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Form **990-PF**

Return of Private Foundation

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

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

2016

Ī	or o	alen	dar year 2016 or tax year beginning	<u> </u>	, and ending		
	Nar	ne of	foundation			A Employer iden	tification number
	_						4444
-			DOROTHY ATKINSON FOUNI		Room/suite	81-251	
			,	CHARLES ST	2300	B Telephone num	nber 9 ~ 2800
-			own, state or province, country, and ZIP or foreign		<u> 2</u> 300		ication is pending, check here
			rimore, MD 21201	postal code		If exemption appli	cation is pending, check here
-			all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign orga	anizations, check here
			Final return	Amended return	,		
		_	Address change	Name change		2. Foreign organii check here and	zations meeting the 85% test, d attach computation
i	1 C	heck	type of organization: X Section 501(c)(3) e	xempt private foundation		E If private found	fation status was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation		507(b)(1)(A), check here
- 1	Fa	ır ma	·	ting method: X Cash	Accrual	F If the foundatio	on is in a 60-month termination
				Other (specify)		under section 5	507(b)(1)(B), check here
г	<u> </u>		5,881,996. (Part I, col	umn (d) must be on cash	basis)		(4)
Ĺ	Pa	nt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted income	for charitable purposes
-		<u></u>	necessarily equal the amounts in column (a))	5,607,949.		N/A	(cash basis only)
		1 2	Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B	3,007,343.		N/A	
		3	Interest on savings and temporary cash investments				
		4	Dividends and interest from securities	23,453.	23,453	•	STATEMENT 1
		5a	Gross rents				
		b	Net rental income or (loss)				
	ø.	6a	Net gain or (loss) from sale of assets not on line 10	45,867.		` `	
	Ž	b	Gross sales price for all assets on line 6a 262,946.				
	Revenue	7	Capital gain net income (from Part IV, line 2)		45,867	•	
	ш	8	Net short-term capital gain		CEVED		
		9	Income modifications Gross sales less returns	0,	101		
			and allowances		1 7 2017	-	
			Less Cost of goods sold Gross profit or (loss)	비	1.7		
		11	Other income	ng	TEN III		
		12	Total. Add lines 1 through 11	5,679-269	69,320	•	
•		13	Compensation of officers, directors, trustees, etc	0.	0		0.
		14	Other employee salaries and wages				
		15	Pension plans, employee benefits				
	Se	1	Legal fees				
	Expenses		Accounting fees				
2017			Other professional fees			 	
2	Administrative		Interest			 	
8 2	str	18 19	Taxes Depreciation and depletion				
	in in	20	Occupancy			 	
MAY	Adr	21	Travel, conferences, and meetings				
	and	22	Printing and publications				
SCANNED	ĝ	23	Other expenses STMT 2	625.	625	•	0.
\mathbb{Z}	perating	24	Total operating and administrative			ļ	
	ğ	ı	expenses. Add lines 13 through 23	625.	625	•	0.
C.	J	25	Contributions, gifts, grants paid	0.	ļ 	 	0.
T3		26	Total expenses and disbursements.	625.	625		0.
		27	Add lines 24 and 25 Subtract line 26 from line 12;	045.	0,25	•	
		ŀ	Excess of revenue over expenses and disbursements	5,676,644.		ł	
		i	Net investment income (if negative, enter -0-)		68,695	•	
			Adjusted net income (if negative, enter -0-)			N/A	

<u>For</u>	m 99	0-PF (2016) THE DOROTHY ATKINSON	FOUNDATIO	ON, INC.	81-	2511111	Page 2
ſΡ	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		ng of year		of year	
			(a) Boo	k Value	(b) Book Value	(c) Fair Market	
	1	Cash - non-interest-bearing			<u>341,816.</u>	341	<u>,816.</u>
		Savings and temporary cash investments	<u> </u>			ļ	
	3	Accounts receivable >	 				
		Less; allowance for doubtful accounts					
	4	Pledges receivable	_			Ì	
	_	Less: allowance for doubtful accounts				<u> </u>	
	1 -	Grants receivable					
	٥	Receivables due from officers, directors, trustees, and other					
	7	disqualified persons Other notes and loans receivable					
	′	Less; allowance for doubtful accounts	-	ļ			
10	8	Inventories for sale or use					
ssets		Prepaid expenses and deferred charges					
As	1	Investments - U.S. and state government obligations	}			 	
	l	Investments - corporate stock	-				
	!	Investments - corporate bonds					
	1	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation		ĺ			
	12	Investments - mortgage loans					
	13	Investments - other STMT 5		0.	5,345,785.	5,540	,180.
	14	Land, buildings, and equipment; basis					
		Less accumulated depreciation					
	15	Other assets (describe ►	_)				
	16	Total assets (to be completed by all filers - see the					
_		instructions. Also, see page 1, item I)		0.	<u>5,687,601.</u>	5,881	<u>,996.</u>
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				-	
jab.	21	Mortgages and other notes payable				-	
_	22	Other liabilities (describe	_)			-	
			ļ		0	}	
	23	Total liabilities (add lines 17 through 22)	- 	0.	0.	1	
		Foundations that follow SFAS 117, check here	-				
S		and complete lines 24 through 26 and lines 30 and 31.					
Net Assets or Fund Balances	24	Unrestricted Temporarily restricted		——— —		1	
3ala	25 26	Permanently restricted				1	
ğ	20	Foundations that do not follow SFAS 117, check here	1 			1	
Ē	ļ	and complete lines 27 through 31.	-				
ō	27	Capital stock, trust principal, or current funds		0.	5,687,601.	1	
sets	28	Paid-in or capital surplus, or land, bldg, and equipment fund		0.	0.		
Ass	29	Retained earnings, accumulated income, endowment, or other funds		0.	0.]	
É	30	Total net assets or fund balances		_ 0.	5,687,601.]	
_							
	31	Total liabilities and net assets/fund balances		0.	<u>5,687,601.</u>	<u> </u>	
	art	Analysis of Changes in Net Assets or Fund	d Balances				
						T	
1		I net assets or fund balances at beginning of year - Part II, column (a),	line 30			}	_
	•	st agree with end-of-year figure reported on prior year's return)			1		0.
2		r amount from Part I, line 27a		ann ar-	2	5,676	
3		r increases not included in line 2 (itemize)		SEE STA			<u>,957.</u>
		lines 1, 2, and 3			4	5,687	
5		eases not included in line 2 (itemize)	II agluma /b\ li=-	20	5	5,687	<u>0.</u>
<u>6</u>	ı ot <u>a</u>	I net assets or fund balances at end of year (line 4 minus line 5) - Part	n, column (b), line	JU		Form 990-	

	DOROTHY ATKINSO and Losses for Tax on I			INC.	81-	2511111 Page 3
(a) List and descri	ribe the kind(s) of property sold (e. irehouse, or common stock, 200 sl	.g., real estate,		(b) How acquired P - Purchase D - Donation	(c) Date acqu (mo., day, y	
1a				D Donation		
b SEE ATTACHED	STATEMENT					
_ <u>c</u>						
_d				<u> </u>		
_e					1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain d (e) plus (f)	
a						
_b						
_c		<u> </u>				
_d			015 05			45.065
e 262,946.	us som in column (h) and owned by	the foundation	217,07	/9.		45,867.
Complete only for assets showin	ig gain in column (h) and owned by	·			(I) Gains (Col. (I col. (k), but not le	h) gain minus ess than -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 1 -	col. (j), if any		Losses (from	
_a						
_ <u>b</u>		 				
_ <u>c</u>		 				
_d		 				45,867.
_e	C.II	D + 1 +		7		45,007.
2 Capital gain net income or (net ca	pital loss) $ \begin{cases} & \text{if gain, also entity} \\ & \text{if (loss), enter} \end{cases} $	er in Part I, line 0- in Part I, line	7 2.7	} 2		45,867.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) a	and (6):				
If gain, also enter in Part I, line 8,	column (c).			}		4-
If (loss), enter -0- in Part I, line 8	nder Section 4940(e) fo	r Dodugos	1 Tay on Not	Investment	Incomo	N/A
<u></u>					ilicollie	37 / 3
(For optional use by domestic private	e toundations subject to the section	1 4940(a) tax or	net investment ii	ncome.)		N/A
If section 4940(d)(2) applies, leave the	nis part blank.					
Was the foundation liable for the sect	tion 4942 tay on the distributable a	mount of any v	ear in the hase ne	riod?		Yes No
If "Yes," the foundation does not qual			•			100100
	each column for each year; see the			entries.		
(a)	(b)			(c)		(d) Distribution ratio
Base periód years Calendar year (or tax year beginnii	ng in) Adjusted qualifying d	istributions	Net value of no	oncharitable-use ass	sets (col.	(b) divided by col. (c))
2015						
2014						
2013						
2012						
2011			L			
2 Total of line 1, column (d)	5 b	l an line O bir 5	ar bu tha numba	r of works	2	
3 Average distribution ratio for the		ii on line 2 by 5	, or by the numbe	r or years	3	
the foundation has been in exister	nice ii less than 5 years				3	
4 Enter the net value of noncharitab	ole-use assets for 2016 from Part X	(, line 5			4	
5 Multiply line 4 by line 3					5	
6 Enter 1% of net investment incon	ne (1% of Part I, line 27h)				6	
	(or t with mile Ero)					
7 Add lines 5 and 6					7	
8 Enter qualifying distributions from	n Part XII, line 4				8	
	n line 7, check the box in Part VI, lin	ne 1b, and com	plete that part usi	ng a 1% tax rate.		
See the Part VI instructions.						Form 990-PF (2016

11020425 100310 963.100

18 Exempt operating loundations disconsed in section 4840(d)(2), check here ▶ □ and enter "NA" on line 1. Date of using or determation letter: 10 Carl other of or determation letter: 20 Carl other demosition (consists of the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27% of Part I, line 27% of Part I, line 27% of Part I, line 127, col. (b). 2 Tax under section 31 (consists section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 1 1, 37 4. 4 Subtlet A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form line 3. It zero or less, ester -0- 5 Tax based on subspection for extension of the 10 like (Form 10 like 3. It zero like 10 li	Parl	990-PF (2016) THE DOROTHY ATKINSON FOUNDATION TO THE DOROTHY ATKINSON FOUNDATION THE DOROTHY ATKINSON FOUNDATION TO THE PROPRIES FOUNDATION				511111 see instru		Page 4
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here □ and enter 1% of Part I, line 12 Part II Part 13 Part II Pa				I				
of Part I, line 27b. A did ther domestic foundations enter 2% of time 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-) 3 1, 374. 3 1, 374. 3 1, 374. 4 0. 5 Subtite A (nomestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 2. It zero or less, enter -0- 6 Betient foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Beckup withholding erroreously withheld 7 Total reddits and payments. Add line 5s darrough 6d 8 Enter any penalty for underpayment of estimated tax. Professional 2012 resistance of 2. 10 Overpayment. If line 7 is more than the total or lines 5 and 8, enter the amount overpald 10 Overpayment. If line 7 is more than the total or lines 5 and 8, enter the amount overpald 10 Overpayment. If line 7 is more than 600 during the year (either derectly or indirectly) for policial purposes (see instructions for indevinence in 1). 10 During the tax year, did the foundation as attempt to influence any national, state, or local legislation or did it participate or intervene in any patholated by the foundation line form 1120-100. In this year or local line 5 and 5 and 6 and 5 and								
c. All other domestic foundations enter 2% of the 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-) 3 1, 374. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 5 Tax based on investment incomes, Subtract line 4 from line 3, It zero or less, enter -0- 5 Tax based on investment incomes, Subtract line 4 from line 3, It zero or less, enter -0- 5 CerdstxPayments: 8 2 1016 estimated tax payments and 2015 overpayment credited to 2016 8 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to his (Form 8868) 8 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to his (Form 8868) 8 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to his (Form 8868) 8 Exempt foreign organizations - tax withheld at source 7 Total credits and payments. Add lines 5 at though 5d 8 Total credits and payments. Add lines 5a through 5d 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of weed. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of weed. 10 Overpayment, line 7, so more than 10 to be "Credited to 2017 estimated tax." 10 Overpayment, line 7, so more than 10 to be "Credited tax 0.00 to the monet overpaid 11 Enter the amount of line 10 to be "Credited to 2017 estimated tax." 12 Interest the amount of line 10 to be "Credited tax 0.00 to the moneton of the activities of the amount of line 10 to the solid lines of the foundation of the activities of the solid lines of the foundation of the activities of the foundation of the activities of the foundation of the activities of the foundation managers. 10 Lines the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 11 On the loundation have		• • • • • • • • • • • • • • • • • • • •	▶ L and e	nter 1%	1		<u>1,3</u>	<u>74.</u>
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Substite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tex grad with application for extension of time to file (Form 8888) 7 Total credits and payments. Add lines 6a through 6d 8 Einter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached 9 Tax die. It the total clines 5 and 8. enter line in line 7, enter amount owed 9 Tax die. It the total clines 5 and 8. enter line in line 7, enter amount owerpaid 10 Overpayment. If line 7 is more than the total or lines 5 and 8. enter the amount overpaid 10 Enter the amount of line 10 to be Crieffeld to 2017 estimated tax. Provided lines 10 trains the state of lines 5 and 8. enter the amount overpaid 10 Statements Regarding Activities 11 During the tax year, add the foundation attempt to influence any national, state, or local legislation or did it participate or interverie in any penaltical campaign? 10 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition? 11 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 1 Did it spend more than \$100 during the year (either directly) or indirectly or political purposes (see instructions for the definition? 1 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 flee form 1120-PLO to this year? 1 Enter the embrusement (if any) pa		,						
3 Add lines 1 and 2 4 Subhtile A (income) tax (domestic section 4947(a)/1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment lineome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lineome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lineome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lineome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based do investment lineome. Subtract line 4 from line 3. If zero or less, enter -0- 6 Be Less or line 4 from 1 from								_
Subtitle A (income) bax (domestic section 4447 (px) 1 stusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 8 Exempt foreign organizations - tax withheld at source 6 Bb		, , , , , , , , , , , , , , , , , , , ,)thers enter -0-)				
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 C credits/Payments. 2 2016 estimated tax payments and 2015 overpayment credited to 2016							<u>1,3</u>	
6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source 7 ax paid with application for extension of time to file (Form 8859) 6 c 8 d 8 d 8 c 9 Tax due. If the total or inters of time to file (Form 8859) 8 c 8 Enter any penalty for underpayments. Add lines 6 at through 6d 7 Total credits and payments. Add lines 6a through 6d 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 17, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Denry grade (1 in the total of lines 5 and 8, enter the amount overpaid 12 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? 12 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? 13 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? 14 the answer in "Yes" for a or 15, attach a detailed description of the activities and copies of any meterials published or distributed by the foundation in connection with the activities 15 Did the foundation file Form 1120-POL for this year? 16 Enter the amount (if any) of tax on political expenditure (section 4955) imposed during the year: 17 On the foundation file Form 1120-POL for this year? 18 Enter the amount (if any) of tax on political expenditure (section 4955) imposed during the year: 19 His the foundation engaged in any activities that have not previously been reported to the IRS? 18 A the foundation engaged in any activities that have not previously been reported to the IRS? 19 His the foundation engaged in any activities that have not previously been reported to the IRS? 1			Others enter -0	-)				
a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8969) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 66 8 Enter any penalty for underpayment of estimated tax. Chock here					5		1,3	74.
b Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for undersyment of estimated tax. Check here if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Dearty III-A Statements Regarding Activities 12 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 campagin? 12 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 campagin? 13 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 campagin? 14 Uses showing the state of the definition of the definition of the definition? 15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 If the answer is "Yes" to far of 1, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities 16 Enter the remiburisement (if any) pad by the foundation during the year? 17 On the foundation. ►\$ 0 . (2) On foundation managers. ►\$ 0. 18 Enter the remiburisement (if any) pad by the foundation during the year for political expenditures as imposed on foundation managers. ►\$ 0. 18 Enter the remiburisement (if any) pad by the foundation during the year? 18 Yes, "attach a defauled description of the activities 19 Has the foundation made any changes, not previously reported to the IRS; i		·	1.1					
c Tax paid with application for extension of time to file (Form 8868) 6 Back by withholding ernoeusly withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. ▶ 9 1, 374. Part VII-A Statements Regarding Activities 14 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? 15 Dut it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 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 15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 18 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities 16 Did the foundation file Form 1120-POL for this year? 19 Catter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 19 On the foundation engaged in any activities that have not previously been reported to the IRS? 10 The the foundation managers. ▶ 0. 2 (2) On foundation managers. ▶ 0. 2 (2) On foundation managers. ▶ 0. 2 (2) On foundation managers. ▶ 3 On the similar instruments? If "Yes," attach a conformed copy of the changes? 10 The foundation have unrelated business gross income of \$1,000 or more during the year? 11 Yes, "attach has detained description of the activities 12 By state legislation that effectively amends t			1-					
d Backup withholding eroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here								
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 Enter the amount of line 10 to be "Credited to 2017 estimated tax." ► Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any nabinal, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any nabinal, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 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 of bid the foundation file Form 1120-P0L for this year? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities of the reimbursement (if any) pland by the foundation during the year? If the reimbursement (if any) pland by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0. (2) On foundation managers. ► \$ 0. (3) On the foundation managers. ► \$ 0. (4) On the foundation managers. ► \$ 0. (4) On the foundation have any activities that have not previously reported to the IRS? If "Yes," attach a detailed description of the activities 3 has the foundation have 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 4a Did the foundation have at least 55,000 in assets at any time during the year? If "Yes," attach the statemen								
8 Enter any penalty for underpayment of estimated tax. Chock here If Form 2220 is attached 9 1 x 374 . 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 verpayment. 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 Refunded 11 . Part VII-A Statements Regarding Activities Refunded 11 . Part VII-A Statements Regarding Activities Refunded 11 . 12 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? 14			_6d					
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8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NONE 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? If "No," attach explanation 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)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X								
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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? If "No," attach explanation 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)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X								ľ
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of each state as required by General Instruction G? If "No," attach explanation 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)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X								
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year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X				(0) 404043774	4	86	<u>X</u>	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X					maar			.
10 Old unity portablic boots in december of the part o								
	10 [Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	dule listing their n	ames and addresses			L C-PE	

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?

Form **990-PF** (2016)

Form 990-PF (2016) THE DOROTHY ATKINSON FOL	NDATION, INC		81-25111	11 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				1 1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y6	es X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indi			
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
4945(d)(4)(A)? (see instructions)			s X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or			
the prevention of cruelty to children or animals?			es X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described			
section 53.4945 or in a current notice regarding disaster assistance (see instri		iii riogalationo	N/A	5b
Organizations relying on a current notice regarding disaster assistance check	· ·			<u> </u>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption in		unod		1 1
expenditure responsibility for the grant?		1/A	es L No))
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1 1
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870				}
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	anagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		Transportant	(d) Contributions to	T
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
ALAN F.M. GARTEN	PRESIDENT			ì
C/O FEDDER&GARTEN, 36 S CHARLES ST				}
BALTIMORE, MD 21201	0.00	0.	0.	0.
MYRON M. OPPENHEIMER	VICE-PRESIDE	VT		
8209 ARODENE RD		!		
BALTIMORE, MD 21208	0.00	0.	0.	0.
ALAN F.M. GARTEN	SECRETARY			
C/O FEDDER&GARTEN, 36 S CHARLES ST	1			
BALTIMORE, MD 21201	0.00	0.	0.	0.
ALAN F.M. GARTEN	TREASURER	 		†——
C/O FEDDER&GARTEN, 36 S CHARLES ST				
BALTIMORE, MD 21201	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in				<u></u>
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
	devoted to position		compensation	allowances
NONE	4			31
	 	 	 	
	1		}	
	 	 	 	
	-			
	 	 	 	
	-	}	}	
	 		 	
	4		[
	L	J	L	
Total number of other employees paid over \$50,000				0 DE (0010)
			Form	990-PF (2016)

Form 990-PF (2016) THE DOROTHY ATKINSON FOUNDATION, I Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		L111 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(0) 1) po or convice	(0)
TONE		
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	3 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.	{	
3		
Total. Add lines 1 through 3	>	0.
	Fc	orm 990-PF (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

Form **990-PF** (2016)

6

Adjusted qualifying distributions. Subtract line 5 from line 4

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				22,798.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years.				
,,		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013	·			
d From 2014				
e From 2015	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$0.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		· · · · · · · · · · · · · · · · · · ·	
d Applied to 2016 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	- -	-		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract			l I	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				22,798.
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	0.			
9 Excess distributions carryover to 2017.	0			
Subtract lines 7 and 8 from line 6a	0.			<u> </u>
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016			L	5 000 DE (0040)

623581 11-23-16

Form **990-PF** (2016)

		SON FOUNDAT			11111 Page 10
Part XIV Private Operating For			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or d					
foundation, and the ruling is effective for 2		-	▶	, 	
b Check box to indicate whether the foundat		ing foundation described		4942(j)(3) or 49	942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed		<u> </u>	<u> </u>	<u> </u>	
b 85% of line 2a		<u> </u>			
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			1		
exempt activities		1			
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)					ļ
(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			 	 	
Part XV Supplementary Inform	motion /Compl	oto this part only	if the foundation	2 had \$5 000 or m	ore in accete
at any time during the	nation (Compr	ete triis part only tructions \	ii tile loullaatioi	i iiau \$5,000 or iii	ore in assets
					
1 Information Regarding Foundation		- +b 00/ -f+b- +a+al a		a facindation bafair the sla	as of any tou
a List any managers of the foundation who year (but only if they have contributed mo			itributions received by the	e toundation before the cio	ise of any tax
, , , , ,	re man wo,000). (Occ	30000011 307 (0)(2)3			
NONE					_
 b List any managers of the foundation who other entity) of which the foundation has a 			(or an equally large port	ion of the ownership of a p	artnership or
NONE	3				
	- Crest Citt Less	- Coholership etc. [Programa:		
2 Information Regarding Contribution Check here ► X if the foundation onle the foundation makes gifts, grants, etc. (si	y makes contributions	s to preselected charitabl	e organizations and does	not accept unsolicited requ	uests for funds. If
a The name, address, and telephone numbe	r or e-mail address of	rine person to whom app	nications stidulo de addre	sseu.	
b The form in which applications should be	submitted and inform	ation and materials they	should include:		
			·		
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable field	s, kinds of institutions, or	other factors:	
5228A1 11 23 16					Form 990-PF (2016
623601 11-23-16					, 5, 11, 200

► 3b 0. Form **990-PF** (2016)

Total

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)	
•	(a) Business	(b)	(C)	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a						
b						
С						
d						
e						
1						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			1 1			
4 Dividends and interest from securities					23,453.	
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			1 1			
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			1 1		45,867.	
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory		·				
11 Other revenue:						
a						
b	1					
c	1 1					
d						
e						
12 Subtotal. Add columns (b), (d), and (e)). <u> </u>	0.	69,320.	
13 Total Add line 12, columns (b), (d), and (e)	 -			13		
See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities		plishment of	Exempt P	urposes		
Line No Explain below how each activity for which is the foundation's exempt purposes (other the				I importantly to the accomp	plishment of	
DIVIDEND AND CAPITAL	CATAL TAICOL	CE TICED DO	NO CIDAN	m.c		

DISTRIBUTION	3 3 3 TD	CADIMAI	CATN	TNOOME	HCED	FOD	CD A NITIC
DIVIDENI	O AMD	CAPITAL	GAIN	INCOME	USED	FUR	GRANTS
	_						
							
	1.4						
							
				- <u>-</u>			
							
							
l							

Part XVII	Information Regarding Transfers To a Exempt Organizations	ind Transactions a	nd Relationsh	ips With Noncha	ritable	
1 Did the ord	anization directly or indirectly engage in any of the following	n with any other organization	an described in section	nn 501(c) of	Yes	s No
	other than section 501(c)(3) organizations) or in section 52			111 30 1(0) 01	•••	110
	rom the reporting foundation to a noncharitable exempt org		izations.		1 1	1
(1) Cash	to a nonananana oxomptor	jamzadon on.			1a(1)	X
(2) Other	assets				1a(2)	X
b Other trans					14(2)	+**
	of assets to a noncharitable exempt organization				1b(1)	X
	ases of assets from a noncharitable exempt organization				1b(2)	X
	of facilities, equipment, or other assets				1b(3)	X
` '	ursement arrangements				1b(4)	X
• •	or loan guarantees				1b(5)	X
(6) Perfor	mance of services or membership or fundraising solicitation	ns			1b(6)	X
c Sharing of	facilities, equipment, mailing lists, other assets, or paid emp	oloyees			10	X
d If the answ	er to any of the above is "Yes," complete the following sche	dule. Column (b) should alv	vays show the fair m	arket value of the goods, o	ther assets,	
or services	given by the reporting foundation. If the foundation receive	d less than fair market valu	e in any transaction	or sharing arrangement, s	how in	
	the value of the goods, other assets, or services received.					
(a) Line no	b) Amount involved (c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, and	sharing arrangen	nents
	N/A					
						
			 	-		
			1			
						
			 			
O le the ferr	det des ett es deseatt efficiete de units en relete de es	ar many toy avampt argany	rations described	 		
	dation directly or indirectly affiliated with, or related to, one 501(c) of the Code (other than section 501(c)(3)) or in sect		zations described		☐ Yes ☐	X No
	mplete the following schedule.	011 327 7		<u>L</u>	169 [_	- NO
U 11 163, 66	(a) Name of organization	(b) Type of organization	(() Description of relations	קור	
	N/A	<u> </u>	,		- 	
			<u> </u>			
00460	penaities of perjury, I declare that I have examined this return, includin lef,/it is /ປ e, correct, a /d complete. Declaration of preparer (other than	g accompanying schedules and i taxpayer) is based on all inform	statements, and to the blatton of which preparer	noo any knowledge	the IRS discus	s this
Sign Here	1111/9/F	8-11-17		sho	wn below (see ii	nstr)?
	ature of officer or trustee	Date	PRESID	ENI	Yes	No
	Print/Type preparer's name Preparer's si		,	Check If PTIN		
	JEFFREY WEISSMAN	1/ /// // //		self- employed		
Paid	CPA VIII		15/10/17	P0:	138360	8
Preparer	Firm's name ► FEDDER AND GARTEN	PA.		Firm's EIN ► 52-0		
Use Only		V			<u>. </u>	
	Firm's address ▶ 36 S. CHARLES STR		00	_		
	BALTIMORE, MD 212	01		Phone no. 41053		
				Fo	orm 990-P1	- (2016)

	JOOG TOT TEX ON INTEGRALICITE INCOME				
	d describe the kind(s) of property sol			(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	orick warehouse, or common stock, 2	OU SIIS. IVILU UU	D - Donation		
1a 41.546SH PNC F		_ 	P	12/22/15	
b 9217.713SH PNO	FDS		P	12/22/15	
c 83SH ADIENT	- 		P	10/31/16	
d 835SH JOHNSON			P	12/22/15	
e 700SH GLAXOSMI	THKLINE		P	12/22/15	
f 155SH IBM			P	12/22/15	
g 361SH ORACLE			P	12/22/15	12/13/16
h 1046SH PFIZER			P	12/22/15	12/13/16
CAPITAL GAINS	DIVIDENDS				
k					
m					
Π					
0					
4-1 0	(f) Depreciation allowed	(g) Cost or other basis	(h) Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		olus (f) minus (g)	
a 449.	,	462.			-13.
b 99,551.		102,409.			-2,858.
c 4,787.		3,473.			1,314.
d 36,535.		14,511.			22,024.
e 26,816.		27,847.	 -		-1,031.
f 26,119.		21,223.			4,896.
g 14,757.		13,169.			1,588.
h 34,172.	-	33,985.			187.
$\frac{1}{1}$ 19,760.		33/303.			19,760.
1 100.	' †				13/1001
k	 				
1	 				
m					
n	 				
0	 				
	ing gain in column (h) and owned by	the foundation on 12/31/69	(1) 1 0	sses (from col. (h))	
- Complete only for doors offer	(j) Adjusted basis	(k) Excess of col (I)	Gains (excess	of col. (h) gain over	col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	but r	not less than "-0-")	
a			 		-13.
b					-2,858.
C					1,314.
d					22,024.
е					-1,031.
1					4,896.
g					1,588.
h					187.
1					19,760.
					
k					
1					
m m	 				
0					
-		<u> </u>			
2 Capital gain net income or (net o	capital loss) { If gain, also enter "-(r in Part I, line 7	2		45,867.
		, I			
3 Net short-term capital gain or (le If gain, also enter in Part I, line 8	oss) as defined in sections 1222(5) ar	10 (0):	1		
If (loss), enter "-0-" in Part I, line		J	3	N/A	
,					

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

Name of the organization

Employer identification number

	THE DOROTHY ATKINSON FOUNDATION, INC.	81-2511111				
Organization type (ch	neck one)·					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Note: Only a section s	ation is covered by the General Rule or a Special Rule . 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R					
	nization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor.					
Special Rules						
sections 509 any one con	nization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 9(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a htributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the among 190-EZ, line 1. Complete Parts I and II	a, or 16b, and that received from				
year, total co	nization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ontributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or edu on of cruelty to children or animals. Complete Parts I, II, and III					
year, contrib is checked, o purpose Do	nization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions exclusively for religious, charitable, etc., purposes, but no such contributions totaled in enter here the total contributions that were received during the year for an exclusively religious on't complete any of the parts unless the General Rule applies to this organization because in aritable, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box us, charitable, etc.,				
but it must answer "N	ation that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

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

Name of organization

Employer identification number

THE DOROTHY ATKINSON FOUNDATION, INC.

81-2511111

Part I	Contributors (See Instructions) Use duplicate copies of Part I if additi	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOROTHY S ATKINSON REVOCABLE TRUST C/O FEDDER&GARTEN 36 S CHARLES ST #2300 BALTIMORE, MD 21201	\$ 5,394,809.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DOROTHY S ATKINSON REVOCABLE TRUST C/O FEDDER&GARTEN 36 S CHARLES ST #2300 BALTIMORE, MD 21201	\$213,140.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ \$ _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE DOROTHY ATKINSON FOUNDATION, INC.

81-2511111

Part II	Noncash Property (See instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	SECURITIES		
1			
		\$\$,394,809.	12/01/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \ \$	
(a)		(c)	(4)
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions)	(d) Date received
}			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
· arti			
			90, 990-EZ, or 990-PF) (

Name of org	anization			Employer identification number
THE DO	DROTHY ATKINSON FOUNDATI	ON. INC.		81-2511111
Part III	Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co	butions to organizations described	I in section 501(c)(7), (8), o	r (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 o	r less for the year (Enter this info onc	s
(a) No.	Use duplicate copies of Part III if additiona			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-				
		(e) Transfer of git	ft	
_	Transferee's name, address, and	d ZIP + 4	Relationship of tra	insferor to transferee
(-))				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held
Parti				
		(e) Transfer of git	ft	
	Transferee's name, address, and	-1 71D + 4	Polationship of tra	insferor to transferee
-	rransieree's name, address, and	J ZIF + 4	Nelationship of tra	insieror to transieree
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
Part I	(2), (2)	(0,000000		
-	1	(e) Transfer of git	ft	
-	Transferee's name, address, and	d ZIP + 4	Relationship of tra	nsferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
				
_				
		(e) Transfer of gi	rt	
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ansferor to transferee
				

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

ame(s)				Identifying Numb	er
THE DOROTH	Y ATKINSON FO	UNDATION, INC	•	81-2511	111
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/16	344.	344.	31	.000109290	
06/15/16	343.	687.	92	.000109290	
09/15/16	344.	1,031.	91	.000109290	1
12/15/16	343.	1,374.	16	.000109290	
12/31/16	0.	1,374.	135	.000109589	20
					· · · · · · · · · · · · · · · · · · ·
			·		
nalty Due (Sum of Colu	umn F)				4

^{*} Date of estimated tax payment, withholding credit date or installment due date.

612511 04-01-16

				
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
43,213	19,76	0. 23,453.	23,453.	
43,213	19,76	0. 23,453.	23,453.	
	OTHER E	XPENSES	នា	FATEMENT 2
<u> </u>	(A)	(B)	(C)	(D) CHARITABLE
	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
	625.	625.		0.
, LN 23	625.	625.		0.
	AMOUNT 43,213	AMOUNT DIVIDEND 43,213. 19,76 43,213. 19,76 OTHER E (A) EXPENSES PER BOOKS 625. , LN 23 625.	AMOUNT DIVIDENDS PER BOOKS 43,213. 19,760. 23,453. OTHER EXPENSES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 625. 625.	AMOUNT DIVIDENDS PER BOOKS MENT INCOME 43,213. 19,760. 23,453. 23,453. OTHER EXPENSES ST (A) (B) (C) ADJUSTED NET INVEST-PER BOOKS MENT INCOME 625. 625. 1, LN 23 625. 625.

FORM 990-PF OTHER INCREASE	ES IN NET	ASSETS OR	FUND	BALANCES	STATEMENT	4
DESCRIPTION					AMOUNT	
PNC INVESTMENT ACCOUNT BASIS	S ADJUSTM	ENT			10,9	57.
TOTAL TO FORM 990-PF, PART	III, LINE	3			10,9	57.
FORM 990-PF	OTHER	INVESTMEN	TS_		STATEMENT	5
FORM 990-PF DESCRIPTION	OTHER	INVESTMENT VALUATION METHOD	N	BOOK VALUE	STATEMENT FAIR MARKE	
	OTHER	VALUATIO	N	300K VALUE 5,345,785.	FAIR MARKE	т