

## 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



### Form 990-PF

### **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

► 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. Open to Public Inspection For calendar year 2016 or tax year beginning 2016, and ending Employer Identification number WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE Number and street (or P O box number if mail is not delivered to street and reason) 54-1075268 Telephone number (see instructions) 10020 PARK ROYAL DRIVE (703) 402-3745City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. GREAT FALLS 22066 VA Initial return X Initial return of a former public charity G Check all that apply: 1 Foreign organizations, check here . . . . . . . Final return Amended return 2 Foreign organizations meeting the 85% test, check X Name change Address change here and attach computation . . . . . . . . . X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here . . X Cash Fair market value of all assets at end of year Accruai Accounting method (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 21,421,530 (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here . Part I Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) for charitable expenses per books income income purposes (cash basis only) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule)  $\Leftrightarrow$ 2 Check ► X if the foundation is not required to attach Sch E DE( Interest on savings and temporary cash 25,737 25,737. 25,737 Dividends and interest from securities . 192,857. 192,857. 192,857. b Net rental income or (loss) II-6a Stmt 6 a Net gain or (loss) from sale of assets not on line 10 . . . 200,245. b Gross sales price for all assets on line 6a 200,245 Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . . . . 397.63 Income modifications and the same of th 10 a Gross sales less returns and allowances . . b Less Cost of goods sold . . c Gross profit or (loss) (attach schedule) . . . . . . 7,07,58,278,000 S.T.F.W 11 Other Income (attach schedule) . . . . . <u>6,906</u>. MISCELLANEOUS 425,745. 218,594. 218,594.Total. Add lines 1 through 11. . . . . . . . 190,000. 38,000. 38,000. 114,000. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages . . . . 144,025. 15 Pension plans, employee benefits . . 11,499. 4,255. 16 a Legal fees (attach schedule) . . . . 11,078 73,850. 11,078 ADMINISTRATIVE **b** Accounting fees (attach sch) . . . 4,925 4,925 32,833 c Other professional fees (attach sch) . . 17 12,929 18 Taxes (attach sch 3,438. 22,214 1,394 1,394 Depreciation (attach 19 schedule) and deple 15,989 20 17,113. Occupancy 17,113. 21 Travel, confe 2,670. 2,670. 22 23 See Line 23 Stmt 32,065. 54,094 Total operating and administrative <u>55,</u> 397 55,397 173,541 expenses. Add lines 13 through 23 . 577,216 25 Contributions, gifts, grants paid . . . . 507,050. 507,050. 1442 1111 7: 3 A 26 Total expenses and disbursements. Add lines 24 and 25 · · · · . . . 55,397 680,591 55,397 1,084,266. Subtract line 26 from line 12: Year 2 to \$100 feet \$420 a Excess of revenue over expenses and disbursements . . . . . -658,521 THE RESERVE THE PARTY OF THE PA 163.197. b Net Investment Income (if negative, enter -0-). . 163, 197. C Adjusted net Income (if negative, enter -0-) . .

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0301 12/16/16

Par	<b>4.11</b> &	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
, ai	<u> </u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	111,625.	83,057.	83,057.
	2	Savings and temporary cash investments	19,191,310.	14,563,685.	14,563,685.
	3	Accounts receivable			
	`	Less allowance for doubtful accounts			
	4		annumen fariotetik inimik		A
	•	Less allowance for doubtful accounts		**************************************	
	5				
	1 .	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
Ą		Less: allowance for doubtful accounts			
S S E	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
s	10	a investments — U.S. and state government obligations (attach schedule)	10,416.	7,786.	7,786.
		b Investments — corporate stock (attach schedule)	2,442,784.	2,554,329.	2,554,329.
	4	c Investments — corporate bonds (attach schedule)			
			261,175.	4,035,062.	4,035,062.
	11	equipment basis	44 (47)		
		Less. accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)	9,563.	0.	0.
	14	Land, buildings, and equipment basis 293, 831.		4.762346	
		Less accumulated depreciation			
		(attach schedule)	28,600.	177,611.	177,611.
	15	· · · · · · · · · · · · · · · · · · ·			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	22,055,473.	21,421,530.	21,421,530.
L	17	Accounts payable and accrued expenses	3,998.		
A	18				
B	19	Deferred revenue			1.0
Į.	20	Loans from officers, directors, trustees, & other disqualified persons	800,272.	813,201.	
ī	21	Mortgages and other notes payable (attach schedule)	000/1100		
Ţ	22		2,341,842.	2,341,842.	
E S	23		3,146,112.	3,155,043.	
<u> </u>	+==	Foundations that follow SFAS 117, check here	3,140,112.	3,133,043.	
		and complete lines 24 through 26 and lines 30 and 31.			
NF	24				
TN	25	Temporarily restricted			
D	26			1	
A B S A L A		Foundations that do not follow SFAS 117, check here . ► X and complete lines 27 through 31.			
ĒĹ	27	• • • • • • •			
SN	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
OE	29	Retained earnings, accumulated income, endowment, or other funds	18,909,361.	18,266,487.	
RS	30		18,909,361.	18,266,487.	Wat of the
	31	Total liabilities and net assets/fund balances (see instructions)	22,055,473.	21,421,530.	
Par	till	Analysis of Changes in Net Assets or Fund Balance			
1	Tota	al net assets or fund balances at beginning of year - Part II. column	(a), line 30 (must agree v	with	
-	end-	-of-year figure reported on prior year's return)		<u>1</u>	18,909,361.
2	Ente	er amount from Part I, line 27a		2	-658,521.
3	Othe	r increases not included in line 2 (itemize) • NET_UNREALIZE	D GAIN ON INVES	TMENTS 3	15,647.
4		lines 1, 2, and 3			18,266,487.
5	Decr	eases not included in line 2 (itemize)		5	
6	Tota	eases not included in line 2 (itemize)	Part II, column (b), line 30	6	18,266,487.

Form 990-PF (2016) WALTER AND Part V Capital Gains and I	JEAN BOEK GLOBAL AUTOIMMU Losses for Tax on Investmen	NE INSTITUTE		54-1075268	Page 3
(a) List and describe	the kind(s) of property sold (e.g., real ouse; or common stock, 200 shares M	estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a			5 56,866,		
b					
С					
d					
<u> </u>	(O December of Level	(=) O+# h	1	(h) (h)	(1)
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) mi	
b					
С					·
d					
6					
Complete only for assets shown	ng gain in column (h) and owned by the	e foundation on 12/31/69		(I) Gains (Col	(b)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ı), if any		gain minus col (k), bi an -0-) or Losses (fro	rt not less
a					
b					<del> </del>
<u>C</u>					
<u>d</u>					
				1	•
<ol><li>Capital gain net income or (net or</li></ol>	apital loss)   If gain, also If (loss), enti	enter in Part I, line 7 er -0- in Part I, line 7			
3 Net short-term capital gain or (lo	ess) as defined in sections 1222(5) an		<u> </u>	<del>                                     </del>	
			]	1	
in Part I, line 8	B, column (c) (see instructions). If (los	s), enter -0- 	3		
Part V Qualification Under			nent Income	)	
(For optional use by domestic private to	foundations subject to the section 494	l0(a) tax on net investment i	ncome.)		
If section 4940(d)(2) applies, leave this	s nart hlank				
	•				
Was the foundation liable for the section			eriod?	Yes	No
If 'Yes,' the foundation does not qualify					
<del></del>	each column for each year; see the in		ny entries.	(-1)	<del></del>
(a)  Base period years  Calendar year (or tax year  beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use ass	ets	(d) Distribution (col. (b) divided	
2015					
2014					
2013					
2012	· · · · · · · · · · · · · · · · · · ·			<del></del>	
2011				<b>T</b>	
. , ,			2		· .
3 Average distribution ratio for the number of years the foundation	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears	3		
4 Enter the net value of noncharita	able-use assets for 2016 from Part X,	line 5	· · · · ·   <u>4</u>		· <del>-</del> .
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)		6	<u> </u>	
7 Add lines 5 and 6					· · ·
	m Part XII, line 4		ــــــ		·
If line 8 is equal to or greater that Part VI instructions	an line 7, check the box in Part VI, line	a 1b, and complete that part	using a 1% tax	rate. See the	

Form	1990-PF (2016) WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE INSTITUTE	E 4 ·	1075	260		D	age 4
	t.VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948						ago -
1 :	Exempt operating foundations described in section 4940(d)(2), check here   and enter 'N/A' on line 1.	- 500	Instru	Ction	s)	p. 95, 110 1	enier I
	·			NI W		Ya ka	Av. Kara
		_					
	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	fater times	65 1400 Maria	3,2	64.
	check here . Dand enter 1% of Part I, line 27b						
•	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			Marie Care Care Care Care Care Care Care Car			Maria Maria
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				Ο.
3	Add lines 1 and 2		3			3,2	64.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			•	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		5			3,2	64.
6	Credits/Payments:		45.73				
a	2016 estimated tax pmts and 2015 overpayment credited to 2016						
	Exempt foreign organizations — tax withheld at source	-					
	Tax paid with application for extension of time to file (Form 8868) 6 c						
	I Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d		7		Na Proces		1336223
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached		8				0.1
			9				91.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		-			3,3	<u> 55.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	• -	10				0.
11	Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded	<u>· · · · · · </u>	11				
ra:	t VII-A Statements Regarding Activities				F-3 38238 F		
1 a	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?				1 a	Yes	No X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?				1 b		х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials public or distributed by the foundation in connection with the activities.	lished					
	Did the foundation file Form 1120-POL for this year?				1 c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				1000	4. N	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					W-74	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of foundation managers ► \$	n .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		Х
•	If 'Yes,' attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes				3		Х
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4 a		X
	of Yes,' has it filed a tax return on Form 990-T for this year?				4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	• • •		• • •	5		- <del>-</del> -
•	If Yes, attach the statement required by General Instruction T.				S22-24	eraund.	X
	• •				2.5		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				200		1.2
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that co with the state law remain in the governing instrument?				6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If Yes,' complete Part II, col (c), and Part XV				7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-					
	DISTRICT OF COLUMBIA	_		_		300	
ŀ	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			_		7.4	
•	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation				8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	10/2/	W5)		50.0	1-1	771
3	for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete	Part 2	XIV .		9	_X	

BAA

	1990-FF (2010) WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE INSTITUTE	<u>54-1</u>	0/526	<u> </u>		age 5
Pa	ttVII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)			11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pe advisory privileges? If 'Yes,' attach statement (see instructions)			12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	cation? .	<i>.</i>	13	Х	
14	Website address	no	(703)	402	-374	5
	Located at 10020 PARK ROYAL DRIVE GREAT FALLS VA ZIP+4	2206	6			
15	Located at 10020 PARK ROYAL DRIVE GREAT FALLS VA ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year		5	• • •	. •	Ц
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	over a		16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country					
Pai	T.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.			*67	Yes	No
1 a	During the year did the foundation (either directly or indirectly):		_			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo		ij	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	XYes	No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	XNo		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X Yes	∐ No ∣			30 F
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	Yes	X No			
t	o 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)?		<u></u>	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here	•		9		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?			1 c		X
2	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)):					
a	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?	Yes	X No			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20					
t	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 all years listed, answer 'No' and attach statement — see instructions.)			2 b	4	
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			1381		4
	► 20, 20, 20, 20			W.		<b>.</b>
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	olf 'Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.)			3 b		
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?			4 b		X
BAA			Fo		0-PF (	
					1	/

Form 990-PF (2016) WALTER AND JEAN BOEK			54-107	75268 Page <b>6</b>
Part VII-B Statements Regarding Activiti		4720 May Be Req	uired (continued)	
5 a During the year did the foundation pay or incur ar	•			
(1) Carry on propaganda, or otherwise attempt to	,	* **	· · · Yes X	No
<ul> <li>(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration</li> <li>(3) Provide a grant to an individual for travel, stu-</li> </ul>	n drive?`			No .
(4) Provide a grant to an organization other than				
in section 4945(d)(4)(A)? (see instructions)			· · · · Yes X	No :
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	of cruelty to children or ar	nimals?	Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b
Organizations relying on a current notice regards	ng disaster assistance ch	neck here		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible	ility for the grant?	<i></i>	Yes	No la
If 'Yes,' attach the statement required by Regulat				
6 a Did the foundation, during the year, receive any f on a personal benefit contract?				No
b Did the foundation, during the year, pay premium	is, directly or indirectly, o	n a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870.  7 a At any time during the tax year, was the foundation	on a party to a prohibited	tay chalter transaction?	TVas V	No.
b If 'Yes,' did the foundation receive any proceeds				herenes bace remelatives
Part VIII Information About Officers, D				
and Contractors				
1 List all officers, directors, trustees, foundation		ompensation (see inst		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SANDRA BOEK WERNESS				
10020 PARK ROYAL DRIVE	PRESIDENT & CEO		_	_
GREAT FALLS VA 22066	70.00	190,000.	<u> </u>	0.
ALFREDA JONES, M.D.	mora cupup			
10020 PARK ROYAL DRIVE GREAT FALLS VA 22066	TREASURER 5.00	0.	0.	0.
SUSAN GERBER	3.00	<u></u>	<u> </u>	<u> </u>
10020 PARK ROYAL DRIVE	SECRETARY			
GREAT FALLS VA 22066	1.00	0.	0.	0.
MARLENE BEKEY				
10020 PARK ROYAL DRIVE	GOVERNOR		18	i e
GREAT FALLS VA 22066	1.00	0.	0.	0.
2 Compensation of five highest-paid employee	_ <del>`</del>	luded on line 1 – see ir		nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			· · · · · · · · · · · · · · · · · · ·	
				<b></b>
				1
			L	
				ļ
			<u></u>	<u> </u>
Total number of other employees paid over \$50,000 .	<u> </u>	<u> </u>	<u> </u>	None

Form 990-PF (2016) WALTER AND JEAN BOEK (	SLOBAL AUTOIMMUNE INS	FITUTE 54-107	
Part VIII Information About Officers, Dand Contractors (continued)	irectors, Trustees, Fou	indation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for	or professional services (see	instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid r	nore than \$50,000	(b) Type of service	(c) Compensation
HARRY BRASWELL, INC.		REPAIRS AND MAINTENANCE	
312 CALVERT AVE		TO LOWELL STREET	
ALEXANDRIA	VA 22301	PROPERTY	176,510.
		_	
		_	
<del></del>	<del></del>		
		-	
		-	
		<del></del>	<del></del>
		-	1
~		-	
Total number of others receiving over \$50,000 for pro	fessional services	<u> </u>	None
			None
Part IX-A Summary of Direct Charitable	Activities		
List the foundation's four largest direct chadtable activities during	the tay year. Include relevant statistic	al information such as the number of	
List the foundation's four largest direct charitable activities during organizations and other beneficiaries served, conferences conveniences.	ed, research papers produced, etc	a mornation such as the number of	Expenses
1 SEE STATEMENT A			
			680,591.
2			
	<del></del>		
3			
4			
~-~-			
DELIVER S	11		
Part IX-B Summary of Program-Related  Describe the two largest program-related investments			Amount
1	made by the loundation duffi	g the tax year on lines I and z.	Amount
'			
2	<del></del>		<del></del>
All other program-related investments See instruction	ns.	<del></del>	
3			
~-~			
~-~-			
Total. Add lines 1 through 3	<del> </del>		
DAA			Farm 000 PE (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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

BAA

Form 990-PF (2016)

680,591

680,591

3 b

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7	<b>表现发现</b> 了			0
2 Undistributed income, if any, as of the end of 2016.		1.74 Page 1.25 Page 1.		0.
a Enter amount for 2015 only				
b Total for prior years 20 , 20 , 20			Section of the section of the	
3 Excess distributions carryover, if any, to 2016				
a From 2011				
<b>b</b> From 2012				
c From 2013				
<b>d</b> From 2014				
• From 2015				
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from Part			1 5 5 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
XII, line 4. \$ 680,591.				
a Applied to 2015, but not more than line 2a				
Applied to undistributed income of prior years     (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)		温息机		
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus	680,591.		10 m	
5 Excess distributions carryover applied to 2016 (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	不多准备			
Indicated below: a Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
}	680,591.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.	医基基基	
© 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		0.		
Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions			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 (see instructions)	0.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	680,591.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013 0 .				
C Excess from 2014 0 .			,,,,*	
d Excess from 2015 0 .		* *		
e Excess from 2016 680,591.		, ,		,
BAA				Form <b>990-PF</b> (2016)

Form 990-PF (2016) WALTER AND JEAN BOI	EK GLOBAL AUTOIN	MUNE INSTITUT	E	54-1075268	Page 10
Part XIV Private Operating Founda	<del></del>				
1 a If the foundation has received a ruling or de , is effective for 2016, enter the date of the ru	termination letter that	ıt ıs a private operati	ing foundation, and t	he ruling	
b Check box to indicate whether the foundation	•		ned in section	X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net				L-1	
income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
each year listed	163,197.		!	1	163,197.
<b>b</b> 85% of line 2a	138,717.				138,717.
c Qualifying distributions from Part XII, line 4 for each year listed	680,591.				680,591.
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	680,591.	0.	0.	0.	680,591.
3 Complete 3a, b, or c for the alternative test relied upon.					<del></del>
a 'Assets' alternative test - enter:	1 1			ĺ	
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			·		
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				
(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 organizations as provided in section 4942()(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	foundation had	l \$5,000 or more	in
assets at any time during to Information Regarding Foundation Mana	<del></del>	structions.)			
a List any managers of the foundation who had close of any tax year (but only if they have of	ive contributed more t			d by the foundation b	efore the
NONE					
b List any managers of the foundation who over a partnership or other entity) of which the for NONE	vn 10% or more of the undation has a 10% o	stock of a corporation greater interest.	on (or an equally lar	ge portion of the own	ership of
2 Information Regarding Contribution, Gra	nt Gift Loan Schol	arship atc Progra	ms.		
Check here X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d.	akes contributions to	preselected chantab	le organizations and	does not accept uns	olicited tions,
a The name, address, and telephone number	or e-mail address of t	he person to whom a	applications should t	oe addressed:	
		·			
b The form in which applications should be so	bmitted and information	on and materials the	y should include:		
c Any submission deadlines:		<del></del>			
d Any restrictions or limitations on awards, su	ch as by geographica	l areas, chantable fie	elds, kınds of instituti	ons, or other factors:	
<del></del>					200 87 (2012)
BAA	TEE	A0310 12/16/16		F	orm <b>990-PF</b> (2016)

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)  a Paid during the year	or substantial contributor	<del></del>		<del></del>		
CHILDREN'S NATIONAL MEDICAL CEN	red	}	FUNDING OF			
111 MICHIGAN AVENUE, NW	LLIC		COOPERATIVE			
	10 NONE	501 (C) (3)	PROGRAM	500,000.		
URBAN ECOSYSTEM RESTORATIONS		] ````	i.	•		
6106 HARVARD AVENUE #213		1				
	12 NONE	501 (C) (3)	GENERAL SUPPORT	5,000.		
THE ORDER OF ST. JOHNS		1	1			
1850 M STREET NW, STE 1070	26 2027	[501.403.403	CENTER ALL CHEROCOM	1 050		
	36 NONE	[501 (C) (3)	GENERAL SUPPORT	1,050.		
JAMES RENWICK ALLIANCE 4405 EAST WEST HIGHWAY #510			Ì			
	14 NONE	501 (C) (3)	GENERAL SUPPORT	1,000.		
200	TT INONE	301(0)(3)	CENERAL SOLFORI	1,000.		
	ľ			]		
		1				
			}			
	1	1				
			}			
		1				
				}		
			1			
	}		1			
			1			
Total				507,050		
b Approved for future payment		1	T	301,030		
	1					
	}					
				l		
				<b>†</b>		
				)		
				{		
		l				
				1		
·····			<u> </u>	ļ		
Total			3b	1		

Part XVI	Analysis of Income-Producing	Activities				
	amounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(0)
,		(a) Business	(b) Amount	(c) Exclu-	(d) Amount	(e) Related or exempt function income
1 Progr	ram service revenue.	code		sion code		(See instructions.)
a				ļ		
b						
c		<u> </u>				
d						
e						
_	and contracts from government agencies					
	bership dues and assessments		<u> </u>	<b>!</b>		
	st on savings and temporary cash Investments			14	25,737.	
	ends and interest from securities	8120999978781127127838	A 2019 A . C	14	192,857.	and the first blue werk the control of
	ental income or (loss) from real estate:	(2) A (8.4 4 6 F	pakarangunang			grigaringst (Perpendit ) of re
_	financed property					
	lebt-financed property			-		
	ntal income or (loss) from personal property			1		
	r investment income			<b>-</b>		
	r (loss) from sales of assets other than inventory			14		200,245.
	ncome or (loss) from special events	<u> </u>		ļ		
	s profit or (loss) from sales of inventory		CHARANAN KATA KAMANAN CHI KATUR	35 850 <i>4</i> 33		7 7 7 1 A & 7 7 4 B A A   M B A B C 7 8 7 8 A A   M
	revenue.	+311	Market Street, St.			(#####################################
å				-	<u> </u>	
b				1	<u> </u>	
ິ				<del>                                      </del>	<u> </u>	
ď				<del> </del>		
42 0.44	41 44 (1) (1) (1)			7,32,77 <b>56</b> 0,003		
	otal. Add columns (b), (d), and (e)					200,245.
	heet in line 13 instructions to verify calculations				· · · · · · · · · · · · · · · · · · ·	418,839.
	-B Relationship of Activities to the	•	lichment of Every	nt Dur	2000	
Line No.						
Line No. ▼	Explain below how each activity for which included accomplishment of the foundation's exempt p	ome is repor urboses (oth	ted in column (e) of Part er than by providing fund	XVI-A C ds for su	ontributed importantly to ch purposes) (See instr.	the ictions.)
8	ESCROW PROCEEDS FROM SALE OF 132					
0	ESCROW PROCEEDS FROM SALE OF 132	ZO D SIKE	EI PROPERTI PREV.	100211	USED FOR CHARITA	ADDE FURFUSES.
			· = ···-			
		-			<del></del>	<del></del>
			· · · · · · · · · · · · · · · · · · ·			
· <del>- · · · · · · · · · · · · · · · · · ·</del>	<del> </del>				· · · · · · · · · · · · · · · · · · ·	
			<del></del>		<del></del>	
	·					
<del></del>				-		
			<del>-</del>			
			<u> </u>		·	
				-		

# Form 990-PF (2016) WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE INSTITUTE 54-1075268 Rart XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

described relating to	d in section 501(c) of the Code o political organizations?	v engage in any of the following with (other than section 501(c)(3) organiz	cations) or in section 527,		Yes No
	• =	to a nonchantable exempt organizati			22.5.5.5
(1) Cast	1				. 1 a (1) X
(2) Othe	rassets				. 1 a (2) X
<b>b</b> Other tra	nsactions				7.
(1) Sale	s of assets to a nonchantable e	exempt organization			. 1 b (1) X
• •		ntable exempt organization			1 b (2) X
• •		, •			
1 1		her assets			. 1 b (3) X
(4) Rein	ibursement arrangements				. 1 b (4) X
(5) Loan	is or loan guarantees			· · · · · · · · · · · ·	. 1 b (5) X
(6) Perfo	ormance of services or member	rship or fundraising solicitations			. 1 b (6) X
C Sharing o	of facilities, equipment, mailing	lists, other assets, or paid employee	s		1c X
the good any trans	s, other assets, or services give saction or sharing arrangement	s,' complete the following schedule. One by the reporting foundation. If the show in column (d) the value of the	foundation received less the goods, other assets, or se	nan fair market value rvices received	ın
(a) Line no	(b) Amount Involved (c) N	lame of noncharitable exempt organization	(d) Description of tran	nsfers, transactions, and	sharing arrangements
			<u> </u>		
		<del></del>			
<del></del>	<del></del>	<del></del>	<del></del>		<del></del>
<del></del>		<del></del>		<del></del>	<del></del>
					<del></del>
		· · · · · · · · · · · · · · · · ·			
	<del></del>	<del> </del>	<del> </del>		
<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>
					<del></del>
		- <u>-</u>			
described	indation directly or indirectly aff d in section 501(c) of the Code complete the following schedule	filiated with, or related to, one or mor (other than section 501(c)(3)) or in s	e tax-exempt organizations ection 527?	S	Yes XNo
(a)	Name of organization	(b) Type of organization	n (1	c) Description of rela	tionship
					<del></del>
		<del></del>			
1	<del></del>	<del></del>	<del></del>	<del> </del>	
Sign Here	and complete Declaration of preparer (of	usmined this return, including accompanying schoher than taxpayer) is based on all information of Usaves	edules and statements, and to the dishibition preparer has any knowledge  PRESIDENT Title	est of my knowledge and b	May the IRS discuss this return with the preparer shown below (see instructions)?
	Print/Type preparer's name	Preparer's signature	Date	Check X if	PTIN
		1211		1 –	
Paid	ROBERT E. LANE	1 ( ) ,	11/15/17	self-employed	P01622353
Preparer	Firm's name Lane &	Company, CPAs		Firm's EIN ► 52-1	738520
Use Only	Firm's address ► 1717 Pe	ennsylvania Avenue NW,	Suite 425	_	
	Washing		DC 20006	Phone no (202	463-6500
BAA					Form <b>990-PF</b> (2016)
-					. 5 555-1 (2010)

### Form 990-PF Part I, Line 6a

### **Net Gain or Loss From Sale of Assets**

2016

Name	· · · · · · · · · · · · · · · · · · ·	Employer Identification Number
WALTER AND JEAN BOEK GLOBA	L AUTOIMMUNE INSTITUTE	54-1075268
Asset Information:		
Description of Property: 13	25 D STREET SE, WASHINGTON DC 20003	
Date Acquired 12/12/72	How Acquired: Purchased	
Date Sold: 12/22/15		E ONE. LLC
<del></del>	Cost or other basis (do not reduce by depreciation)	
	0. Valuation Method: Fair Market Value	
	245. Accumulation Depreciation	
Description of Property:		
Date Acquired:	How Acquired	<del></del>
Date Sold:	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	<del></del>
Sales Expense: .	Valuation Method:	····
Total Gain (Loss)	Accumulation Depreciation:	
Description of Property	/todamatation popiedation	
Date Acquired:	How Acquired:	
Date Sold:	Name of Buyer:	
Sales Price:		
Sales Expense: .	Cost or other basis (do not reduce by depreciation) Valuation Method	
Total Gain (Loss)		
Description of Property:	Accumulation Depreciation:	
	How Acquired	
Date Acquired:	· · · · · · · · · · · · · · · · · · ·	<del></del>
Sales Price:	Name of Buyer:	<del></del>
	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property	Llau Anguerad	
Date Acquired: .	How Acquired:	
Date Sold:	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property:		
Date Acquired:	How Acquired:	
Date Sold:	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property:		
Date Acquired: .	How Acquired:	
Date Sold:	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense: -	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property:		
Date Acquired: -	How Acquired:	
Date Sold	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	

# Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes PAYROLL PROPERTY	Rev/Exp Book 9,291. 12,923.	Net Inv Inc 1, 394.	Adj Net Inc 1,394.	Charity Disb
Total	22,214.	1,394.	1,394.	3,438.

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc_	Charity Disb
LOSS ON DISPOSAL	11,510.			
INSURANCE	10,519.			
PUBLIC AFFAIRS	9,200.			9,200.
OFFICE EXPENSES	6,823.			6,823.
EQUIPMENT	1,289.			1,289.
INFORMATION TECHNOLOGY	1,814.			1,814.
DUES & SUBSCRIPTIONS	1,872.			1,872.
PROFESSIONAL DEVELOPMENT	1,819.			1,819.
OTHER	9,248.		\	9,248.

Total 54,094. 32,065.

Form 990-PF, Page 2, Part II, Line 22 Other Liab Stmt

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value
AMOUNT DUE UNDER EMPLOYMENT AGREEMENTS	2,341,842.	2,341,842.
Total	2,341,842.	2,341,842.

Walter and Jean Boek Global Autoimmune Institute Schedule of Investments by Type December 31, 2016

EIN: 54-1075268

9,862,364 3,289,990 6,464,034 Total Line 13 Other 7,786 **US Government** Line 10a Bonds 3,783,218 251,844 Corporate Line 10c Bonds 351,843 508,457 191,299 1,202,116 300,614 **Mutual Funds** Corporate Line 10b Stocks & 100,025 5,904 18,001 9,862,364 2,087,874 2,489,517 Bearing Interest-Line 2 Cash Investment Account Morgan Stanley - 631-132575-070 TD Ameritrade - 881-332852 2016 Form 990-PF, Page 2 Wells Fargo Savings 7125 Wells Fargo Savings 2665 Wells Fargo - 6180-1503 RBC - 300-13732 Weitz Fund Vanguard

13,690 351,843 778,302

100,025

300,614

21,160,863 0 7,786 4,035,062 2,554,329 14,563,685 Totals

Walter and Jean Boak Global Autoimmune Institute Schedule of Fixed Assets & Accumulated Depreciation December 31, 2016 2016 Form 990-PF, Page 2

	Date				Accumulated	Depreciation	Accumulated	Depreciation	Accumulated		Book
	Placed in	3	3	•	Depreciation	Expense	Depreciation	Expense	Depreciation	Disposals	Value
Description of Item	service Method	Method	- FE	Lost	12/31/14	12/31/15	12/31/15	12/31/16	12/31/16	12/31/16	12/31/15
Children's Furniture	VAR	ᅜ	2	17,500	10,500	3,500	14,000	3,500	17,500	0	0
5011 Lowell St Property	VAR	ᅜ	9	77,742	77,742	0	77,742	0	77,742	0	0
Equipment	8/15/2013	ĸ	ر.	3,180	901	989	1,537	989	2,173	0	1,007
Equipment	1/30/2014	ĸ	S	1,399	256	280	536	280	816	0	583
Equipment	1/30/2014	2	2	18,665	3,422	3,733	7,155		7,155	11,510	0
Furniture	2/21/2014	ĸ	S	17,500	2,917	3,500	6,417	11,083	17,500	0	0
5011 Lowell St Remodeling	11/30/2016	SI	30	176,510	0	0	0	490	490	0	176,020
				312,496	95,738	11,649	107,387	15,989	123,376	11,510	177,610
				(18,665)	(18,665) Less Disposal				(7,155 00) ו	7,155 00) Less Disposal	
				293,831	293,831 Page 2, Part II Line 14	e 14		•	116,221	116,221 Page 2, Part II Une 14	47

Walter and Jean Boek Global Autoimmune Institute 2016 Form 990-PF EIN: 54-1075268 Statement A

### Page 7, Part IX-A, Line 1:

The organization partnered with a local hospital to provide a variety of educational services to an underserved population of Celiac disease and diabetic patients and their families, their physicians and medical providers, as well as to the community at large. These included live classes, webinars, podcasts, an interactive computer game, YouTube videos, written materials for physicians and other healthcare providers, training, and the development of online resources. The webinars, podcasts, YouTube videos, and other online resources have had several thousand viewers.