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

Name of foundation THE MARENA FOUNDATION INC		A Employer identification number 58-2379368	
Number and street (or P.O. box number if mail is not delivered to street address) 2327 LAKE RIDGE TERRACE		B Telephone number (see instructions) (678) 775-6800	
City or town, state or province, country, and ZIP or foreign postal code LAWRENCEVILLE, GA 30043		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 16,151	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	35,000			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	8,300			
	12 Total. Add lines 1 through 11	43,300	0		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	61			
	24 Total operating and administrative expenses. Add lines 13 through 23	61	0		0
	25 Contributions, gifts, grants paid	87,385			87,385
	26 Total expenses and disbursements. Add lines 24 and 25	87,446	0		87,385
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-44,146			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash—non-interest-bearing	60,298	16,151	16,151		
	2 Savings and temporary cash investments					
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments—U S and state government obligations (attach schedule)					
	b Investments—corporate stock (attach schedule)					
	c Investments—corporate bonds (attach schedule)					
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12 Investments—mortgage loans					
	13 Investments—other (attach schedule)					
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15 Other assets (describe ▶ _____)						
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	60,298	16,151	16,151			
Liabilities	17 Accounts payable and accrued expenses					
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶ _____)					
	23 Total liabilities (add lines 17 through 22)		0			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds	53,030	-44,147			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund					
	29 Retained earnings, accumulated income, endowment, or other funds	7,268	60,298			
30 Total net assets or fund balances (see instructions)	60,298	16,151				
31 Total liabilities and net assets/fund balances (see instructions) .	60,298	16,151				

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	60,298
2 Enter amount from Part I, line 27a	2	-44,146
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	16,152
5 Decreases not included in line 2 (itemize) ▶ _____	5	1
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	16,151

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries


(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	189,635	9,964	19 032015
2014	157,166	10,864	14 466679
2013	98,227	2,126	46 202728
2012	170,826	6,511	26 236523
2011	166,328	7,458	22 301958
2 Total of line 1, column (d)			128 23990
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			25 647981
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			31,538
5 Multiply line 4 by line 3			808,886
6 Enter 1% of net investment income (1% of Part I, line 27b)			
7 Add lines 5 and 6			808,886
8 Enter qualifying distributions from Part XII, line 4			87,385

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
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	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ GA _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	10	Yes

Part VII-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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.MARENAFOUNDATION.ORG	13	Yes	
14	The books are in care of DAVID HELFER HELFER & COMPANY CPAS Telephone no (678) 775-6800			

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15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
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? <input type="checkbox"/>	1c		
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not 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). <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		No

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

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

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

1 List all officers, directors, trustees, foundation managers and 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 compensation	Expense account, (e) other allowances
VERA WATKINS 2327 LAKE RIDGE TERRACE LAWRENCEVILLE, GA 30043	PRESIDENT 10 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				▶

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	32,018
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	32,018
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	32,018
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	480
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	31,538
6	Minimum investment return. Enter 5% of line 5.	6	1,577

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	1,577
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,577
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	1,577
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,577

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	87,385
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	87,385
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	87,385

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				1,577
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.	165,955			
b From 2012.	170,500			
c From 2013.	98,227			
d From 2014.	156,623			
e From 2015.	189,137			
f Total of lines 3a through e.	780,442			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 87,385				
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 required—see instructions).				
d Applied to 2016 distributable amount.				1,577
e Remaining amount distributed out of corpus	85,808			
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 indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	866,250			
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 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).				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	165,955			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	700,295			
10 Analysis of line 9				
a Excess from 2012.	170,500			
b Excess from 2013.	98,227			
c Excess from 2014.	156,623			
d Excess from 2015.	189,137			
e Excess from 2016.	85,808			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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)(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) 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(j)(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 organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

DAVE HELFER HELFER COMPANY CPAS
6340 SUGARLOAF PARKWAY STE 200
DULUTH, GA 30097
(678) 775-6800
JUSTINE@HELPERCPA.COM

b The form in which applications should be submitted and information and materials they should include

REQUEST GRAND APPLICATION FROM COMPANY SEE WWW.MARENAFOUNDATION.ORG

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

BASED UPON NEED

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	87,385
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
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.					
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 <u>UNCASHED PRIOR YR QUALIFYING</u> _____					8,300
b <u>DISTRIBUTIONS PAID BY CHECK</u> _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e).					8,300
13 Total. Add line 12, columns (b), (d), and (e).			13		8,300

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship


**Sign
Here**


Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

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

**Paid
Preparer
Use Only**

Print/Type preparer's name DAVID M HELFER CPA	Preparer's Signature	Date 2017-09-07	Check if self-employed <input type="checkbox"/>	PTIN P00747669
Firm's name ▶ HELFER & COMPANY CPAS PC				Firm's EIN ▶ 26-4172450
Firm's address ▶ 6340 SUGARLOAF PKWY 200 DULUTH, GA 30097				Phone no (678) 775-6800


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ST PETER & PAUL SERBIAN CHURCH PO BOX 466036 LAWARENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	2,000
ST PETER & PAUL SERBIAN CHURCH PO BOX 466036 LAWRENCEVILLE, GA 30042	N/A	NON-PUB	CHARITABLE PURPOSES	700
JACK VAN IMPE MINISTRIES BOX 7004 TROY, MI 48007	N/A	NON-PUB	CHARITABLE PURPOSES	2,000
FRIENDS OF THE LEPERS PO BOX 1408 TUSTIN, CA 92781	N/A	NON-PUB	CHARITABLE PURPSOSES	1,000
DJO LLC 4400 LEXINGTON RIDGE DR LOGANVILLE, GA 30052	N/A	NON-PUB	CHARITABLE PURPOSES	195
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ST PETER & PAUL SERBIAN CHURCH PO BOX 466036 LAWRENCEVILLE, GA 30042	N/A	NON-PUB	CHARITABLE PURPOSES	10,150
PRISON EVANGELISM INC 510 BERING DRIVE SUITE 3 HOUSTON, TX 77057	N/A	NON-PUB	CHARITABLE PURPOSES	1,000
ST PETER & PAUL SERBIAN CHURCH PO BOX 466036 LAWRENCEVILLE, GA 30042	N/A	NON-PUB	CHARITABLE PURPOSES	4,000
LIGHTHOUSE PROJECT INTERNATIONAL 7053 HICKORY DRIVE BRASELTON, GA 30042	N/A	NON-PUB	CHARITABLE PURPOSES	300
WATKINS GARRETT AND WOODS FUNERAL 1011 AUGUSTA ST GREENVILLE, SC 29605	N/A	NON-PUB	CHARITABLE PURPOSES	4,000
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
AN THIEN CAO 815 SCENIC CREEK DRIVE LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	500
ANA SIMIC KNEZ LAZARA L3 2/14 JAGODINIA 35000 RI	N/A	NON-PUB	CHARITABLE PURPOSES	500
ANDRES CAZARES AVE DE LA JUEVENTUD S/N HUAGUECHULA PUEBLA, PUEBLA MEXICO MX	N/A	NON-PUB	CHARITABLE PURPOSES	300
ARODI MORAN DE GUZMAN RES BRISAS DEL SUR 2 PASSAGE 9 POLIGONO 9 43 SOYAPANGO ES	N/A	NON-PUB	CHARITABLE PURPOSES	400
ASUNCION MUNOZ RESENDIZ DE OHG NO 2B PROGRESO MX	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total ▶ 3a				87,385


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
AVRMOVIC SVETAN LAZEKOSTICA BR 6 BIJELJINA 7600 BK	N/A	NON-PUB	CHARITABLE PURPOSES	300
CARRIE BROOKSHIRE 3037 FORK RD GAINESVILLE, GA 30506	N/A	NON-PUB	CHARITABLE PURPOSES	3,028
CHEN SONG JI E RD 87 BLDG D SEAT ROOM 2003 GUANGDONG, KAIPING CH	N/A	NON-PUB	CHARITABLE PURPOSES	500
CHRISTINA RODRIGUEZ 115 DAVIS MILL CT LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	300
CHUN LAU LIU 409 STONE ROAD KNOXVILLE, TN 37920	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CHUONG PHAM 1223 OVERTON DRIVE LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	300
CVIJETA BOGDANOVIC CVETANOVA CUPRIJA 105 NJ BELGRADE 11000 RI	N/A	NON-PUB	CHARITABLE PURPOSES	500
DANG X ON 96/9 TUANG SIN HUNG VM	N/A	NON-PUB	CHARITABLE PURPOSES	300
DIANE LYTRAS 1220 NORWALK TERRACE LAWRENCEVILLE, GA 30043	N/A	NON-PUB	CHARITABLE PURPOSES	300
DJORDJO SUKA U1 MARINKOVIC SONJE 12 LAZAREVAC 11011 RI	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
DOBRA BRATIC BB PAZARIC 71000 BK	N/A	NON-PUB	CHARITABLE PURPOSES	400
DRAGANO BORENOVIC DZEVAR BB SANKI MOST 79260 BK	N/A	NON-PUB	CHARITABLE PURPOSES	400
DRAGICA COSIC GARDIJAN DR STRETKO BOGDANA ZERAJICA 15 BIJELJINA BK	N/A	NON-PUB	CHARITABLE PURPOSES	3,000
DUSANKA DIMITRISVEC MILENTIJA POPOVICA II PROKUPGE 18H00 RI	N/A	NON-PUB	CHARITABLE PURPOSES	300
DUSANKA MALJKOVIC MILETICEVA 27 ZRENJANIN 1181 RI	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
DUSANKA ZLAJIC BALKANSKA BB UDOVICE, SMEDEREVO 11300 RI	N/A	NON-PUB	CHARITABLE PURPOSES	300
ELSABTE AND YOSFE HABTE PO BOX 18118 ADDIS ABABA ET	N/A	NON-PUB	CHARITABLE PURPOSES	200
ELVA MANRIQUEZ CALLE 17 100 LA PAZ OBRAJES BL	N/A	NON-PUB	CHARITABLE PURPOSES	300
EMELINA ROSA MEJIA BANPRO 3 CUADRAS AL SUR BO SANTAROSA NU	N/A	NON-PUB	CHARITABLE PURPOSES	300
ERVIN MESKOVIC 1000 MEDICAL CENTER BLVD LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	1,042
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
EUDOCIA REYE MIXGUIHAULA HG C 5 DE MAY HIDALGO MX	N/A	NON-PUB	CHARITABLE PURPOSES	500
EUN A HUR 4070 RIVERJONG DRIVE SUWANEE, GA 30024	N/A	NON-PUB	CHARITABLE CONTRIBUTIONS	300
EUNMI HUR 112 SPELLMAN STREET ROOM 4051 AUGUSTA, GA 30912	N/A	NON-PUB	CHARITABLE PURPOSES	500
GARY DIANE LITTLE PO BOX 483 STATHAM, GA 30666	N/A	NON-PUB	CHARITABLE PURPOSES	400
GIGOVIC JOVANOVAĆ 10 KRAGUJEVAC 3400 RI	N/A	NON-PUB	CHARITABLE PURPOSES	400
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
GRADJIC RANKA CERSKA 8/13 TREBINJE 89101 BK	N/A	NON-PUB	CHARITABLE PURPOSES	300
HILL MARYCLARE 941 MOORES WALK LANE SUWANEE, GA 30024	N/A	NON-PUB	CHARITABLE PURPOSES	1,000
HUMBERTO LUNA R PO BOX 116713 ATLANTA, GA 30368	N/A	NON-PUB	CHARITABLE PURPOSES	1,333
HUONG THI VY 04 KIET 92 ONG ICH KHIEM, HUE VM	N/A	NON-PUB	CHARITABLE PURPOSES	200
IAN FOLKER PO BOX 13866 ATLANTA, GA 30324	N/A	NON-PUB	CHARITABLE PURPOSES	2,500
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
IDIS DINORA PORTILLO CORDOVA 353 ADDISON DRIVE WINDER, GA 30680	N/A	NON-PUB	CHARITBALE PURPOSES	300
JASON BROOKSHIRE 4363 OLD PRINCETON RIDGE GAINESVILLE, GA 30506	N/A	NON-PUB	CHARITABLE PURPOSES	886
JELENA ZEKIC PO BOX 3965 SUITE 200 ATLANTA, GA 30302	N/A	NON-PUB	CHARITABLE PURPOSES	1,795
JELENA ZEKIC PO BOX 3965 ATLANTA, GA 30302	N/A	NON-PUB	CHARITABLE PURPOSES	5,343
JELENA ZEKIC PO BOX 3965 ATLANTA, GA 30302	N/A	NON-PUB	CHARITABLE PURPOSES	2,393
Total 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
JOSE ANGEL LOPES 4203 BUFORD HIGHWAY NW APPT F1 ATLANTA, GA 30345	N/A	NON-PUB	CHARITABLE PURPOSES	1,000
KATARINA SINGLETARY 4689 COOK DR SUGARHILL, GA 30518	N/A	NON-PUB	CHARITABLE PURPOSES	300
KENDRICK MOSES 1432 RICHARD ROAD DECATUR, GA 30032	N/A	NON-PUB	CHARITABLE PURPOSES	577
KHANG NGUYEN 395 OAKLAND PLACE DRIVE LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	300
KHANG PHAN DUY HO 1198 POST HORN RUN LAWRENCEVILLE, GA 30045	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total ► 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
KIM BOWERMAN 450 ALCOVY HILLS DR LAWRENCEVILLE, GA 30045	N/A	NON-PUB	CHARITABLE PURPOSES	300
KIM FAVORS 120 DUKES ST WINDER, GA 30680	N/A	NON-PUB	CHARITABLE PURPOSES	400
KIMBERLY SHIM 942 HOLLY MEADOW DR BUFORD, GA 30518	N/A	NON-PUB	CHARITBALE PURPOSES	300
KRISTAN AND MANJA BILAKOVIC BR 1 SLATINA REPUBLIC OF SIPSKA BIH RIBNIK 79288 BK	N/A	NON-PUB	CHARITABLE PURPOSES	500
LARRY AND DEAN HENSON PO BOX 98 BOSTWICK, GA 30623	N/A	NON-PUB	CHARITABLE PURPOSES	400
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
LETAN LIEU TRAN THI HAI PHUOCHAU WARD CANGIUOC PR 31 LONGGIENG CLOCK LONGAN VM	N/A	NON-PUB	CHARITABLE PURPOSES	200
LIAN FENG DING 3890 BRADSTONE TERRACE LILBURN, GA 30047	N/A	NON-PUB	CHARITABLE PURPOSES	300
LJUBICA KOS BB VELIKA Kladusa 77230 BK	N/A	NON-PUB	CHARITABLE PURPOSES	500
LOAN VU 2122 PLANTATION COURT LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	400
LOC NGUYEN 472 STON LAND PALACE LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	400
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
LONGINO NUNEZ CALLE PRINCIPAL LA MARIEG CENTE A LA IGLESIA CATALI SANTIAGO DR	N/A	NON-PUB	CHARITABLE PURPOSES	200
LUAN PHAM 500 WATERSTONE DRIVE LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	300
LUIS A SOLANO 115 DAVIS MILL CT LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	400
MAN CHAI CHEN 1677 TURNBRIDGE LANE LAWRENCEVILLE, GA 30043	N/A	NON-PUB	CHARITABLE PURPOSES	200
MARGARET FRUIK ADDRESS NOT AVAILABLE LAWRENCEVILLE, GA 30043	N/A	NON-PUB	CHARITABLE PURPOSES	500
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MARTA ESPERANZA GARCIA RAMOS BARRIO LA BARCA GUALAN ZA ZACAPA GT	N/A	NON-PUB	CHARITABLE PURPOSES	300
MERCEDES GOMEZ YAIUDADILA HECTOR M6060 MS N U18 DENAN, GUAYAQUIL EC	N/A	NON-PUB	CHARITABLE PURPOSES	400
MIHALJO BILAKOVIC 1000 MEDICAL CENTER BLVD LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	639
MIHALJO BILAKOVIC 1000 MEDICAL CENTER BLVD LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	210
MIHALJO BILAKOVIC 4400 LEXINGTON RIDGE DR LOGANVILLE, GA 30052	N/A	NON-PUB	CHARITABLE PURPOSES	334
Total ▶ 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MIHAYLO BILAKOVIC 4400 LEXINGTON RIDGE DRIV LOGANVILLE, GA 30052	N/A	NON-PUB	CHARITABLE PURPOSES	500
MS SKOUN VING GORUP 8 POUM ROONG VILLAG HOUS 15 BATTAMBANG CB	N/A	NON-PUB	CHARITABLE PURPOSES	300
NADA BJELAJAC SARAJVKA BB PRIJEDA BK	N/A	NON-PUB	CHARITABLE PURPOSES	300
NAHIMA ORTEGA DEL CANTRO DE SALUD IC AB CAMOAPA NU	N/A	NON-PUB	CHARITABLE PURPOSES	300
NGUYEN QUY 767 CAMELOT WAY NORCROSS, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	500
Total 3a				87,385


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
NGUYEN TAT BAO AN THON 2 DOI 9 TRINH XA VM	N/A	NON-PUB	CHARITABLE PURPOSES	300
NGUYEN THAI SAU 132/39/42/7A HUNG VUONG CHAN HO VM	N/A	NON-PUB	CHARITABLE PURPOSES	300
NGUYEN THI NHUNG 9 CUU LONG F2 Q TAN BINH HO CHI MINH CITI VM	N/A	NON-PUB	CHARITABLE PURPOSES	400
NOLVICA MRSIC 1223 BLAZING RIDGE WEST LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	300
NORRIS DEBORAH 452 5TH AVENUE WINDER, GA 30680	N/A	NON-PUB	CHARITABLE PURPOSES	408
Total ► 3a				87,385


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
PABLO RAMIREZ SANTO TOMAS BARRIO 195 MER PASAGE PAL 2 SAN SALVADOR ES	N/A	NON-PUB	CHARITABLE PURPOSES	300
PETER ANDRIC OBUDOVAC II SAMAC BIH 76235 BK	N/A	NON-PUB	CHARITABLE PURPOSES	500
PHAM THI TIN THOI NHAT Q12 TPHCM 43/1 CHO LAC QUANG PHUONG TAN VM	N/A	NON-PUB	CHARITABLE PURPOSES	300
QUY NGUYEN 767 CAMELOT WAY NORCROSS, GA 30071	N/A	NON-PUB	CHARITABLE PURPOSES	200
RADENKA AND NEVENKA SARENAC SUMULOVAV BB 5700 PALE BK	N/A	NON-PUB	CHARITABLE PURPOSES	400
Total 3a				87,385


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
RADMILA BOZIC NIKOLE DEMONSE BR 34E BATAJNICA RI	N/A	NON-PUB	CHARITABLE PURPOSES	300
RAFAELA CIRIACO AVENIDA 16 DE SEP NO 10 COLONIA BENITO JUAREZ SAN PEDRO MX	N/A	NON-PUB	CHARITABLE PURPOSES	300
RODOLJUB SOBO 2091 HARRISON RIDGE COURT LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	2,041
RONG LIU 2800 HARRINGTON WOODS CT APT 10-2014 LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	200
ROSEMARY TRAN 233 BROOK LEA COVE LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	400
Total 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
SENAYT AND MIMI HABTE PO BOX 18118 ADDIS ABABA ET	N/A	NON-PUB	CHARITABLE PURPOSES	200
SHANTEL COOKE 159 SHADOWHILL LANE LOGANVILLE, GA 30052	N/A	NON-PUB	CHARITABLE PURPOSES	500
SITA AHMIC SANDJACKA 32 SARAJEVO 71000 BK	N/A	NON-PUB	CHARITABLE PURPOSES	400
SLAVOJKA PANIC TREBAVSKIH SRPKIH BRIG 96 DOBOJ 74000 BK	N/A	NON-PUB	CHARITABLE PURPOSES	300
TANG DING PHAM 525 LENDL LANE LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
THANH LE 4 ST BINH CHANH SAI GON CITY VM	N/A	NON-PUB	CHARITABLE PURPOSES	500
THON H NGUYEN 431 FRESHMAN DRIVE LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	300
THUY LE 9 TRA KHUC F2 Q TAN BNH THANH PHO, SAIGON VM	N/A	NON-PUB	CHARITABLE CONTRIBUTIONS	1,000
THUYHAN NGUYEN 743 WATERHOUSE WAY LAWRENCEVILLE, GA 30046	N/A	NON-PUB	CHARITABLE PURPOSES	400
TIN HO 845 N HAMPTON DRIVE NORCROSS, GA 30071	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
TITH CHHORN 413 LAKE NORTH DRIVE LAWRENCEVILLE, GA 30047	N/A	NON-PUB	CHARITABLE PURPOSES	200
TRUONG THI SANH LOC VINH CLOCK LOC HUNY WARD TAY NINH, TRANG BANG PROVIN VM	N/A	NON-PUB	CHARITABLE PURPOSES	300
TSIGE DEMEKO 2313 CRIMSON CREEK LANE SNELLVILLE, GA 30078	N/A	NON-PUB	CHARITABLE PURPOSES	300
TUY THI NGUYEN QUANG PHUI MY TAN THARH BARIA VANG TAU VM	N/A	NON-PUB	CHARITABLE PURPOSES	200
VERISAVJEVIC MARIJA BOROJEVICI 113 HRRATSKA, KASTAJNICA HR	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total ► 3a				87,385

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
VESNA BRATIC 341 NORTHWAY PARK RD APT 7 MACHESNEY PARK, IL 61115	N/A	NON-PUB	CHARITABLE PURPOSES	500
XIE YONG HAO 1932 POST OAK ROAD BIRMINGHAM, AL 35216	N/A	NON-PUB	CHARITABLE PURPOSES	300
YAN BIN ZHU 48 GLOSTER PARK CT LAWRENCEVILLE, GA 30044	N/A	NON-PUB	CHARITABLE PURPOSES	200
ZAJIRN HODZIC BB LIVNO 80208 BK	N/A	NON-PUB	CHARITABLE PURPOSES	500
ZORA MAGAZIN SERBIA MILENTIA POPOVICA SREMSKA KAMENICA, HOO RI	N/A	NON-PUB	CHARITABLE PURPOSES	300
Total 				87,385
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
SONAL LADHANI 650 PROGRESS AVENUE LAWRENCEVILLE, GA 30043	N/A	NON-PUB	CHARITABLE PURPOSE	3,711
Total 				87,385
3a				

TY 2016 Other Decreases Schedule

Name: THE MARENA FOUNDATION INC
EIN: 58-2379368

Description	Amount
ROUNDING	1

TY 2016 Other Expenses Schedule**Name:** THE MARENA FOUNDATION INC**EIN:** 58-2379368**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK SERVICE CHARGES	61			

TY 2016 Other Income Schedule

Name: THE MARENA FOUNDATION INC

EIN: 58-2379368

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
UNCASHED PRIOR YR Q DISTRIBS	8,300		8,300

**TY 2016 Substantial Contributors
Schedule****Name:** THE MARENA FOUNDATION INC**EIN:** 58-2379368**Name****Address**

VDML INC

2327 LAKE RIDGE TERRACE
LAWRENCEVILLE, GA 30043