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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation ROBERT N ALFANDRE FOUNDATION		A Employer identification number 52-1107949	
% NICOLE A HALBREINER			
Number and street (or P O box number if mail is not delivered to street address) P O BOX 2069	Room/suite	B Telephone number (see instructions) (703) 471-6366	
City or town, state or province, country, and ZIP or foreign postal code RESTON, VA 201950069		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 4,753,947	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part 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) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	200,275			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	14,768	14,768		
	4 Dividends and interest from securities . . . . .	72,594	72,594		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-19,815			
	b Gross sales price for all assets on line 6a 477,683				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	642	642		
	12 Total. Add lines 1 through 11 . . . . .	268,464	88,004		
	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	2,500	0	0	0
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .				
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	417			
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	2,917	0	0	0
	25 Contributions, gifts, grants paid . . . . .	224,810			224,810
	26 Total expenses and disbursements. Add lines 24 and 25	227,727	0	0	224,810
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	40,737			
	b Net investment income (if negative, enter -0-)		88,004		
c Adjusted net income (if negative, enter -0-)					

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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing . . . . .	341,245	325,005	325,005		
	2	Savings and temporary cash investments . . . . .	100,000	100,000	100,000		
	3	Accounts receivable ▶ <u>6,606</u>					
		Less allowance for doubtful accounts ▶ _____	1,988	6,606	6,606		
	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) . . . . .	4,190,174	2,772,408	2,552,907		
	c	Investments—corporate bonds (attach schedule) . . . . .					
	11	Investments—land, buildings, and equipment basis ▶ _____					
	Less accumulated depreciation (attach schedule) ▶ _____						
12	Investments—mortgage loans . . . . .		1,716,000	1,716,000			
13	Investments—other (attach schedule) . . . . .						
14	Land, buildings, and equipment basis ▶ _____						
	Less accumulated depreciation (attach schedule) ▶ _____						
15	Other assets (describe ▶ _____)	85,328	53,429	53,429			
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	4,718,735	4,973,448	4,753,947			
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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
	Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>					
24		Unrestricted . . . . .	4,932,533	4,973,448			
25		Temporarily restricted . . . . .					
26		Permanently restricted . . . . .					
<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 27 through 31.</b>							
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		<b>Total net assets or fund balances</b> (see instructions) . . . . .	4,932,533	4,973,448			
31		<b>Total liabilities and net assets/fund balances</b> (see instructions) .	4,932,533	4,973,448			

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	4,932,533
2	Enter amount from Part I, line 27a . . . . .	2	40,737
3	Other increases not included in line 2 (itemize) ▶ _____	3	178
4	Add lines 1, 2, and 3 . . . . .	4	4,973,448
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	4,973,448

**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 )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(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)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

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	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; font-size: small;">             { If gain, also enter in Part I, line 7              If (loss), enter -0- in Part I, line 7           } </div>	<b>2</b>	-19,815
<b>3</b> 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	<b>3</b>	

**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	237,024	4,561,948	0 051957
2014	169,670	4,803,352	0 035323
2013	132,985	3,425,661	0 03882
2012	150,704	3,217,531	0 046838
2011	165,404	3,011,010	0 054933

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 227871
<b>3</b> 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	<b>3</b>	0 045574
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	4,592,726
<b>5</b> Multiply line 4 by line 3	<b>5</b>	209,309
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	880
<b>7</b> Add lines 5 and 6	<b>7</b>	210,189
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	224,810

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)**

<b>1a</b>	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>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	880
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	880
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	880
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	1,448
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	1,448
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	568
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> 568 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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?	<b>1a</b>	No
<b>b</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>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> 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>	<b>2</b>	No
<b>3</b> 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>	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> 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> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> DC		
<b>b</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> .	<b>8b</b>	No
<b>9</b> 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> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>NICOLE A HALBREINER</u> Telephone no ► <u>(703) 471-6366</u>			

Located at ► P O BOX 2069 RESTON VA ZIP+4 ► 20195

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	► <b>15</b>		
<b>16</b>	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?	<b>16</b>	<b>Yes</b>	<b>No</b>
	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 ►			

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(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? ( <b>Exception.</b> 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>b</b>	If any 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)?		<b>1b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . .	► <input type="checkbox"/>		
<b>c</b>	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?		<b>1c</b>	<b>No</b>
<b>2</b>	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))			
<b>a</b>	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>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions).		<b>2b</b>	<b>No</b>
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
<b>3a</b>	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>b</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).		<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		<b>4a</b>	<b>No</b>
<b>b</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?		<b>4b</b>	<b>No</b>

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

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(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
NICOLE HALBREINER P O BOX 2069 RESTON, VA 201950069	PRESIDENT 0	0	0	0
DOMINIQUE PALMER P O BOX 2069 RESTON, VA 201950069	VICE PRESIDENT 0	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
<b>Total number of other employees paid over \$50,000.</b> . . . . . ▶				

**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
<b>Total</b> 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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	



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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	4,229,541
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	433,125
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	4,662,666
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	4,662,666
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	69,940
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	4,592,726
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	229,636

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	229,636
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	880
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	880
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	228,756
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	228,756
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	228,756

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	224,810
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	224,810
<b>5</b>	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).	<b>5</b>	880
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	223,930

**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
<b>1</b> Distributable amount for 2016 from Part XI, line 7				228,756
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			224,815	
<b>b</b> Total for prior years 2014, 2013, 2012		137,000		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .				
<b>b</b> From 2012. . . . .				
<b>c</b> From 2013. . . . .				
<b>d</b> From 2014. . . . .				
<b>e</b> From 2015. . . . .				0
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 224,810				
<b>a</b> Applied to 2015, but not more than line 2a			224,810	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2016 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		137,000		
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		137,000		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			5	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				228,756
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .				
<b>b</b> Excess from 2013. . . . .				
<b>c</b> Excess from 2014. . . . .				
<b>d</b> Excess from 2015. . . . .				
<b>e</b> Excess from 2016. . . . .	0			

**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 ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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) )  
See Additional Data Table

**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 ☒ 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 email address of the person to whom applications should be addressed

**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)				
<b>a</b> <i>Paid during the year</i> CHARITIES-SEE ATTACHED 165 W 46TH STREET SUITE 1300 NEW YORK, NY 10036			ALL GRANTS ARE FOR CHARITABLE PURPOSES	224,810
<b>Total . . . . .</b>			<b>▶ 3a</b>	224,810
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	

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	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .					
<b>4</b> Dividends and interest from securities. . . . .					
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . .					
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					

(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  
Here**

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.

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

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  ARLEEN TRUNDY CPA	Preparer's Signature	Date  2017-05-11	Check if self-employed ▶ <input type="checkbox"/>	PTIN  P00734145
Firm's name ▶ Arleen Trundy CPA LLC				Firm's EIN ▶
Firm's address ▶ 540 Utterback Store Rd  Great Falls, VA 22066				Phone no (703) 450-7113

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 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 )
800 CELGENE CORP		2014-06-12	2016-11-14
600 ISHARES IBOXX INVEST GR		2012-05-30	2016-12-05
1500 ISHARES S&P US PFD STK IDX		2012-05-30	2016-12-05
1000 ISHARES 20+ YR TREASURY BOND		2015-01-26	2016-11-30
2000 SOUTHERN CO		2012-05-30	2016-11-14
499 TALEN ENERGY CORP		2012-02-22	2016-12-06
2000 WESTERN ASSET GLOBAL HIGH		2012-02-23	2016-12-05
2500 WESTERN ASSET HIGH INC		2012-02-22	2016-12-05
550 VANGUARD NATURAL RESOURCES LP		2014-06-12	2016-03-22

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
95,685		64,170	31,515
69,393		70,394	-1,001
55,236		58,511	-3,275
119,667		135,264	-15,597
94,498		91,877	2,621
6,986		7,874	-888
18,542		26,681	-8,139
16,943		25,352	-8,409
733		17,375	-16,642

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) 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	
			31,515
			-1,001
			-3,275
			-15,597
			2,621
			-888
			-8,139
			-8,409
			-16,642

**Form 990PF Part XV Line 1a - 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).**

NICOLE ALFANDRE HALBREINER
DOMINIQUE ALFANDRE PALMER



**TY 2016 Accounting Fees Schedule****Name:** ROBERT N ALFANDRE FOUNDATION**EIN:** 52-1107949

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	2,500			

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

## **TY 2016 Depreciation Schedule**

**Name:** ROBERT N ALFANDRE FOUNDATION

**EIN:** 52-1107949

**TY 2016 Investments Corporate Stock Schedule****Name:** ROBERT N ALFANDRE FOUNDATION**EIN:** 52-1107949

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
COMMON STOCK	1,202,360	1,077,177
CLOSED END FUNDS	453,204	358,886
MONEY FUNDS	806,140	806,140
MUTUAL FUNDS	310,704	310,704

**TY 2016 Other Assets Schedule****Name:** ROBERT N ALFANDRE FOUNDATION**EIN:** 52-1107949**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
SANTORINI INVESTMENT	100,000	100,000	100,000
MORGAN STANLEY PARTNERSHIPS	-14,672	-46,571	-46,571

**TY 2016 Other Decreases Schedule**

**Name:** ROBERT N ALFANDRE FOUNDATION  
**EIN:** 52-1107949

Description	Amount
ADJUSTMENTS FOR PY REDUCTIONS	0

**TY 2016 Other Expenses Schedule****Name:** ROBERT N ALFANDRE FOUNDATION**EIN:** 52-1107949**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISC ADMINISTRATIVE EXPENSES	417			

## TY 2016 Other Income Schedule

**Name:** ROBERT N ALFANDRE FOUNDATION

**EIN:** 52-1107949

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FEDERAL INCOME TAX REFUND	642	642	

**TY 2016 Other Increases Schedule**

**Name:** ROBERT N ALFANDRE FOUNDATION  
**EIN:** 52-1107949

Description	Amount
ADJUSTMENT FOR ADDITIONAL INCOME	178



**TY 2016 Taxes Schedule****Name:** ROBERT N ALFANDRE FOUNDATION**EIN:** 52-1107949

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EXTENSION PAYMENT				
ESTIMATE				
2014 FINAL TAXES				

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ 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 <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> ROBERT N ALFANDRE FOUNDATION	<b>Employer identification number</b> 52-1107949

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> 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 33<sup>1</sup>/<sub>3</sub>% 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).

<b>Name of organization</b> ROBERT N ALFANDRE FOUNDATION	<b>Employer identification number</b> 52-1107949
---	---

<b>Part I</b> <b>Contributors</b> (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	SCIMAR MANAGEMENT LLC	\$ 100,000	Person <input checked="" type="checkbox"/>
	P O BOX 2069		Payroll <input type="checkbox"/>
	RESTON, VA20195		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
2	ARC DEVELOPERS INC	\$ 100,000	Person <input checked="" type="checkbox"/>
	P O BOX 2069		Payroll <input type="checkbox"/>
	RESTON, VA20195		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
3	ANONYMOUS DONOR	\$ 275	Person <input checked="" type="checkbox"/>
	P O BOX 2069		Payroll <input type="checkbox"/>
	RESTON, VA20195		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Employer identification number

52-1107949

Part II	Noncash Property
---------	------------------

(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
		\$ _____	
(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
		\$ _____	

<b>Name of organization</b> ROBERT N ALFANDRE FOUNDATION	<b>Employer identification number</b> 52-1107949
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<b>Part III</b>	<b>Exclusively</b> 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 <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(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	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

**ROBERT N. ALFANDRE FOUNDATION  
2016**

<b>CHECK #</b>	<b>DATE</b>	<b>TO WHOM PAID</b>	<b>AMOUNT</b>	<b>DONATION</b>
1741	2/2/2016	AIDS Project Rhode Island P.O. Box 6688 Providence, RI 02940-6688	\$1,000.00	y
1742	3/3/2016	Teach For America - DC Region 1805 7th Street, 6th Floor Washington, DC 20001	\$500.00	y
1743	3/9/2016	amfAR 120 Wall Street, 13th Floor New York, NY 10005-3908	\$1,250.00	y
1744	3/9/2016	Doctors Without Borders 333 Seventh Avenue, 2nd Floor New York, NY 10001	\$1,000.00	y
1745	3/9/2016	French Heritage Society 14 East 60th Street New York, NY 10022	\$1,000.00	y
1746	3/9/2016	Friends of the Key West Library 1025 Fleming Street Key West, FL 33040	\$250.00	y
1747	3/9/2016	The Highwood Theatre 1434 Highwood Drive McLean, VA 22101	\$5,000.00	y
1748	3/9/2016	Lahey Hospital & Medical Center 41 Mall Road Burlington, MA 01805	\$500.00	y
1749	3/9/2016	Maryland Public Television PO Box 13183 Baltimore, MD 21203-3183	\$100.00	y
1750	3/9/2016	Sheridan-Kalorama Call Box Restoration Project 2401 Tracy Place, NW Washington, DC 20008	\$250.00	y
1751	3/9/2016	Sheridan-Kalorama Historical Association 2401 Tracy Place, NW Washington, DC 20008	\$50.00	y
1752	3/9/2016	Sheridan-Kalorama Neighborhood Council 2331 California Street, NW Washington, DC 20008	\$100.00	y
1753	3/9/2016	Washington English Center 2200 California Street, NW Washington, DC 20008	\$250.00	y

**ROBERT N. ALFANDRE FOUNDATION  
2016**

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1754	3/9/2016	Wolf Trap Foundation 1645 Trap Road Vienna, VA 22182	\$3,500.00	y
1755	3/9/2016	WPBT2 PO Box 610002 Miami, FL 33261	\$100.00	y
1756	3/9/2016	Young Concert Artists 1220 L Street, NW, Suite 100-423 Washington, DC 20005	\$250.00	y
1757	4/12/2016	Island Moving Company PO Box 746 Newport, RI 02840	\$10,000.00	y
1758	4/13/2016	The Kennedy Center Washington, DC 20566	\$10,000.00	y
1759	4/20/2016	The Kennedy Center Washington, DC 20566	\$2,600.00	y
1760	4/20/2016	Woodrow Wilson House 2340 S Street, NW Washington, DC 20008	\$500.00	y
1761	5/2/2016	The Phillips Collection (William Merritt Chase Painting Sponsorship) 1600 21st Street, NW Washington, DC 20009	\$5,000.00	y
1762	5/2/2016	SAGE 305 7th Avenue, Floor 15 New York, NY 10001-6152	\$1,000.00	y
1763	5/2/2016	FIPAP c/o Laura Hartstein 135 West 70th Street, #8B New York, NY 10023	\$2,750.00	y
1764	5/2/2016	GMHC 446 West 33rd Street New York, NY 10001-2601	\$1,000.00	y
1765	5/2/2016	Montgomery Housing Project 12200 Tech Road, Suite 250 Silver Spring, MD 20904	\$500.00	y
1766	5/2/2016	So Others Might Eat PO Box 96325 Washington, DC 20090-6325	\$250.00	y
1767	5/2/2016	FIPPOA Charitable Foundation c/o Ken Pollard	\$1,000.00	y

**ROBERT N. ALFANDRE FOUNDATION**  
**2016**

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		7 E. 14th Street, #170 New York, NY 10003		
1768	5/4/2016	George Washington University Luther W. Brady Art Gallery 805 21st Street, NW 2nd Floor Washington, DC 20052	\$3,000.00	y
1769	5/4/2016	Royal Oak Foundation 20 West 44th Street, Suite 606 New York, NY 10036-6603	\$500.00	y
1771	5/12/2016	Dancers Reponding to AIDS 165 W. 46th Street, Suite 1300 New York, NY 10036	\$2,000.00	y
1772	5/26/2016	Woodrow Wilson House 2340 S Street, NW Washington, DC 20008	\$10,000.00	y
1773	6/20/2016	LIFT-DC Perry School Community Service Center 128 M Street, NW, Suite 335 Washington, DC 20001	\$1,500.00	y
1774	7/11/2016	Echo Hill Outdoor School 13655 Bloomingneck Road Worton, MD 21678	\$1,000.00	y
1775	7/11/2016	Friends of Mitchell Park 2401 Tracy Place, NW Washington, DC 20008	\$500.00	y
1776	7/11/2016	Echo Hill Campership Fund PO Box 5923 Bethesda, MD 20824-5923	\$10,000.00	y
1777	7/11/2016	Halcyon Foundation 555 Fifth Avenue, Suite 1700 New York, NY 10017	\$300.00	y
1778	7/11/2016	Signature Theatre 4200 Campbell Avenue Arlington, VA 22206	\$600.00	y
1779	7/11/2016	Arts for the Aging 12320 Parklawn Drive Rockville, MD 20852	\$500.00	y
1780	7/11/2016	The Founders Board of Saint John's Community Services 2201 Wisconsin Avenue, NW, Suite C-150	\$250.00	y



**ROBERT N. ALFANDRE FOUNDATION  
2016**

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		Washington, DC 20007		
1781	7/11/2016	The Pines Foundation FIPPOA PO Box 5305 Fire Island Pines, NY 11782	\$1,000.00	y
1782	7/11/2016	Museum of Modern Art 11 West 53rd Street New York, NY 10019	\$85.00	y
1783	7/11/2016	Reef Relief PO Box 430 Key West, FL 33041	\$250.00	y
1784	8/9/2016	Newport Performing Arts Center PO Box 234 Newport, RI 02840	\$20,000.00	y
1785	8/9/2016	K9s For Warriors 114 Camp K9 Road Ponte Vedra, Florida 32081	\$275.00	y
1786	8/30/2016	Metropolitan Museum of Art 1000 Fifth Avenue New York, NY 10028	\$600.00	y
1787	8/30/2016	Key West Players, Inc. PO Box 724 Key West, FL 33041	\$1,250.00	y
1788	8/30/2016	The English-Speaking Union 144 East 39th Street New York, NY 10016	\$500.00	y
1789	8/30/2016	Food & Friends 219 Riggs Road, NE Washington, DC	\$500.00	y
1790	8/30/2016	Kennedy Center Washington, DC 20566	\$6,000.00	y
1791	8/30/2016	Lift Me Up! P.O. Box 104 Great Falls, VA 22066	\$500.00	y
1792	8/30/2016	Island Moving Company PO Box 746 Newport, RI 02840	\$10,000.00	y
1793	9/9/2016	AIDS Project LA 611 S. Kingsley Drive Los Angeles, CA 90005	\$5,000.00	y

**ROBERT N. ALFANDRE FOUNDATION**

**2016**

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1794	9/9/2016	AIDS Help of Monroe County, Inc. 1434 Kennedy Street Key West, FL 33040	\$1,000.00	y
1795	9/9/2016	Eryc Taylor Dance, Inc. 450 West 42nd Street, #9L New York, NY 10036	\$500.00	y
1796	10/13/2016	Alliance Francaise de Washington, DC 2142 Wyoming Avenue, NW Washington, DC 20008	\$1,500.00	y
1797	10/13/2016	All Souls Memorial Episcopal Church 2300 Cathedral Avenue, NW Washington, DC 20008-1505	\$3,000.00	y
1798	10/13/2016	Capital Caring 2900 Telestar Court Falls Church, VA 22042	\$1,000.00	y
1799	10/13/2016	Cosmos Club Foundation 2121 Massachusetts Avenue, NW Washington, DC 20008	\$500.00	y
1800	10/13/2016	Royal Oak Foundation 20 West 44th Street, Suite 606 New York, NY 10036-6603	\$150.00	y
1801	10/13/2016	Opera House Theater PO Box 234 Newport, RI 02840	\$1,000.00	y
1802	10/13/2016	Pines Care Center, Inc. PO Box 5333 Fire Island Pines, NY 11782-0959	\$3,000.00	y
1803	10/13/2016	Seabury Resources for the Aging 4201 Butterworth Place, NW Washington, DC 20016	\$100.00	y
1804	10/13/2016	Shakespeare Theatre Company 516 Eighth Street SE Washington, DC 20003	\$2,500.00	y
1805	10/13/2016	Visiting Nurse Assn and Hospice of Florida Keys 1319 William Street Key West, FL 33040	\$1,000.00	y
1806	11/30/2016	Key West Botanical Garden Society 5210 College Road Key West, FL 33040	\$300.00	y
1807	11/30/2016	Swarthmore College 500 College Road	\$10,000.00	y

**ROBERT N. ALFANDRE FOUNDATION  
2016**

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		Swarthmore, PA 19081		
1808	11/30/2016	Community MusicWorks Newport String Project 1392 Westminster Street Providence, RI 02909	\$5,000.00	y
1809	11/30/2016	Old Island Restoration Foundation, Inc. PO Box 689 Key West, FL 33041	\$500.00	y
1810	11/30/2016	VOID		
1811	11/30/2016	VOID		
1812	11/30/2016	National Gallery of Art The Circle 2000B South Club Drive Landover, MD 20785	\$2,500.00	y
1813	11/30/2016	Oak Hill Cemetery Preservation Foundation 3001 R Street, NW Washington, DC 20007-2923	\$500.00	y
1814	11/30/2016	The Studios of Key West 533 Eaton Street Key West, FL 33040	\$5,000.00	y
1815	12/22/2016	The Avalon Theatre 5612 Connecticut Avenue, NW Washington, DC 20015	\$500.00	y
1816	12/22/2016	Boys & Girls Clubs of the Keys Area, Inc 1400 United Street, Suite 108 Key West, FL 33040	\$100.00	y
1817	12/22/2016	Brookhaven Memorial Hospital Medical Center 101 Hospital Road Patchogue, NY 11772	\$1,000.00	y
1818	12/22/2016	Cosmos Club Historic Preservation Foundation 2121 Massachusetts Avenue Washington, DC 20008	\$250.00	y
1819	12/22/2016	Dumbarton Oaks Park Conservancy P.O. Box 32080 Washington, DC 20007	\$250.00	y
1820	12/22/2016	Friends of Dumbarton House 2715 Q Street, NW Washington, DC 20007	\$500.00	y
1821	12/22/2016	Eakins Press Foundation 20 West 44th Street, 405	\$1,000.00	y

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2016**

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		New York, NY 10036		
1822	12/22/2016	Historical Society of Washington DC 801 K Street, NW Washington, DC 20001	\$100.00	y
1823	12/22/2016	Key West Art & Historical Society 281 Front Street Key West, FL 33040	\$500.00	y
1824	12/22/2016	Lambda Legal 120 Wall Street, 19th Floor New York, NY 10005	\$2,000.00	y
1825	12/22/2016	New York-Presbyterian Fund, Inc. PO Box 6412 New York, NY 10277-2852	\$500.00	Y
1826	12/22/2016	People For the American Way Foundation 1101 15th Street, NW, Suite 600 Washington, DC 20005	\$1,000.00	y
1827	12/22/2016	The Phillips Collection 1600 21st Street, NW Washington, DC 20009	\$2,000.00	y
1828	12/22/2016	The Pines Foundation FIPPOA PO Box 5305 Fire Island Pines, NY 11782	\$12,500.00	y
1829	12/22/2016	Red Barn Theatre PO Box 707 Key West, FL 33041	\$1,500.00	y
1830	12/22/2016	Restore Mass Ave 2500 Mass Ave, NW, #6 Washington, DC 20008	\$250.00	y
1831	12/22/2016	Sidwell Friends School 3825 Wisconsin Avenue, NW Washington, DC 20016	\$15,000.00	y
1832	12/22/2016	Take Stock in Children 241 Trumbo Road Key West, FL 33040	\$500.00	y
1833	12/22/2016	Tennessee Williams Theatre 5901 College Road Key West, FL 33040	\$1,500.00	y
1834	12/22/2016	Trophia Butterfly Foundation P.O. Box 6623 Key West, FL 33041	\$500.00	y

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2016**

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1835	12/22/2016	Tropic Cinema PO Box 1283 Key West, FL 33041	\$1,000.00	y
1836	12/22/2016	Community Hospices of DC 3720 Upton Street, NW Washington, DC 20016	\$1,000.00	y
1837	12/22/2016	WETA 3939 Campbell Ave Arlington, VA 22206	\$1,500.00	y
1838	12/22/2016	Whitman-Walker Health 1701 14th Street, NW Washington, DC 20009	\$10,000.00	y
1839	12/23/2016	Johns Hopkins University SAIS Annual Fund 3400 North Charles Street Baltimore, MD 21218-2696	\$1,000.00	y
1840	12/23/2016	Memorial Sloan-Kettering Cancer Center 1275 York Avenue New York, NY 10017	\$1,000.00	y
1841	12/30/2016	National Trust for Northern Ireland Mount StewartGarden Fund PO Box 39 Warrington WA5 7WD NORTHERN IRELAND	\$1,500.00	y
1842	12/30/2016	The Noguchi Museum 32-37 Vernon Boulevard Long Island City, NY 11106	\$1,000.00	y
1843	12/30/2016	Washington National Cathedral Attn: Development Office 3101 Wisconsin Avenue, NW Washington, DC 20016-5098	\$500.00	y
TOTAL DONATIONS			\$224,810.00	