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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf.

		t of the Treasury venue Service	► Info			social security numbers on m 990-PF and its separate				Open to Public Inspection
		idar year 2016 or ta					, and e	_		
		foundation		•					A Employer identification	number
_D	OR	NEY-KOPPE	L FOU	NDATI	ON,	INC.	. <u>-</u>		52-2214925	
		nd street (or PO box no 01 ARDNAV			i to street	address)		Room/suite	B Telephone number 301 – 340 – 02	80
		own, state or province				ostal code			C If exemption application is p	ending, check here
		OMAC, MD		<u>4 – 126 :</u> Freturn	<u> </u>	Initial return of a fo	ormor public	abarity.	D 1 Foreign organizations	s abook horo
u	HICCH	ан инасарру	=	return		Amended return	miner public i	Juanty	i i oreign organizations	s, check here
				ess change		Name change			2 Foreign organizations me check here and attach co	eeting the 85% test,
H (heck	type of organization			(c)(3) ex	kempt private foundation			E If private foundation sta	
	_	ction 4947(a)(1) noi				Other taxable private founda	ation		under section 507(b)(1)	
I Fa	ur ma	arket value of all asse	ets at end of	year J A	Accounti	ing method. Cash	X Acc	ual	F If the foundation is in a	60-month termination
		Part II, col (c), line		_		ther (specify)			under section 507(b)(1)	(B), check here
_	\$				t I, colu	mn (d) must be on cash i				1
Pa	art I	Analysis of Reven (The total of amounts necessarily equal the	in columns (b)	, (c), and (d) m	ay not	(a) Revenue and expenses per books		ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts	, grants, etc.	, received		400,000.			N/A	
	2	Check If the fu	oundation is not re	equired to attach	Sch B					
	3	cash investments				42 222		2 222		OMA MENTENIM 1
	4	Dividends and inter	rest from sec	curities		43,333.	4	3,333.		STATEMENT 1
		Gross rents Net rental income or (lo	200)							
_		Net gain or (loss) from		not on line 10					DECE	(FD]
nue	b	Gross sales price for all assets on line 6a							THE CE	VED O
Revenue	7	Capital gain net incomi	e (from Part IV,	line 2)				0.	SEP 0 1	2017
Œ	8	Net short-term capi	ıtal gaın						B 05, 01	2011
	9	Income modificatio							OGDEN	
	10a	and allowances	15					*		, 01
	1	Less Cost of goods so								
		Gross profit or (los: Other income	S)			500.		0.		STATEMENT 2
	11	Total Add lines 1 t	through 11			443,833.	Δ	3,333.		DIATEMENT Z
	13	Compensation of office		rustees, etc		0.		0.		0.
	14	Other employee sal	laries and wa	iges						
"	15	Pension plans, emp	oloyee benef	ıts						
ses	16a	Legal fees		STMT	3	27,232.		0.		0.
je E	b	Accounting fees		STMT	4	3,089.		0.		0.
ũ	C	Other professional	fees	STMT	5	296.		0.		0.
and Administrative Expenses	17 18	Interest Taxes		STMT	6	750.		0.		0.
ıstra	19	Depreciation and de	epletion	OIMI	J	750.	<u> </u>	<u> </u>		J.
Ē	20	Occupancy	орюшон							
Adi	21	Travel, conferences	s, and meetir	ngs		18,041.		0.		18,041.
and	22	Printing and publica	ations							
ng :	23	Other expenses		STMT	7	1,523.		0.		0.
Operating	24	Total operating an								
Ope		expenses Add line				50,931.		0.		18,041.
_	1	Contributions, gifts				383,600.				383,600.
	26	Total expenses and Add lines 24 and 25		ENIS		434,531.		0.		401,641.
	27	Subtract line 26 fro						· ·		401,041.
		Excess of revenue over		d disbursemer	nts	9,302.				
	ľ	Net investment inc					4	3,333.		
		Adjusted net incom							N/A	

823501 11-23-18 LHA For Paperwork Reduction Act Notice, see instructions

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For	m 99	0-PF (2016) DORNEY-KOPPEL FOUNDATION			2214925 Page 2
Р	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End of	
	_		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	10,140.	31,384.	31,384.
		Savings and temporary cash investments	1,269,888.	973,582.	973,582.
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶			<u> </u>
	4	Pledges receivable -			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable		<u></u> ,	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons STMT 8		1,588.	
	7	Other notes and loans receivable 250,000.	STATEMENT 9		
		Less: allowance for doubtful accounts ▶ 0.	0.	250,000.	250,000.
s	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	ì	Investments - corporate stock STMT 10	1.671.421.	1,706,054.	3.684.056.
	1	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	' '	Less accumulated depreciation			
	10	Investments - mortgage loans			
	1				
	13	Investments - other Land, buildings, and equipment; basis			
	14	, , , ,			
		Less accumulated depreciation Other assets (describe ► STATEMENT 11)	1 457 450	1,978,002.	0.
	1	,	1,457,459.	1,3/0,002.	<u> </u>
	16	Total assets (to be completed by all filers - see the	4 400 000	4 040 610	4,939,022.
	 _	instructions. Also, see page 1, item I)	4,408,908.	4,940,610.	4,333,044.
		Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable	0.	1,857.	
	22	Other liabilities (describe STATEMENT 12)		1,057.	
	23	Total liabilities (add lines 17 through 22)	0.	1,857.	
	23	Foundations that follow SFAS 117, check here		1,037.	
		and complete lines 24 through 26 and lines 30 and 31			
es	24	Unrestricted			
Fund Balances	25	Temporarily restricted			
3ali	26	Permanently restricted			
٦	10	Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
ets		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets	28	Retained earnings, accumulated income, endowment, or other funds	4,408,908.	4,938,753.	
Net /	29	Total net assets or fund balances	4,408,908.	4,938,753.	
z	30	Total liet assets of fund balances	4,400,500.	±,750,755.	
	31	Total liabilities and net assets/fund balances	4,408,908.	4,940,610.	
	art				
				р	·············
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		4 400 000
	•	st agree with end-of-year figure reported on prior year's return)		1	4,408,908.
		r amount from Part I, line 27a		2	9,302.
		r increases not included in line 2 (itemize) NET INCREAS	E IN UNKEALIZE		520,543.
		lines 1, 2, and 3		4	4,938,753.
		eases not included in line 2 (itemize)		5	4,938,753.
<u>6</u>	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (a), line 30	6	4,938,753. Form 990-PF (2016)
					10(11) 330 F (2010)

	and Losses for Tax on I be the kind(s) of property sold (e.		, income	(b) How	acquired irchase	c) Date a	CULITED	(d) Date sold
	ehouse, or common stock, 200 sl			D - D	irchase onation	(mo, da		(mo, day, yr)
1a								
b NON	NE							
_c d				<u> </u>				
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				in or (loss) (f) minus (
<u>a</u>	·		 .					
<u>b</u>			 .	+				
d								
е		1						
Complete only for assets showing		1					ol. (h) gain : ot less than	
(ı) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 1	col. (j), if any				from col (1	
a b		 						
C		-						
d								
e								
2 Capital gain net income or (net cap	oital loss) $\left\{ egin{array}{l} ext{If gain, also ent} \ ext{If (loss), enter} \end{array} ight.$	er in Part I, line 0- in Part I, line	7 7	} 2				
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c		and (6):		}				
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 4940(e) fo	r Reduced	l Tay on Net	Inves	tment Inco	me_		
(For optional use by domestic private f					tinent ino			
	,	, 15 15(a) tan on		,				
If section 4940(d)(2) applies, leave this								
Was the foundation liable for the section was the foundation liable for the section does not qualify			· ·	rıod?				Yes X No
If "Yes," the foundation does not qualif Enter the appropriate amount in ea				ntries.	 ——			
(a) Base period years	(b)			(c)			Distrib	(d) ution ratio
Calendar year (or tax year beginning			Net value of no				col. (b) div	ided by col (c))
2015 2014		<u>30,185.</u> 35,350.			80,821 36,699		 -	.029054 .008757
2013		87,250.			09,583			.024861
2012		8,150.		2,7	78,457			.002933
2011	1	<u>73,900.</u>		2,5	38,307	·		.068510
2 Total of line 1, column (d)						2		.134115
3 Average distribution ratio for the 5-	-year base period - divide the tota	I on line 2 by 5,	or by the number	of years				
the foundation has been in existent		•				3		.026823
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X	(, line 5				4		4,366,833.
						5		117,132.
5 Multiply line 4 by line 3					•			
	e (1% of Part I. line 27h)					6		
5 Multiply line 4 by line 3 6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6		433.
						6 7 		

Part VI Excise Tax Based on Investment Income	SION, INC. 52-221 (Section 4940(a), 4940(b), 4940(e), or 4948 - see	<u>4925</u> instrι	ıctio	Page 4 ns)
1a Exempt operating foundations described in section 4940(d)(2), check he				
	copy of letter if necessary-see instructions)		1	33.
b Domestic foundations that meet the section 4940(e) requirements in Par	art V, check here 🕨 🗶 and enter 1%		4	<u> </u>
of Part I, line 27b c All other domestic foundations enter 2% of line 27b Exempt foreign org	pagizations optor 4% of Part I, line 12, col. (h)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable f	~ ' ' '			0.
3 Add lines 1 and 2	3			33.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or	, , , , , , , , , , , , , , , , , , , ,		4	33.
6 Credits/Payments:	. 1005, 411.07	-		
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 1,077.			
b Exempt foreign organizations - tax withheld at source	6b			
c Tax paid with application for extension of time to file (Form 8868)	6c			
d Backup withholding erroneously withheld	6d			
7 Total credits and payments. Add lines 6a through 6d	7		1,0	77.
8 Enter any penalty for underpayment of estimated tax. Check here	if Form 2220 is attached 8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount or				
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the a			6	44.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	644. Refunded ► 11			0.
Part VII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national,	l, state, or local legislation or did it participate or intervene in	<u> </u>	Yes	
any political campaign?		1 <u>a</u>	-	X
b Did it spend more than \$100 during the year (either directly or indirectly		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description	of the activities and copies of any materials published or			'
distributed by the foundation in connection with the activities			}	
c Did the foundation file Form 1120-POL for this year?		1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955)		1		
(1) On the foundation. ► \$ (2) On fo				
e Enter the reimbursement (if any) paid by the foundation during the year	for political expenditure tax imposed on foundation			
managers ► \$0.	1. 11. 11. 11.00			77
2 Has the foundation engaged in any activities that have not previously be	een reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities	2C unite appreciate instrument extreles of inserroration or	i		
3 Has the foundation made any changes, not previously reported to the IR		,		v
bylaws, or other similar instruments? If "Yes," attach a conformed c	,,	3 4a		X
4a Did the foundation have unrelated business gross income of \$1,000 or r	N/A			
 b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction. 		4b 5	<u></u>	х
If "Yes," attach the statement required by General Instruction T		-		11
6 Are the requirements of section 508(e) (relating to sections 4941 through				
By language in the governing instrument, or	gn 4343) suitshou cithor.			
 By state legislation that effectively amends the governing instrument s 	so that no mandatory directions that conflict with the sitate law			
remain in the governing instrument?	that no mandatory an octobro that commot with the octate an	6	х	ļ
7 Did the foundation have at least \$5,000 in assets at any time during the	vest? If "Yes " complete Part II, col. (c), and Part, XV	7	X	
σου της τουπομποιή παίνο αι πομοί φο ₁ ουο πι μοσοίο αι απή τίπτο αστίπη της	your in 100, complete tart in, cor (o), and i are no		- -	
8a Enter the states to which the foundation reports or with which it is regist	stered (see instructions)			
MD		1		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Fo	orm 990-PF to the Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach e		8b	x	
9 Is the foundation claiming status as a private operating foundation within	•		T -	
year 2016 or the taxable year beginning in 2016 (see instructions for Pa		9		X
10 Did any persons become substantial contributors during the tax year? H		10	L	X_

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Х

3b

4a

Yes X No

N/A

during the year?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2016) DORNEY-KOPPEL FOUNDATION			<u>52-22149</u> 2	<u>25 Page 6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to.				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	es X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,		
any voter registration drive?		Ye	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		☐ Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?	, , - · · · · · · · · · · ·		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru		viegaletione	N/A 5	ib
Organizations relying on a current notice regarding disaster assistance check h	·			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned		1 1
expenditure responsibility for the grant?		1/A 🗀 Ye	es No	
If "Yes," attach the statement required by Regulations section 53 494		(/A	.s NO	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay premiums on		es X No	
	sarangal banafit contract?	T6	1	sb X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b. file Form 8870	bei Sonai Denem Comiaci.		<u> </u>	A
	shallow transport and		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	_	
Part VIII Information About Officers, Directors, Trust		nagara Highly		'b
Paid Employees, and Contractors	ees, roundation wa	magers, n igni	у	
List all officers, directors, trustees, foundation managers and their	compensation			
Elst Bil Officers, directors, a disters, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
TRUE TO	to position	enter -0-)	compensation	allowances
	DIRECTOR - V/	P		
10701 ARDNAVE PLACE	2.50			0
POTOMAC, MD 20854-1261	2.50	0.	0.	0.
GRACE ANNE DORNEY KOPPEL	DIRECTOR - PR	ESIDENT		
10701 ARDNAVE PLACE	4 00			0
POTOMAC, MD 20854-1261	4.00	0.	0.	0.
	_			
	_			
		L	L	
2 Compensation of five highest-paid employees (other than those inc	T	enter "NONE."	(d) Contributions to	() Funance
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
	devoted to position	(0)	compensation	allowances
NONE	_			
]			
Total number of other employees paid over \$50,000				0
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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	·	
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
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 product		Expenses
1 N/A		
2		
3		
3		
4		
D . IV D		
Part IX-B Summary of Program-Related Investments	- 1 10	A
Describe the two largest program-related investments made by the foundation during the tax year on line	s i and 2.	Amount
1		
2	•	
All other program-related investments. See instructions.		
3 <u>N/A</u>		
		0.
Total. Add lines 1 through 3	•	0.
		Form 990-PF (2016)

Ρ	art X Minimum Investment Return (All domestic foundations r	must complete this pa	ırt Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le. etc., purposes:			
·	Average monthly fair market value of securities	,, ,		1a	4,420,601.
	Average of monthly cash balances			1b	4,420,601.
	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	4,433,333.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		_	2	0.
3	Subtract line 2 from line 1d			3	4,433,333.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	t, see instructions)		4	66,500.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and o	n Part V, line 4		5	4,366,833.
6	Minimum investment return Enter 5% of line 5			6	218,342.
Р	art XI Distributable Amount (see instructions) (Section 4942(i)(3) a foreign organizations check here ▶ ☐ and do not complete this part.		ig foundations ar	d certain	
1	Minimum investment return from Part X, line 6			1	218,342.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	433.		
Ь	Income tax for 2016 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	433.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	217,909.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	217,909.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part	t XIII, line 1		7	217,909.
_	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur Expenses, contributions, gifts, etc total from Part I, column (d), line 26	ιμυδεδ		1a	401,641.
	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	ible etc. nurnoses	-	2	
3	Amounts set aside for specific charitable projects that satisfy the:	ibic, etc., purposes			
о a	Suitability test (prior IRS approval required)			3a	
a b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, a	and Part XIII line 4		4	401,641.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.				101/0111
,	income Enter 1% of Part I, line 27b	ootmont		5	433.
6	Adjusted qualifying distributions Subtract line 5 from line 4			6	401,208.
Ū	Note The amount on line 6 will be used in Part V, column (b), in subsequent years v 4940(e) reduction of tax in those years	when calculating whethe	r the foundation		

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Form 990-PF (2016) DORNEY - KOPPE	L FOUNDATION	N, INC.	<u> </u>	<u> 14925 Page 9</u>
Part XIII Undistributed Income (see	instructions)			
•	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				217,909.
2 Undistributed income, if any, as of the end of 2016	İ			
a Enter amount for 2015 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 47 , 384.				
b From 2012				
c From 2013				
d From 2014				
e From 2015	47 204			
f Total of lines 3a through e	47,384.			
4 Qualifying distributions for 2016 from				
Part XII, line 4 ► \$ 401, 641.			0	
a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				217,909.
e Remaining amount distributed out of corpus	183,732.			211,303.
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below	224			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	231,116.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	· · · · · · · · · · · · · · · · · · ·
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
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)	0.			
8 Excess distributions carryover from 2011				····
not applied on line 5 or line 7	47,384.			
9 Excess distributions carryover to 2017	-			
Subtract lines 7 and 8 from line 6a	183,732.			
10 Analysis of line 9:			-	

e Excess from 2016 623581 11-23-16

a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015

Form **990-PF** (2016)

183,732

	KOPPEL FOUN			52-22	14925 Page 10
Part XIV Private Operating F	.		I-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo			. •	1.0.0.00	
b Check box to indicate whether the found		ng toundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(a) 2010	(0) 2013	(6) 2014	(0) 2013	(6) 10(a)
investment return from Part X for					
each year listed				-	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter					
(1) Value of all assets		 			
(2) Value of assets qualifying under section 4942(j)(3)(B)(j)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter.					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					" '
and 5 or more exempt		ł			
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	• •		if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed n	tore than \$5,000) (See s	section 507(a)(2).)			
SEE STATEMENT 13					
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large port	ion of the ownership of a p	artnership or
NONE	ou 1070 or grouter linere	5 (
	C C	Cabalanakin ata Di		·	
2 Information Regarding Contribution Check here ► if the foundation of				not account uncollected real	inete for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	<u>`</u>				
GRACE ANNE DORNEY KO			ications should be addit	:33Eu.	
10701 ARDNAVE PLACE,			. 1		
b The form in which applications should be					
NONE	S SSSMMOS AND MINORINA				
c Any submission deadlines.					
NONE					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or	other factors	
NONE					
					

Total

Part XVI-A	Analysis of Income-Producing Activities
------------	---

Enter gross amounts unless otherwise indicated	Unrelated I	ousiness income	Excluded	by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a HONORARIUM					500.
b					
С					
d					
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	43,333.	
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		().	43,333.	500.
13 Total Add line 12, columns (b), (d), and (e)				13	43,833.
(See worksheet in line 13 instructions to verify calculations.)					

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

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

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	Exempt Organ	izations						•	
1 Did the c			of the followin	g with any other organizatio	n described in section	on 501(c) of		Yes	No
				7, relating to political organ		(-,			
	s from the reporting founda								
(1) Cas	·						1a(1)		Х
(2) Othe	er assets						1a(2)		Х
b Other tra									
	es of assets to a noncharital	ble exempt organiza	tion				1b(1)		х
	chases of assets from a noi						1b(2)	-	Х
` '	tal of facilities, equipment,	•	3				1b(3)		Х
	nbursement arrangements						1b(4)		Х
	ns or loan guarantees						1b(5)		Х
	formance of services or me	mbership or fundrai	sıng solıcıtatıo	ns			1b(6)	_	Х
	of facilities, equipment, ma						1c		Х
d If the ans	swer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should alw	vays show the fair m	arket value of the goods, o	ther ass	ets,	
or servic	es given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	e in any transaction	or sharing arrangement, s	how in		
column ((d) the value of the goods,	other assets, or serv	ices received.						
(a) Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring an	rangeme	:nts
			N/A						
					<u> </u>				
		<u> </u>							
	· · · · · · · · · · · · · · · · · · ·								
					ļ				
		l <u> </u>							
						 	-		
		-		or more tax-exempt organiz	ations described	_	٦	_ 	a
	n 501(c) of the Code (other)(3)) or in sect	ion 5277			Yes	LX	No
b it Yes, c	complete the following sche			(h) Tuno of organization		al Department of relational			
	(a) Name of org	lanization		(b) Type of organization		c) Description of relations	<u></u>		
	N/A								
									
Unde	er penalties of periury. I declare	that I have examined thi	s return includin	g accompanying schedules and :	statements, and to the t	pest of my knowledge			
				taxpayer) is based on all inform.		has any knowledge Retu	the IRS on with th	e prepar	er
Here	Muso !!	and salat	Delta	5 18 122/2019	PRESID		wn below Yes		_
	nature of officer or trustee	- July	T- UM	Date	Title	LA LA	L res		_ No
	Print/Type preparer's na	ime	Preparer's si			Check If PTIN			
	The type property of the	······ ·		<u></u>		self- employed			
Paid	STEVEN HAL	т (20	allo-	08/22/17		1083	643	
Preparer			& POWE		00/22/11	Firm's EIN ► 26-00			
Use Only	1 11 11 0 11 a 11 a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ב, שטעהט	T LOME	• • • •		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , 4)	ر ر	
· · · ·		99 N FAT	RFAX C	T. 10TH FLOO					
		EXANDRIA,				Phone no (703)	836	_1 3	50
	1111		<u> </u>				rm 99 0		

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient NONE PUBLIC GENERAL PURPOSES HOLY TRINITY CHURCH 3513 N STREET NW WASHINGTON, DC 20007 25,000. PUBLIC NEW RIVER HEALTH ASSOCIATION INC. NONE PULMONARY REHAB PO BOX 337 SUPPORT 20,000. SCARBRO WV 25917 PADDLERS FOR HUMANITY NONE PUBLIC GENERAL PURPOSES PO BOX 2555 500. EAST HAMPTON, NY 11937 Total from continuation sheets 45 500.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

DO	ORNEY-KOPPEL_FOUNDATION, INC	52-2214925
Organization type (check of	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special Rules		
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun, line 1 Complete Parts I and II	or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ations of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III	
year, contributions is checked, enter be purpose. Don't co	In described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from secularities exclusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it is e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (File Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-EZ, or 990-PF)	·

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

Name of organization

Employer identification number

DORNEY-KOPPEL FOUNDATION, INC.

52-2214925

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional copies of Part I	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD J. & GRACE ANNE KOPPEL 10701 ARDNAVE PLACE POTOMAC, MD 20854-1261	\$ 4 00,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
:			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

DORNEY-KOPPEL FOUNDATION, INC.

52-2214925

Part II	Noncash Property (See instructions) Use duplicate copies of F	Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)		
		\$	 -	
(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	
_				
		\$	990, 990-EZ, or 990-PF) (

lame of organi	zation		_	Employer identification number
OORNEY-	KOPPEL FOUNDATION, INC.			52-2214925
Part III	KOPPEL FOUNDATION, INC. Exclusively religious, charitable, etc., contributhe year from any one contributor. Complete column completing Part III enter the total of exclusively religious, chouse duplicate copies of Part III if additional s	mins (a) through (e) and the follow aritable, etc., contributions of \$1,000 or	WING HITE CHILV. For organization	ins.
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
_		(e) Transfer of gif		
	Transferee's name, address, and Z			ansferor to transferee
-				
(a) No.	4.2		40.5	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, and 2	ZIP + 4	Relationship of tra	ansferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, and 2	ZIP + 4	Relationship of tra	ansferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
Part I				
	Transferoe's name address and 3	(e) Transfer of gif		aneteror to transferos
_	Transferee's name, address, and Z	-U T 4	ne advising of tra	ansferor to transferee
-				

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
M&T SECURITIES	43,333.	0.	43,333.	43,333.	
TO PART I, LINE 4	43,333.	0.	43,333.	43,333.	

FORM 990-PF OTHER	INCOME		STATEMENT 2
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
HONORARIUM	500.	0 .	•
TOTAL TO FORM 990-PF, PART I, LINE 11	500.	0.	•

FORM 990-PF	LEGAL	LEGAL FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	27,232.	0.		0.
TO FM 990-PF, PG 1, LN 16A	27,232.	0.		0.

FORM 990-PF	ACCOUNTING FEES		S	TATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
ACCOUNTING FEES	3,089.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	3,089.	0.			0.

FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	296.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	296.	0.		0.

FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	750.	0.		0.
TO FORM 990-PF, PG 1, LN 18	750.	0.		0.

FORM 990-PF	OTHER EXPENSES		STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSES MISCELLANEOUS	1,170. 353.			0.	
TO FORM 990-PF, PG 1, LN 23	1,523.	0.		0.	

FORM 990-PF	OTHER RECEIVABLES FROM	OFFICERS, ETC.	STATEMENT	8
DESCRIPTION		BALANCE DUE	FMV OF LO	AN
GRACE ANNE AND TE	ED KOPPEL	1,588		0.
TOTAL TO FORM 990	-PF, PART II, LINE 6	1,588		0.

FORM 990-PF OTHER NOTES	AND LOANS REC	EIVABLE	STATEMENT 9
DESCRIPTION	BALANCE DUE	DOUBTFUL ACCT ALLOWANCE	FMV OF LOAN
COPD FOUNDATION	250,000.	0.	250,000.
TOTAL TO FM 990-PF, PART II, LN 7	250,000.	0.	250,000.

FORM 990-PF CORPORATE STOCK	ζ	STATEMENT	10
DESCRIPTION	BOOK VALUE	FAIR MARKE VALUE	T
M&T SECURITIES	1,706,054.	3,684,0	56.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,706,054.	3,684,0	56.

FORM 990-PF	OTHER ASSETS		STATEMENT 11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
UNREALIZED GAIN (LOSS) ON INVESTMENTS	1,457,459.	1,978,002.	0.
TO FORM 990-PF, PART II, LINE 15	1,457,459.	1,978,002.	0.

FORM 990-PF OTHER LIABILITIES	S	STATEMENT 12
DESCRIPTIÓN	BOY AMOUNT	EOY AMOUNT
CREDIT CARD PAYABLE	0.	1,857.
TOTAL TO FORM 990-PF, PART II, LINE 22	0.	1,857.

DORNEY-KOPPEL FOUNDATION, INC.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 13

NAME OF MANAGER

EDWARD J. KOPPEL GRACE ANNE DORNEY KOPPEL