. (c))	
2015	1119 1117	301458		382809			(05:: (0) 0:::000 0) 00:: (0))		
2014									
2013									
2012							<u> </u>		
2011							<del> </del>		
O Tatal of line 4 column (d)								707100	
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the</li></ul>	5-year hasa period -	. divide the total on line 2 h	v 5. or by the number	ar of w	aare		2	.787489	
the foundation has been in exist	- ,		y J, Or by the namb	si Oi yi	cars		3	.787489	
the foundation has been in onler		<del>-</del> •						<u></u>	
4 Enter the net value of noncharita	ble-use assets for 20	16 from Part X, line 5					4	6377554	
5 Multiply line 4 by line 3							5	5022254	
C. Enter 10/ of not investment inco	ma (40/ af Dart I line	. 07h)						838	
6 Enter 1% of net investment inco	me (1% of Part I, line	270)					6	030	
7 Add lines 5 and 6							7	5023092	
· · · · · · · · · · · · · · · · · · ·									
8 Enter qualifying distributions fro	m Part XII, line 4						8	732974	
If line 8 is equal to or greater tha	ın line 7, check the b	ox in Part VI, line 1b, and c	omplete that part us	ing a 1	1% tax r	ate.			
See the Part VI instructions.									

	990-PF (2016) CRIMSONBRIDGE FOUNDATION 47-437 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	<u>5653</u> instru	ıctio	Page 4
L	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		16	76.
	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).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		16	76.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		16	76.
6	Credits/Payments:			
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 1200.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
đ	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments. Add lines 6a through 6d			00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			<u>35.</u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 7 > 9		5	<u>11.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax			
	rt VII-A Statements Regarding Activities	т—	12.	
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	<u>1a</u>	ļ	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	j '		ŀ
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	) '		
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.	) '		]
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. > \$			v
	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities.	2_		X
	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		v
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
	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	X	
	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	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MD	}		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
	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		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
	Fo	orm <b>99</b> 0	)-PF	(2016)

Pa	irt VII-A Statements Regarding Activities (continued)							
			Yes	No				
11	1 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		X				
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		X				
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>				
	Website address ► <u>WWW.CRIMSONBRIDGE.ORG</u>		400					
14	The books are in care of ► INTENTIONAL PHILANTHROPY LLC Telephone no. ► 301-7							
	Located at ► 3 BETHESDA METRO CENTER STE 960, BETHESDA, MD ZIP+4 ►2	<u> 1814</u>		<del></del>				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here  and enter the amount of tax-exempt interest received or accrued during the year    15	3.7	/3	ـــا٠				
16	and enter the amount of tax-exempt interest received or accrued during the year  At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	TA	/A Yes	No				
10	securities, or other financial account in a foreign country?	16	163	X				
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	19		-21				
	foreign country	ı		1				
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<del>'</del>				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No				
18	During the year did the foundation (either directly or indirectly):			}				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?							
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)							
	a disqualified person?							
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			ļ				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  X Yes No			ļ				
	(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)?  Yes X No							
	for the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception. Check "No"							
	if the foundation agreed to make a grant to or to employ the official for a period after							
	termination of government service, if terminating within 90 days.)							
ŧ	of fany answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)?	1b		X				
	Organizations relying on a current notice regarding disaster assistance check here							
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected							
	before the first day of the tax year beginning in 2016?	10		_X_				
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			ì				
	defined in section 4942(j)(3) or 4942(j)(5)):							
ā	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?	1	!					
	If "Yes," list the years >							
L	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.)  N/A	2b						
	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.							
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time							
	during the year?							
t	olf "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)  N/A	3b		77				
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X				
t	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?	4b		Х				
		- 40 QQ(	DE					

orm 990-PF (2016) CRIMSONBRIDGE FOUNDATION			<u>47-43766</u>	<u>53</u>	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es X No		- ]
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indir	ectly,		j	1
any voter registration drive?		Ye	es X No	ĺ	}
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>	Ye	es X No	ļ	ł
(4) Provide a grant to an organization other than a charitable, etc., organization					- {
4945(d)(4)(A)? (see instructions)		Y6	s X No	ı	į.
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or				l
the prevention of cruelty to children or animals?	or outside purposses, or		es X No	ı	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the excentions described		3 (12)		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	in riogulations	N/A	5b	]
Organizations relying on a current notice regarding disaster assistance check hi	•			<del></del>	+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		unad		1	}
				- 1	1
expenditure responsibility for the grant?		1/A	es L No	ţ	Į
If "Yes," attach the statement required by Regulations section 53.4945	, ,				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on	<del></del>	( <b>50</b> )	1	
a personal benefit contract?		└── \ Y€	es X No	1	1
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		}	6b	X
If "Yes" to 6b, file Form 8870.				}	1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	<u></u>
Part VIII Information About Officers, Directors, Truste	es, Foundation Ma	nagers, Highly	<b>y</b>		
Paid Employees, and Contractors	<del></del>	<del></del>	<del></del>		
1 List all officers, directors, trustees, foundation managers and their	<del></del>	14.00	(4)		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	xpense nt, other
(a) Name and address	to position	enter -0-)	compensation	allow	ances
		}		İ	
			l	{	
SEE STATEMENT 10		246860.	0.		0.
				1	
				1	
				ŀ	
				ĺ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	L		
	(b) Title, and average		(d) Contributions to	(e) E)	rpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	accour	nt, other rances
NONE	acvoted to position	<del> </del>	compensation	4/1011	anocs
NONE				}	
		<del> </del>	<del></del>	<del> </del>	
<del></del>				ĺ	
<del></del>		<del> </del>		<del></del>	
				1	
	<del></del>	<del> </del>	<del> </del>	<b>——</b>	
			1	ļ	
		ļ		<b></b>	
<del></del>		]		l	
		<u></u>		L	
Total number of other employees paid over \$50,000		<u></u> .	▶⊥		0
			Earm	QQA_DE	(2016)

Form **990-PF** (2016)

0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	2609424.
	Average of monthly cash balances	1b	3865250.
	Fair market value of all other assets	1c	<u></u>
	Total (add lines 1a, b, and c)	1d	6474674.
	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6474674.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	97120.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6377554.
6	Minimum investment return. Enter 5% of line 5	6	318878.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	id certain	
	foreign organizations check here  and do not complete this part.)	•	
1	Minimum investment return from Part X, line 6	1	318878.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	1676.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	317202.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	317202.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	317202.
	art XII Qualifying Distributions (see instructions)	<del></del>	
	art Air addainying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	732974.
	Program-related investments - total from Part IX-B	1b	0.
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:		
а	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	732974.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	732974.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for t	he section
	4940(e) reduction of tax in those years.		

Undistributed Income (see instructions) Part XIII (a) (b) (c) (d) 2015 Years prior to 2015 2016 Corpus 1 Distributable amount for 2016 from Part XI, 317202. line 7 2 Undistributed income, if any, as of the end of 2018 0. a Enter amount for 2015 only **b** Total for prior years: 0 3 Excess distributions carryover, if any, to 2016: a From 2011 **b** From 2012 c From 2013 d From 2014 e From 2015 288558. 288558 f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, line 4: ► \$ 732974. 0 a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 317202. d Applied to 2016 distributable amount 415772 e Remaining amount distributed out of corpus 0. Excess distributions carryover applied to 2016 f an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 704330 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 0. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b. Taxable amount - see instructions 0. e Undistributed income for 2015. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must 0. 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 0 may be required - see instructions) Excess distributions carryover from 2011 0 . not applied on line 5 or line 7 Excess distributions carryover to 2017. 704330. 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 288558. d Excess from 2015

623581 11-23-16

e Excess from 2016

Form **990-PF** (2016)

3 Grants and Contributions Paid During the Y		Payment		<del></del>
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<del></del>	or substantial contributor	recipient	**	
a Paid during the year				
BEACON FOR ADULT LITERACY	NONE	₽C	TO FUND ENGLISH	
9535 LINTON HALL RD	1		LANGUAGE PROGRAMS FOR	
BRISTOW, VA 20136		<del></del>	ADULT IMMIGRANTS	500
CHILD TRENDS	NONE	PC	TO PRODUCE A RESEARCH	
7315 WISCONSIN AVE STE 1200W	[		BASED REPORT FOR	
BETHESDA, MD 20814			SOCIAL SERVICE	
			PROVIDERS ON REACHING	
			OUT AND ENGAGING WITH	2536
GEORGETOWN UNIVERSITY	NONE	PC		
3700 O ST NW			TO SUPPORT THE	
WASHINGTON, DC 20057		1	CRIMSONBRIDGE	
			LEADERSHIP FUND	6000
CITY BLOSSOMS	NONE	PC	TO SUPPORT COACHING	
516 KENNEDY ST NW			AND SUCESSION PLANNING	
WASHINGTON DC 20011	ļ			200
LITERACY COUNCIL OF MONTGOMERY COUNTY	NONE	₽C	TO FUND ENGLISH	
21 MARYLAND AVE STE 320	HONE		LANGUAGE PROGRAMS FOR	
ROCKVILLE MD 20850		l	ADULT IMMIGRANTS	500
	TINUATION SHEE	ET(S)	ADOLIT IMMIGRANIS	34136
b Approved for future payment				
NONE				
	<del> </del>	<u> </u>		
Total			<b>▶</b> 3b	

Part XVI-A	Analy	sis of	Income	-Producing	Activities

inter gross amounts unless otherwise indicated.	Unrelated	ousiness income		by section 512, 513, or 514	(e)	
•	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a	_	<del></del>				
b	_	<del></del>				
<u> </u>	_				<del></del>	
d	- <del> </del>	<del></del>			<del></del> -	
e	-	<del></del>	<del>-}</del> -			
Fore and contracts from any comment consider	-		<del></del>		<del></del>	
g Fees and contracts from government agencies	<b> </b>					
2 Membership dues and assessments	<del> </del>	<del></del>			<del></del>	
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	83821.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property	LL					
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a	_					
b	1	<del></del>				
c	) i					
d	_				· · · · · · · · · · · · · · · · · · ·	
e	_					
12 Subtotal. Add columns (b), (d), and (e)			0.	83821.		
13 Total. Add line 12, columns (b), (d), and (e)				13	83821.	
(See worksheet in line 13 instructions to verify calculations.)	)					

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2016)

	I AVII	Exempt Organ	_	31613 10 6	ind Transactions		inps with Non	orial itable	7	
1	Did the c	<del></del>		of the followin	n with any other organizati	on described in sect	on 501(c) of		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										, <del></del>
a Transfers from the reporting foundation to a noncharitable exempt organization of:										ł
_	(1) Cas	•			1a(1)	1	X			
(2) Other assets								1a(2)		Х
b Other transactions:										
(1) Sales of assets to a noncharitable exempt organization								16(1)		X
	(2) Pur	chases of assets from a no	ncharitable exempt o	rganization				1b(2)		X
	(3) Ren	tal of facilities, equipment,	or other assets					1b(3)		X
	(4) Reir	mbursement arrangements	•					1b(4)		X
	(5) Loa	ns or loan guarantees						1b(5)		X
	(6) Perf	formance of services or me	embership or fundrais	sing solicitatio	ns			1b(6)		X
		of facilities, equipment, ma						<u>1c</u>		X
đ					dule. Column (b) should a				ets,	
					ed less than fair market val	ue in any transactior	or sharing arrangen	nent, show in		
(-)		(d) the value of the goods,				1 (1)				
(a)L	ine no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transaction	s, and sharing an	angeme	nts
		<del></del>	}	N/A		<del></del>				
		<del></del>	}		<del></del>	<del></del>				
		<del></del>	<del> </del>			<del></del>	<del> </del>			
			<del>                                     </del>		<del></del>	<del></del>	<del></del>			
			<del></del>			<del></del>	· · · · · · · · · · · · · · · · · · ·			
		<del></del>	<del>                                     </del>							
		····	<del> </del>			<del></del>				
		· · · · · · · · · · · · · · · · · · ·	<del> </del>		<del></del>					
					<del></del>					
					<del></del>			<del></del>		
						<del></del>				
		<del></del>	1							
			L							
2a	is the fo	undation directly or indirec	ctly affiliated with, or r	elated to, one	or more tax-exempt organ	izations described				_
	ın sectio	n 501(c) of the Code (othe	er than section 501(c)	(3)) or in sect	ion 527?			Yes	X	No
<u>b</u>	if "Yes,"	complete the following sch					<del></del>			
		(a) Name of or	ganization		(b) Type of organization	<del>                                     </del>	(c) Description of rela	ationship		
		N/A				<del></del>				
						<del> </del>				<del>-</del>
					<del></del>	<del></del>				
					<del></del>	<del></del>		<del></del>		
	Und	er penalties of perjury, I declare	that I have examined thi	s return, includir	g accompanying schedules an	d statements, and to the	best of my knowledge			
Si	gn and	belief, it is true, correct, and co	mplete Declaration of pr	eparer (other tha	n taxpayer) is based on all infor	mation of which prepare	r has any knowledge	May the IRS of return with the	prepare	er
He	ere		n_		16/21/17	PRESI	тияс	shown below X Yes		No
	Sig	gnature of officer or truster	 e		Date	Title				
		Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check if   f	PTIN		
				M	my da		self- employed			
	aid	YALE J. KA	APLAN			6/10/17		P00487		
	eparer	111110110110	LAN COMPA	MA, A.	С.		Firm's EIN ► 52	-17312	39	
U	se Only	·								
					STREET, STE	306			_	
		RC	OCKVILLE,	MD 208	50	<del></del>	Phone no. 301			
								Form <b>990</b>	ニピティ	/Ontel

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2016

Name of the organization Employer identification number CRIMSONBRIDGE FOUNDATION 47-4376653 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 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 33 1/3% 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 Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of òr	ganization		Employer identification number
<u>CRIMS</u>	ONBRIDGE FOUNDATION		47-4376653
Part I	Contributors (See instructions) Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
1	IMPACT VENTURES LLC  77 S. WASHINGTON ST., STE 306  ROCKVILLE, MD 20850	\$60000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

623452 10-18-16

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

Employer identification number

## CRIMSONBRIDGE FOUNDATION

47-4376653

Part II	Noncash Property (See instructions) Use duplicate copies of Part	t 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
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		     s	

Employer identification number

<u>CRIMSO</u>	ONBRIDGE FOUNDATION		47-4376653		
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of completing Part III, enter the total of exclusively religiou	columns (a) through (e) and the following	n section 501(c)(7), (8), or (10) that total more than \$1,000 for		
	Use duplicate copies of Part III if addition	is, chartable, etc., contributions of \$1,000 or le al space is needed.	ess for the year (cinci uns and once)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
<u> </u> 		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(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, a	-	Relationship of transferor to transferee		
(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, a	nd ZIP + 4	Relationship of transferor to transferee		
(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, a		Relationship of transferor to transferee		

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	======
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
	Si dabotantiai contributor	100,000	<del>                                     </del>	
LATINO STUDENT FUND	NONE	PC	TO SUPPORT THE ACCESS	
3480 WOODLEY RD NW	,		AND LISTO RAPIDO	
WASHINGTON, DC 20016		ļ	PROGRAMS	3250
SERVING OUR CHILDREN	NONE	PC	TO SUPPORT	
1615 L ST NW STE 750	}		SCHOLARSHIPS	
WASHINGTON, DC 20036				10000
WASHINGTON ENGLISH CENTER	NONE	PC	TO FUND ENGLISH	
2200 CALIFORNIA ST NW			LANGUAGE PROGRAMS FOR	
WASHINGTON, DC 20008	-	<del></del>	ADULT IMMIGRANTS	5000
BOSTON COLLEGE	NONE	PC	TO SUPPORT THE	
140 COMMONWEALTH AVE	)	j	NATIONAL SUMMIT ON	
CHESTNUT HILL, MA 02467			CATHOLIC SCHOOLS &	
			HISPANIC FAMILIES	500
TEACH FOR AMERICA	NONE	PC	TO SUPPORT THE	
1805 7TH ST NW		1	CTTL/TFA LEADERSHIP	
WASHINGTON, DC 20001		1	ACADEMY AND	
		<del> </del>	COLLABORATIVE	2000
LA COCINA	NONE	PC	TO FUND ENGLISH	
1500 N GLEBE RD			LANGUAGE PROGRAMS FOR	
ARLINGTON, VA 22207		<del> </del>	ADULT IMMIGRANTS	10000
ST. ANDREW'S EPICOPAL SCHOOL, CTTL	NONE	PC	TO SUPPORT THE	
8804 POSTOAK RD			CTTL/TFA LEADERSHIP	
POTOMAC, MD 20854	Į.		ACADEMY AND	
		<del> </del>	COLLABORATIVE	20000
ROCK CREEK CONSERVANCY INC	NONE	PC	GENERAL SUPPORT	
4300 MONTGOMERY AVE STE 304				
BETHESDA, MD 20814		<del> </del>	<del></del>	500
GIRL SCOUT COUNCIL OF THE NATION'S	NONE	PC	GENERAL SUPPORT	
CAPITAL			1	
4301 CONNECTICUT AVE NW STE M-2		1		
WASHINGTON, DC 20008	<del></del>	<del> </del>	<del></del>	500
GIRLS ON THE RUN OF MONTGOMERY	NONE	PC	GENERAL SUPPORT	
COUNTY, MD				
11821 PARKLAWN DR STE 105		1	1	
ROCKVILLE, MD 20852			<del></del>	500
Total from continuation sheets				244000

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
PRINCE GEORGE'S COMMUNITY COLLEGE	NONE	₽C	TO FUND ENGLISH	
FOUNDATION INC	,,,,,,,		LANGUAGE PROGRAMS FOR	
301 LARGO ROAD			ADULT IMMIGRANTS	
LARGO, MD 20774		j		20000
GEORGETOWN UNIVERSITY	NONE	PC	TO SUPPORT WEBSITE	
3700 O ST NW			DEVELOPMENT	
WASHINGTON, DC 20057		<u> </u>		30000
		}		
			1	
	+	<del> </del>		
			1	
	<del> </del>	<del> </del>		
	<del></del>			
		}		
	<del> </del>			
		1		
			}	
<del></del>				
		}		
	<u> </u>	1		
Total from continuation sheets				

CRIMSONBRIDGE FOUNDATION	<u>47-4376653</u>
CRIMSONBRIDGE FOUNDATION  Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - CHILD TRENDS	
TO PRODUCE A RESEARCH BASED REPORT FOR SOCIAL SERVICE PRO	OVIDERS ON
REACHING OUT AND ENGAGING WITH THE HISPANIC COMMUNITY	
	· · · · · · · · · · · · · · · · · · ·
	<del></del>
	<del></del>
	·

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUI	RITIESS'	ratement 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		
FIDELITY ACCOUNT	83821	•	0. 83821	83821.	
TO PART I, LINE 4	83821		0. 83821	83821.	
FORM 990-PF		ACCOUNTI	NG FEES	S	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
KAPLAN COMPANY PC - ACCOUNTING & TAX SEE	 RVICES	6800.	0.		6800.
TO FORM 990-PF, PG	1, LN 16B	6800.	0.		6800.
FORM 990-PF	0':	THER PROFES	SIONAL FEES	St	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INTENTIONAL PHILANTI LLC - FOUNDATION MGI SUPPORT SVCS		24900.	0.		24900.
SUREPAY PAYROLL PROCLAURIE HUNDERTMARK	_	1431.	0.		1431.
GRANTS ADMINISTRATIO	МС	10168.	0.		10168.
TO FORM 990-PF, PG	1, LN 16C	36499.	0.		36499.

	OLUEK F	XPENSES		STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
CONFERENCES AND EVENTS	9094.		0.	9094
INSURANCE	2750.		0.	2750
ASSOCIATION DUES	1750.		0.	1750
OFFICE EXPENSES	2155.		0.	2155
TELEPHONE	1601.		0.	1601
WEBSITE BANK CHARGES AND OTHER COSTS	17535. 5.		0. 0.	17535 5
DAM CHANGED AND OTHER CODID		. <del></del>	·	
TO FORM 990-PF, PG 1, LN 23	34890.	· <del></del>	0. <del></del>	34890
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUN	D BALANCES	STATEMENT
		<del></del>		
DESCRIPTION				TUUOMA
BOOK/TAX DIVIDEND RECOGNITION	TIMING DIF	FERENCE		25935
TOTAL TO FORM 990-PF, PART II	I, LINE 5			25935
FORM 990-PF	I, LINE 5 OTHER INV	ESTMENTS		25935 STATEMENT
	OTHER INV	LUATION	BOOK VALUE	
FORM 990-PF	OTHER INV VA M	LUATION	BOOK VALUE 6026802.	STATEMENT (
FORM 990-PF  DESCRIPTION	OTHER INV	LUATION ETHOD		STATEMENT (FAIR MARKET VALUE
FORM 990-PF  DESCRIPTION  BROKER ACCOUNT  TOTAL TO FORM 990-PF, PART II	OTHER INV	LUATION ETHOD	6026802.	STATEMENT  FAIR MARKET  VALUE  6026802

FORM 990-PF	LA'	re PA	YMENT PI	ENALT	Y ====	_ =_ 1. 1.=	STAT	EMENT	
DESCRIPTION	DAT	E	MOUN	r	BALANC	CE I	MONTHS	PENAL	ΤY
TAX DUE DATE FILED	05/15 06/30		•	476.		476. 476.	2		5.
TOTAL LATE PAYMENT PENAI	LTY						:		5.
FORM 990-PF	LA'	re pa	YMENT II	NTERE:	ST		STAT	EMENT	9
DESCRIPTION	DATE	IOMA	UNT	BAL	ANCE	RATE	DAYS	INTER	ESI
	5/15/17 6/30/17		476.		476. 478.	.040	0 46		2.
TOTAL LATE PAYMENT INTER	REST								2.
				ים דים		Y	ሮሞልጥ	EMENT	1(
TRI	VIII - LI USTEES AN	D FOU		MANA(	GERS	E1 1- B1	MPLOYEE EN PLAN CONTRIB	EXPEN	SE
TRI	JSTEES AN	D FOUI	NDATION	MANA	COMPEN SATION	E1 B1	MPLOYEE EN PLAN	EXPEN ACCOU	SE
NAME AND ADDRESS  DANIELLE REYES 3 BETHESDA METRO CENTER BETHESDA, MD 20814  GABRIELA SMITH 3 BETHESDA METRO CENTER	JSTEES AND	PRI	TITLE AND VRG HRS	MANA	COMPENSATION CTOR	E1 B1	MPLOYEE EN PLAN CONTRIB	EXPEN ACCOU	SE NT 0
NAME AND ADDRESS  DANIELLE REYES 3 BETHESDA METRO CENTER BETHESDA, MD 20814  GABRIELA SMITH 3 BETHESDA METRO CENTER BETHESDA, MD 20814	, STE 960	PRI	TITLE AND VRG HRS ECUTIVE 32.00	MANA	COMPENSATION CTOR	EI I BI I (	MPLOYEE EN PLAN CONTRIB	EXPEN	O .
NAME AND ADDRESS  DANIELLE REYES 3 BETHESDA METRO CENTER BETHESDA, MD 20814  GABRIELA SMITH 3 BETHESDA METRO CENTER BETHESDA, MD 20814  ADRIANNA SMITH 3 BETHESDA METRO CENTER BETHESDA, MD 20814  BRENDON SMITH 3 BETHESDA METRO CENTER	, STE 960 , STE 960	PRI DII	TITLE AND VRG HRS ECUTIVE 32.00 ESIDENT 30.00 RECTOR	MANA	COMPENSATION CTOR	772.	MPLOYEE EN PLAN CONTRIB 0.	EXPEN	0.
NAME AND ADDRESS  DANIELLE REYES 3 BETHESDA METRO CENTER BETHESDA, MD 20814  GABRIELA SMITH 3 BETHESDA METRO CENTER BETHESDA, MD 20814  ADRIANNA SMITH 3 BETHESDA METRO CENTER BETHESDA, MD 20814  BETHESDA, MD 20814	, STE 960 , STE 960	PRI DII	TITLE AND VRG HRS ECUTIVE 32.00 ESIDENT 30.00 RECTOR 0.00 RECTOR 0.00	MANA	COMPENSATION CTOR 1477 RECTOR	772.	MPLOYEE EN PLAN CONTRIB 0.	EXPEN	SE

## PART XIII - UNDISTRIBUTED INCOME

STATEMENT 11

### START-UP PERIOD MINIMUM DISTRIBUTION SCHEDULE

THE FOUNDATION WAS FORMED IN 2015 AND IS CONSIDERED TO BE IN ITS START-UP PERIOD PURSUANT TO REG. 53-4942(A)-3(B)(4)(III).

	DISTRIBUTABLE				(EXCESS)
	AMOUNT	REQUIRED	REQUIRED		UNDISTRIBUTED
TAX	PART XI,	START-UP	START-UP	ACTUAL	START-UP
YEAR	LINE 7	PERCENT	DISTRIBUTION	DISTRIBUTIONS	DISTRIBUTION
2015	QUALIFYING DISTR	IBUTIONS			(301,458)
2016	317,202	20%	63,440	732,974	(669,534)
					(970,992)