

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93491157005107

2016

OMB No 1545-0052

Return of Private Foundation

Form 990-PF Department of the Treasury Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2016, or tax year	beginning 01-01-20)16 , a	nd er	nding 12-31-	2016			
		ındatıon y Foundatıon				A Employer Id	entification numbe	er		
	Jeff Ar					52-1308585				
		d street (or P O box number if mail is no mouth Road	ot delivered to street address)	Room/suite		B Telephone number (see instructions)				
5	+25 Fall	mouth Road				(312) 401-8310)			
		n, state or province, country, and ZIP or ID 20816	foreign postal code			C If exemption	application is pendir	ng, check here		
G Cł	neck al	I that apply	☐ Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check h	ere		
		Final return	Amended return			-	ganizations meeting	▶ ∟		
		Address chan					k here and attach co			
H C	eck tv		501(c)(3) exempt private	foundation			undation status was n 507(b)(1)(A), chec			
		n 4947(a)(1) nonexempt charitable				under seemo	11 307 (B)(1)(A), chec	ek fiere		
I Fa	r mark	ket value of all assets at end	J Accounting method	☑ Cash ☐ Accru	ıal		ation is in a 60-mont			
		from Part II, col (c), \$ 3,052,805	Other (specify)			under sectio	n 507(b)(1)(B), ched	ck here 🕨 🗀		
,,,,,	. 10)	\$ 3,032,003	(Part I, column (d) must	be on cash basis)						
Pa	rt I	Analysis of Revenue and	Expenses (The total	(a) Revenue and		1		(d) Disbursements		
		of amounts in columns (b), (c), and (· · · · ·	expenses per	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes		
		equal the amounts in column (a) (see		books				(cash basis only)		
	1	Contributions, gifts, grants, etc , schedule)	received (attach							
	2	Check ► ✓ If the foundation is	not required to attach							
	_	Sch B	· · · · · · · · ·							
	3	Interest on savings and tempora	•							
	4	Dividends and interest from secu	ırıtıes	20,880		20,880				
	5a	Gross rents								
	Ь	Net rental income or (loss)								
Reverkie	6a	Net gain or (loss) from sale of as	ssets not on line 10	189,074	1					
	b	Gross sales price for all assets or	n li <mark>ne 6a</mark> 551,303							
\aleph	7	Capital gain net income (from Pa			189,074					
	8	Net short-term capital gain .								
	9	Income modifications								
	10a	Gross sales less returns and allow	wances							
	b	Less Cost of goods sold								
	С	Gross profit or (loss) (attach sch	edule)							
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11		209,954	ı	209,954				
	13	Compensation of officers, directo	ors, trustees, etc	80,000		0		(
	14	Other employee salaries and wag	ges							
es	15	Pension plans, employee benefits								
en s	16a	Legal fees (attach schedule) .								
Expenses	b	Accounting fees (attach schedule	2)	7,200		0		(
e E	С	Other professional fees (attach s	chedule)							
and Administrative	17	Interest								
Str	18	Taxes (attach schedule) (see inst	•	302	1	0		(
Ē	19	Depreciation (attach schedule) a	nd depletion							
Ē	20	Occupancy								
7 pu	21	Travel, conferences, and meeting	=	1,525	<u> </u>	0				
	22	Printing and publications		20.1						
<u>E</u>	23	Other expenses (attach schedule		22,169	<u> </u>	21,843		(
Operating	24	Total operating and administr	-		.[24.21-				
<u>ಹ</u>	25	Add lines 13 through 23		111,196	-	21,843		154.00		
_	25	Contributions, gifts, grants paid		154,000	<u>'</u>			154,000		
	26	Total expenses and disbursen 25	nents. Add lines 24 and	265,196	5	21,843		154,000		
	27	Subtract line 26 from line 12		255,150		22,010		15.,000		
	а	Excess of revenue over exper	nses and	-55,242	2					
	ь	disbursements Net investment income (if neg	iative enter -0-1		1	188,111				
	С	Adjusted net income(if negative	•			100,111				
Ear		work Poduction Act Notice and	<u> </u>		1		<u> </u>	000 PE (2016		

3,000

1,998,704

2,103,262

2,103,262

2,103,262

2,103,262

2,778

1,961,815

2,048,020

2,048,020

2,048,020 2,048,020

2

3 4

5

6

2,103,262

2,048,020

2,048,020 Form 990-PF (2016)

-55,242

2,778

2,966,600

3,052,805

	5
	6
	7
	-
2	8
Assets	9
As	10a

b

c

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

Less allowance for doubtful accounts -

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

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

Temporarily restricted

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

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

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

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Capital Gains	and Losses for Tax on Invest	tment Income			
	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1aSee Addıtıonal Data Tabl					
b					
С					
d					
<u>е</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis sense of sale	Gain d	h) or (loss) on minus (g)
a See Additional Data Tabl	e				
b					
С					
d					
	s showing gain in column (h) and our	anad by the foundation	on 13/31/60		′15
Complete only for assets	s showing gain in column (h) and ow	i i			(I) h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col(၊) l(j), ıf any	col (k), but not	less than -0-) or om col (h))
a See Additional Data Tabl	e				
b					
С					
d					
		If gain, also enter in F	Part I, line 7		
•	gain or (loss) as defined in sections :		,	3	189,074
mr are 1, inte			1		
Part V Qualification l	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Ir	ncome	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incor	me)	
If section 4940(d)(2) applies, le	eave this part blank			_	_
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do			1? ∐ Y	es 🗹 No
	nount in each column for each year,	see instructions before	e making any entri	es	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitat	ole-use assets	(d) Distribution rat (col (b) divided by o	
2015	54,000		3,173,154		0 017018
2014	5,500		3,107,208		0 001770
2013	112,000		111,783		1 001941
2012	13,000		133,605		0 097302
2011	36,750		169,276		0 217101
2 Total of line 1, column (d)		2		1 335132
number of years the four	o for the 5-year base period—divide indation has been in existence if less	than 5 years	í í <u>3</u>		0 267026
	ncharitable-use assets for 2016 fron	·	4		2,949,319
5 Multiply line 4 by line 3			5		787,545
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,881
7 Add lines 5 and 6			7		789,426
	ions from Part XII, line 4 🗼				154,000
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and con	nplete that part usi	ng a 1% tax rate Se	e the Part VI

5a During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherw(2) Influence the outcome of any sp	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	on, directly or indirectly, any voter registration drive?						
	(4) Provide a grant to an individual	**		∐ Yes ⊻	No		
	ın section 4945(d)(4)(A)? (see ii		· •		No		
	(5) Provide for any purpose other the educational purposes, or for the						
	No						
b		ь					
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?							
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸		ь	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							No
7 _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

1a

1b

2

3a 3b

4

5

154,000

154,000

154.000

Form 990-PF (2016)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

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

1

2

3

4

5

4.718

138,986

Form **990-PF** (2016)

149,282

Form 990-PF (2016)				Page 9
Part XIII Undistributed Income (see instruct	tions)			
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				143,704
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			149,282	
b Total for prior years 20 , 20 , 20		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e		0		

0

4	Qualifying dist	trib	utio	ons	for	20	16	fro	m F	art		
f	Total of lines	3a	thr	roug	gh (e.						
е	From 2015.											
d	From 2014.											
С	From 2013.		•	•	•	•						

XII, line 4 > \$ a Applied to 2015, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election d Applied to 2016 distributable amount.

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9 a Excess from 2012. . **b** Excess from 2013. . c Excess from 2014. . d Excess from 2015. . e Excess from 2016. .

indicated below:

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

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must

same amount must be shown in column (a))



Form 990-PF (2016)	-			Page 11	
Part XV Supplementary Informa	tion (continued)				
3 Grants and Contributions Paid Du	uring the Year or Approve	ed for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount	
a Paid during the year landon school 6101 wilson lane bethesda, MD 20817		PC	to support scholarships	1,000	
metropolitan club preservation foundation 1700 h street nw washington, DC 20006		PC	To support programs and events	1,000	
SIBLEY MEMORIAL HOSPITAL 5255 LOUGHBORO RD NW WASHINGTON, DC 20016		PC	To support health care	2,000	
STEVENS INSTITUTE OF TECHNOLOGY 1300 PENNSYLVANIA AVE NW washington, DC 20004		PC	To support programs, events, and scholarships	150,000	
Total			▶ 3a	154,000	
b Approved for future payment	[

Form **990-PF** (2016)

Form 990-PF (2016)					Page 12
Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					
b					
c					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	20,880	
5 Net rental income or (loss) from real estate				·	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	189,074	
9 Net income or (loss) from special events				,	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
e					
12 Subtotal Add columns (b), (d), and (e).		0		209,954	0
13 Total. Add line 12, columns (b), (d), and (e)			1	3	209,954
(See worksheet in line 13 instructions to verify calculation	ons)				
Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which the accomplishment of the foundation's expression instructions)					
1					

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1. Did the organization directly or indirectly engage in any of the following with any other organization discribed in section 501 (c) of the Code (other than section 501(c)) or analysis of the Code (other than section 501(c)) or analysis or an analysis of the Code (other than section 501(c)) or indirectly affiliated with, or related to, one or more tax-exempt organizations 2.0 Other assets. 3.1 Other assets. 3.2 Other assets. 3.3 Call No. 3.2 Purchase of assets from a noncharitable exempt organization. 3.3 Rental of facilities, equipment, or other assets. 3.4 Did No. 3.5 Sensi of section and intensity or indirectly affiliated with, or related to, one or more tax-exempt organization. 3.5 Losis or loan guarantees. 3.6 Did No. 4.6 Performance of sensities, equipment, making lists, other assets, or paid employees. 4.7 Exemplification, equipment, making lists, other assets, or paid employees. 4.8 Exemplification, equipment, making lists, other assets, or paid employees. 4.9 Une to (b) Amount involved (c) Name of noncharitable exempt organization. 4.9 Une to (b) Amount involved (c) Name of noncharitable exempt organization. 4.9 Une to (b) Amount involved (c) Name of noncharitable exempt organization. 4.9 Une to (c) Description of treatments, and during arrangements. 5.1 Output of the Code (other than section 501(c)) of the Code (o	Part	XVII	Exempt Organia	zations									
(2) Other assets. (2) Other sasets. (3) Sales of assets to a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Sales of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Rental of facilities, equipment, or other assets. (3) Destination of services or membership or fundraising solicitations. (3) Performance of services or membership or fundraising solicitations. (3) Performance of services or membership or fundraising solicitations. (4) Performance of services or investigation of the state of the goods, other assets, or services green by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services green by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services green by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services green or column (a) the value of the goods, other assets, or services green or column (a) the value of the goods, other assets, or services received (a) June No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements. (a) In No (b) Type of organization (c) Description of relationship (d) Description of Institute that 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 my the Biological parts of officer or trustee Date Proparer Proparer's name Preparer's name Preparer											501	Yes	No
(a) Other assets. (b) Other transactions (1) Sales of ascets to a nonchantable exempt organization. (2) Purchases of ascets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rembursement arrangements. (5) Loss or foun quisartees. (6) Performance of services or membership or fundrasing solicitations. (6) Performance of services or membership or fundrasing solicitations. (7) A manual file of the goods, other assets, or services or membership or fundrasing solicitations. (8) Loss or foundations, equipment, making lists, where assets, or pad employees. (9) Line No. (9) Performance of services or membership or fundrasing solicitations. (10) Into No. (10) Into	a Tran	nsfers f	rom the reporting foun	dation to a n	oncharital	ble ex	empt organization	of					
(1) Sales of assets to a nonchantable exempt organization. (2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or orther assets. (4) Rembursement arrangements. (5) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Sales of college, equipment, mailing lists, other assets, or paid employees. (8) Performance of services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, shown in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, shown in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, shown in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly of the Code (cher than section 501c) if the foundation directly or indirectly o	(1)	Cash.									1a(1)		No
(2) Purchases of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Remibursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) It is not be serviced or services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Line No (1) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation required in a service of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of inoncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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? 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? (a) Name of long-assistance (b) Type of ingemination (c) Description of relationship. (b) If "Yes," complete the following schedule (a) Name of long-assistance (b) Type of ingemination (c) Description of relationship. (b) If "Yes," complete the following 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 my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, it is true, correct	(2)	Other	assets								1a(2)		No
(2) Purchases of assets from a nonchartable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rembursement arrangements. (5) Lears or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Performance of services or membership or fundraising solicitations. (10) No (10) No (10) No (10) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (11) Intelligence of the service of the service of the service of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services goods, other assets, or services goods, other assets, or error, or services goods, other assets, or services from the value of the goods, other assets, or services goods													
(a) Rental of facilities, equipment, or other assets. [16] No. (3) Rental of facilities, equipment, or other assets. [16] Loans or loan guarantess. [16] De Priformance of services or membership or fundraising solicitations. [16] No. (6) Performance of services or membership or fundraising solicitations. [16] No. (7) No. (8) Performance of services or membership or fundraising solicitations. [17] It is an investigation of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting floundation if the forderation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No. (b) Amount involved. [2] Line No. (b) Amount involved. [3] Line No. (c) Name of noncharidable exempt organizations. [4] Description of transfers, transactions, and sharing arrangements. [4] Description of transfers, transactions, and sharing arrangements. [5] Amount involved. [6] Name of organization. [6] Name of organization. [6] Description of transfers, transactions, and sharing arrangements of the second of transfers, transactions, and sharing arrangements of the second of transfers, transactions, and sharing arrangements. [7] No. 1 Description of transfers, transactions, and sharing arrangements. [8] No. 1 Description of transfers, transactions and sharing arrangements. [8] No. 2 Description of transfers, transactions and sharing arrangements. [8] No. 2 Description of transfers, transactions and sharing arrangements. [8] No. 2 Description of transfers, transaction of preparer (other than taxpayer) is based on all information of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge				•	-								
(4) Reimbursement arrangements. 1b(4) No (5) Loans or loan guarantees. 1b(5) Loans or loan guarantees. 1b(5) No (10(6) No (10						-							
(5) Loans or loan guarantees. 1b(5) No c Shanng of facilities, equipment, mailing lists, other assets, or paid employees. 1b(5) No lot of the goods, other assets, or sembership or fundraising solicitations. 1b(6) No lot of the goods, other assets, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or shanning arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or shanning arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchamilable exempt organization (d) Description of transfers, transactions, and shanning arrangements 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 Under penalties of penjury, 1 declare that I have evariance this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete because of my knowledge of penjury, 1 declare that I have evariance this return, including accompanying schedules and statements, and to the best of my knowledge of penjury, 1 declare that I have evariance this return, including accompanying schedules and statements, and to the best of my knowledge of penjury, 1 declare that I have evariance this return, including accompanying schedules and statements, and to the best of my knowledge of penjury, 1 declare that I have evariance this return, including accompanying schedules and statements, and to the best of my knowledge of penjury, 1 declare that I have evariance this return, including accompanying schedules a											``		
(a) Description of transfers assets or services or membership or fundrasing solicitations. 11b(6) No c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 11c No d If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the poods, other assets, or services given by the reporting foundation. If the foundation received lass than fair market value in any transaction or sharing arrangement, shown in column (d) the value of the goods, other assets, or service value in any transaction or sharing arrangements. (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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?. 2b if "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 15ign which imperpare has any knowledge 15ign which prepare has any knowledge 15ign which prepare has any knowledge 15ign part in as any													
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes" complete the following schedule. Collumn (b) should always show the fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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 5272	• • •										``	_	
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the foundation received less that market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (e) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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)) or in section 527?. \ \ \ \ \ \ \ \ \ \ \ \ \													
of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or shaning arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable esempt organization (d) Description of transfers, transactions, and shaning arrangements 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?		-											
(a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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?	of th	ne good	ds, other assets, or serv	vices given b	y the repo	orting	foundation If the	founda	ation receive	d less than fair market	value		
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?	ın aı	ny tran	saction or snaring arra	ngement, sn	ow in colu	mn (c	1) the value of the	e gooas	s, other asse	s, or services received			
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line	No	(b) Amount involved	(c) Name of	noncharitab	ole exe	mpt organization	(d)	Description of	transfers, transactions, and	d sharing arra	ingemen	its
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	-												
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		_					+						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	-												
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	-												
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							+						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 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 ****** Signature of officer or trustee Print/Type preparer's name Preparer's Signature Print/Type pre	2a Is th	ne foun	dation directly or indire	ectly affiliate	d with, or	relate	d to, one or more	tax-ex	empt organi	zations			
(a) Name of organization (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Name of organization (e) Description of relationship (c) Description of relationship (d) Name of organization (e) Description of relationship (e) Description of relationship (f) Description of relationship (g) Description of relationship (h) Type of organization (h) Type of organization (c) Description of relationship (g) Description of relationship (h) Type of organization (h) Description of relationship (h) Type of organization (h) Type of organi	desc	cribed i	n section 501(c) of the	Code (other	than sect	ion 50	$\mathfrak{I}(c)(3)$) or in sec	tion 52	77		☐ Yes	✓ N	0
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 ****** 2017-05-22	b If "Y	es," co	mplete the following so	chedule									
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 ****** Signature of officer or trustee Date Title			(a) Name of organization	n		(I	b) Type of organizati	on		(c) Description of r	elationship		
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 ****** Signature of officer or trustee Date Title													
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 ****** Signature of officer or trustee Date Title													
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 ****** Signature of officer or trustee Date Title													
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 ****** Signature of officer or trustee Date Title													
Here ******* 2017-05-22 ******* May the IRS discuss this return with the preparer shown below (see instr.)?	Sian	of m	y knowledge and belief	, it is true, c									
Print/Type preparer's name Preparer's Signature Print/Type preparer's name Preparer's Signature Print/Type preparer's name Preparer's Signature Date Check if self- employed ▶ □ Firm's name ▶ Baker Tilly Virchow Krause LLP Firm's address ▶ 8219 Leesburg Pike Suite 800	_			-			2017-05-22	,	*****				
Paid Preparer Use Only Peter J McKenna Peter J McKenna Peter J McKenna Peter J McKenna Pirm's name ▶ Baker Tilly Virchow Krause LLP Firm's ein ▶ 39-0859910 Phone no. (703) 923-8300	iicic	I ₽ −	ignature of officer or ti	rustee			Date	—)	Title		—		
Paid Preparer Use Only Peter J McKenna Peter J McKenna Peter J McKenna Firm's name ▶ Baker Tilly Virchow Krause LLP Firm's eIN ▶39-0859910 Phone no. (703) 923-8300			Print/Type preparer's	name	Preparer'	's Sıgr	nature	Date		Check if self-		5770	
Preparer Use Only Firm's name ▶ Baker Tilly Virchow Krause LLP Firm's eIN ▶39-0859910 Phone no. (703) 923-8300	l Peter J McKenna l l l l l l l l l l l l l l l l l l							F0035	5110				
Use Only Firm's address ► 8219 Leesburg Pike Suite 800 Phone no. (703) 923-8300													
Firm's address ► 8219 Leesburg Pike Suite 800	_		Firm's name ► Bake	r Tilly Vircho	w Krause	LLP				Firn	n's EIN ▶39	-08599	910
Phone no. (703) 923-8300	use (JIIIY	Firm's address ▶ 82	19 Leesburg	Pike Suite	- 800							
									Pho	Phone no (703) 923-8300			

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, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 2015-05-13 2016-10-19 AES Corp - 425 Shares Amer INtl Group Inc com new - 250 shares 2012-09-11 2016-10-19 Amer INtl Group Inc com new - 565 shares 2012-05-17 2016-11-14 amer INtl Group Inc com new - 180 shares 2012-09-11 2016-11-14 autozone inc nev - 90 shares 2014-06-13 2016-07-26 2014-09-25 2016-10-19 cincinnati bell inc new com new - 500 shares 2016-10-19 dennys corp com - 2000 shares 2012-05-17 2014-10-16 2016-11-30 equinix inc com par \$0 001 - 225 shares equinix inc com par \$0 001 - 7 shares 2014-11-25 2016-11-30 2015-11-10 2016-11-30 equinix inc com par \$0 001 - 6 shares Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 5,113 5,473 -360 15,218 8.263 6,955 36,303 16,764 19,539 11,565 5,949 5,616 72,072 47,129 24,943 8,809 1,213 10,022 21,016 8,118 12,898 76.323 43,287 33,036 2,375 1,571 804 2,035 1,782 253 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -360 6,955 19,539 5,616 24,943 1,213 12,898 33,036 804 253

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, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 2012-06-26 2016-10-19 macquarie infrastructure corp com, mic - 25 shares pioneer natural resources co, pxd - 10 shares 2013-03-19 2016-10-19 pioneer natural resources co, pxd - 45 shares 2014-10-08 2016-10-19 pioneer natural resources co, pxd - 70 shares 2014-12-02 2016-10-19 ross stores inc com - 530 shares 2013-07-01 2016-06-14 2013-07-01 2016-06-15 ross stores inc com - 1490 shares 2016-10-19 zayo group hldgs inccom - 500 shares 2014-12-17 2014-12-17 2016-11-30 zayo group hldgs inccom - 1185 shares zayo group hldgs inccom - 680 shares 2015-01-22 2016-11-30 zayo group hldgs inccom - 1755 shares 2015-03-12 2016-11-30 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 482 2,083 1,601 1,904 1.251 653 8,568 8,182 386 13,329 10,343 2,986 28,537 17,344 11,193 80,898 48,759 32,139 1,764 15,744 13,980 41,467 33.134 8,333 23,796 18,369 5,427 61,414 48,009 13,405 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 1,601 653 386 2,986 11,193 32,139 1,764 8,333 5,427 13,405

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, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation zayo group hldgs inccom - 615 shares 2015-05-15 2016-11-30 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)					
21,521		15,231	6,290					
Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I								
Complete only for assets show	Gains (Col (h) gain minus col (k), but not less than -0-) or							
I	1	1	cor (k), but not less than -0-) or					

21,521		15,231	6,290							
orm 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I										
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus										
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) (k) over col(յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))							

6,290

(a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to hours per week not paid, enter (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

5425 Falmouth Road Bethesda, MD 20816	3 00			
Jeffrey C Ansary	President	80,000	0	0
1				

Bethesda, MD 20816				
Janet H Ansary	Treasurer	0	0	0
5425 Falmouth Road Bethesda, MD 20816	0 20			

Janet H Ansary	Treasurer	0	0	0
5425 Falmouth Road Bethesda, MD 20816	0 20			
Douglas C Ansary	Director	0	0	0

5425 Falmouth Road Bethesda, MD 20816	0 20			
Douglas C Ansary	Director	0	0	0
11045 Longboat Key Lane 108 Tampa, FL 33626	0 20			

<u>'</u>				
Douglas C Ansary	Director	0	0	0
11045 Longboat Key Lane 108 Tampa, FL 33626	0 20			
Pary Ann Davis	Secretary	0	0	0

11045 Longboat Key Lane 108 Tampa, FL 33626				
Pary Ann Davis	Secretary	0	0	0
3918 Jeffry Street	0 20			

Pary Ann Davis	Secretary	0	0	C
3918 Jeffry Street Wheaton, MD 20906	0 20			

Director 0 20

Bradley C Ansary

56 E 13th Street 4 New York, NY 10003

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data	-	DI	LN: 93491157005107		
TY 2016 Accounting Fe	ees Sch	edule					
	Name:	The Ansary	oundation				
		c/o Jeff Ansa	ary				
	EIN: 52-1308585						
Category	Ame	ount N	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

7,200

Accounting Fees

TY 2016 Explanation of Non-Filing with Attorney General Statement

Name: The Ansary Foundation

c/o Jeff Ansary

DLN: 93491157005107

EIN: 52-1308585 **Statement:**IN ACCORDANCE WITH DC OTR NOTICE 2009-01, DC DOES NOT REQUIRE FORM 990-PF TO BE FILED

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

WITH THE OTR.

TY 2016 Investm	nents Corpora	te Stock So	chedule		

DLN: 93491157005107

2,966,600

1,961,815

Name: The Ansary Foundation c/o Jeff Ansary

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

FIDELITY - 9796

Name of Stock End of Year Book Value Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491157005107
TY 2016 Other Expenses Sche	dule			
Name:	The Ansary Fou	ndation		
	c/o Jeff Ansary			
EIN:	52-1308585			
Other Expenses Schedule	,			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Fees	30	0		0
Investment Advisor Fees	21,843	21,843		0
REGISTERED AGENT FEE	296	0		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491157005107
TY 2016 Taxes Schedule				
	The Ansary c/o Jeff Ansa 52-1308585	ary		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Tax Based on Investment Income	302	0		0