

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



## Form 990~PF

**Return of Private Foundation** 

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

▶ 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 <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>

2016
Open to Public Inspection

2017 JUL 1, 2016 and ending JUN 30. For calendar year 2016 or tax year beginning A Employer identification number Name of foundation LOUIS & HELEN FANAROFF CHAR. FOUNDATION 52-1276724 Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 301-230-3020 16021 INDUSTRIAL DRIVE, BAY 8 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code GAITHERSBURG, MD 20877 D 1. Foreign organizations, check here G Check all that apply: Initial return Initial return of a former public charity Amended return Final return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: F If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) (from Part II, col (c), line 16) 2,648,555. (Part I, column (d) must be on cash basis.) ▶\$ 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)) (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (c) Adjusted net (b) Net investment expenses per books income income N/A' Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4,810. STATEMENT 4,810. 107,352. STATEMENT 107,352. Dividends and interest from securities 5a Gross rents 1.03831 ~"; \*\* b Net rental income or (loss) 33,296 2 (75%) 2 (75%) 2 6a Net gain or (loss) from sale of assets not on line 10 RECEIVED b Gross sales price for all assets on line 6a % /\$/\$ ! ! !! 700,092. 33,296. 42 Capital gain net income (from Part IV, line 2) 30 #£\$ c Cy . & `}{ 8 Net short-term capital gain Afgi. 63 . پرق Income modifications 10a Gross sales less returns and allowances OGDEN ŝy F- 9-78 80 ŽÂK. b Less Cost of goods sold ؠؙۯڕؖۯڰٷٵ c Gross profit or (loss) STATEMENT 3 14. 14. 11 Other income 145. 472. 145,472. Total Add lines 1 through 11 0. 0. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 0. STMT 4 195. 0. 16a Legal fees 3,700. 3.700. 0. STMT 5 **b** Accounting fees c Other professional fees 17 Interest 0. 3,455. STMT 6 3,455. 18 Taxes 19 Depreciation and depletion 20 Occupancy Other expenses

Total operating and administrative expenses. Add lines 13 through 25

Control 21 Travel, conferences, and meetings Ō. 33,960. 32,960. STMT 7 41,310. 40,115. 124,200. 124,200. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 124,200. 165,510. 40,115 Add lines 24 and 25 27 Subtract line 26 from line 12: -20,038. & Excess of revenue over expenses and disbursements 105,357. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LOUIS & HELEN FANAROFF CHAR. FOUNDATION

52-1276724

Page 2

Form 990-PF (2016)

	IS & HELEN FANAR						2-127		age 3
	and Losses for Tax on In		Income		ATTACH		TATEME acquired	(d) Date sol	
(a) List and described the control of the control o	ribe the kind(s) of property sold (e.g irehouse; or common stock, 200 shs	s. MLC Co.)		D-	w acquired Purchase Donation	(C) Date (mo., d	lay, yr.)	(mo., day, yr	
<u>1a</u>									
<b>b</b>	1			<u> </u>		<del></del> -			
<u>c</u>				<u> </u>					
<u>d</u>				<del></del>					
<u>e</u>	(f) Depreciation allowed	(a) Co.	st or other basis	Ψ-		(b) C	aın or (loss)		
(e) Gross sales price	(or allowable)		expense of sale				s (f) minus (		
a									
b									
C				-					
d 700 000		<b></b>	666 70	_		_ <del></del>			<del>.</del>
e 700,092.	a going in column (b) and sugged but	the foundation	666,79	6.				33,29	16.
Complete only for assets snowin	g gain in column (h) and owned by	T		$\dashv$			Col. (h) gain not less than		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any	_		Losses	(from col. (f	1))	
<u>a</u>		<del> </del>							
b c		<del> </del>		-+			·- <u>-</u>		
d		<del> </del>		_			<u></u>		-
e								33,29	6.
	∫ If gain, also enter	r ın Part I. line	<del></del> 7	1					
2 Capital gain net income or (net ca				ノト	2			33,29	<u> 6.</u>
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) an	id (6):			İ				
If gain, also enter in Part I, line 8,	column (c).						N/A		
If (loss), enter -0- in Part I, line 8 Part V   Qualification U	nder Section 4940(e) for	Reduced	Tax on Net I	Inves	tment Inc	ome	N/A	<del></del>	
(For optional use by domestic private									
	•	70 10(a) tan 077	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
If section 4940(d)(2) applies, leave the	nis part blank.								
Was the foundation liable for the sect	tion 4942 tax on the distributable am	ount of any ye	ar in the base peri	od?			-	Yes X	No
If "Yes," the foundation does not qual				-t		<del></del>			
1 Enter the appropriate amount in (a)		istructions bei	ore making any en			<del>-   -</del>		(d)	
Base period years Calendar year (or tax year beginnii	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncharita	ıble-use assets	1	Distrib	ùtion ratio ded by col. (c))	
2015		4,964.	<del></del>		513,045		(0011 (0) 0111	.0537	705
2014		7,872.			719,141			.0470	
2013	7	4,673.			665,654			.0280	
2012		6,500.			354,246			.0112	
2011		7,500.		2,	22 <b>4,</b> 363	·	<del></del>	.0033	372
• • • • • • • • • • • • • • • • • • •								.1433	272
2 Total of line 1, column (d) 2 Average distribution ratio for the	E year had paried duude the total (	na luna O hu E	or by the symbor	of voor		2		•143	113
3 Average distribution ratio for the state of the state o		on time z by o,	or by the number	or years	•	3		.0286	375
the foundation has been in exister	ice ii icaa iilan a youra								
4 Enter the net value of noncharitab	le-use assets for 2016 from Part X, I	line 5				4	:	2,581,84	4.
5 Multiply line 4 by line 3			-			_5		74,03	14.
C. Enter 19/ of not reconstruct	on /40/ of Dord L line 07/1							1,05	: 1
6 Enter 1% of net investment incom	е ( 1% от Рап I, IINE 2/b)			-		6_		Ι, Ο	, <del>+</del> •
7 Add lines 5 and 6						7		75,08	38.
8 Enter qualifying distributions from	Part XII, line 4	_				8		124,20	0.
	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1% 1	ax rate.	-			
See the Part VI instructions.								000 ==	
623521 11-23-16							Fe	orm <b>990-PF</b> (	2016

Form 990-PF (2016) LOUIS & HELEN FANAROFF CHAR.  Part VI   Excise Tax Based on Investment Income (Section 49-	FOUNDATION 40(a) 4940(b) 4940(e) or 49		2/6/24 Page 4 ee instructions)
			* * * * * * · · · · · · · · · · · · · ·
1a Exempt operating foundations described in section 4940(d)(2), check here and			
Date of ruling or determination letter: (attach copy of letter if n			1,054.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► A and enter 1%	<del>-    </del>	7,034.
of Part I, line 27b	III/ of Port I line 12 col (b)	".ź	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4		2	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -u-)		1,054.
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	. Others enter -0-)	5	1,054.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:	6a   2,146.	1 1	
a 2016 estimated tax payments and 2015 overpayment credited to 2016		1251	
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	2,146.
7 Total credits and payments. Add lines 6a through 6d	Markad.	7	<u> </u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ittacne0	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	1,092.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1 000 15 4 4 1	10	0.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	1,092. Refunded ▶	11	<u> </u>
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	gislation or did it participate or intervene	III	<del>                                      </del>
any political campaign?		١.٥	1 77
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pur			1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and copies of any materials publish	ed or	
distributed by the foundation in connection with the activities.  c Did the foundation file Form 1120-POL for this year?			1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t	the year		
(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation manage			
e Enter the reimbursement (if any) paid by the foundation during the year for political exper		-	
managers. > \$ 0.	Talkaro tas imposoa on rouncamen		
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?		2 X
If "Yes," attach a detailed description of the activities			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing		Г	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char-	nges		3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y	ear?	37 ·	4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ar?		5 X
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	l either:		
<ul> <li>By language in the governing instrument, or</li> </ul>			
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandal</li> </ul>	tory directions that conflict with the state	aw	
remain in the governing instrument?			6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete Part II, col (c), and Part XV	<b>,</b>	7 X
8a Enter the states to which the foundation reports or with which it is registered (see instruction MD)	etions) ►		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attorney General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation	, (,		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of	section 4942(i)(3) or 4942(i)(5) for cale	ndar	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,		-	9 X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sch			10 X
to one any personal account constitution contributors during the tax years in rest, altacut a scale			Form <b>990-PF</b> (2016)

Pa	art VII-A Statements Regarding Activities (continued)			
•			Yes	No
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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	X	
	Website address ► N/A			
14	The books are in care of ► STEVEN FANAROFF Telephone no. ► 301-23	$\frac{0-30}{2-30}$	020	
	Located at ► 16021 INDUSTRIAL DRIVE, BAY 8, GAITHERSBURG, MD ZIP+4 ► 20	877		<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fieu of Form 1041 - Check here		<b>,</b> ▶	·
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	٠.	2, 8	
	foreign country	· , *	Ŷ.	
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		V	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<del>`</del>	Yes	No
1a	During the year did the foundation (either directly or indirectly):	*	Z. ref.	12.
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		178	×
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	,	-(i)	ľ
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available	,		1.3
	for the benefit or use of a disqualified person)?		3 1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	100	Ž.	
	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.)		,	(4)10 4)12
Þ	olf any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53,4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	<del>  ``</del>		1938 1735 T
		1b		A44
	Organizations relying on a current notice regarding disaster assistance check here			
С	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			X
	before the first day of the tax year beginning in 2016?  Taylor on follows to distribute process (section 4043) (does not apply for years the foundation was a growth operating foundation.	1c		73
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	5 8 6 5 8 8	ĺ	
_	defined in section 4942(j)(3) or 4942(j)(5)):  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	1		4 2/ A
a	before 2016?  X Yes No	,		
	2015			55%
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			.30
U	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.)	2b	X	
	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
·	the provisions of section 4342(a)(z) are being applied to any of the years fisted in za, list the years here.			
22	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja	during the year?			
h	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
U	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.)	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation mivest during the year any amount in a mainter that would jeopardize its charitable purposes.  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		X

Form 990-PF (2016) LOUIS & HELEN FANAROFF CHAR. FOUNDAT		1276724 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		1
	<del></del>	<del></del>
Total number of others receiving over \$50,000 for professional services	<del></del>	▶ 0
Part IX-A   Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor	mation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1N/A		
2		
	<del></del>	
3	<del></del>	
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 1 ar	nd 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
		<del></del>
Total. Add lines 1 through 3	<u>&gt;</u> _	0.
		Form <b>990-PF</b> (2016)

Page 8

LOUIS & HELEN FANAROFF CHAR. FOUNDATION

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	$\Gamma \cdot T$	
а		1a	2,532,251.
	Average of monthly cash balances	1b	2,532,251. 88,910.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	2,621,161.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,621,161.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	39,317.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,581,844.
6	Minimum investment return. Enter 5% of line 5	6	129,092.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	 
_	foreign organizations check here and do not complete this part.)	<del></del>	129,092.
1	Minimum investment return from Part X, line 6	1	129,092.
2a	Tax on investment income for 2016 from Part VI, line 5  2a 1,054.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	<del>-                                    </del>	1 054
	Add tines 2a and 2b	2c	1,054. 128,038.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	120 020
5	Add lines 3 and 4	5	128,038.
6	Deduction from distributable amount (see instructions)	6	100 030
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7_	128,038.
P	art;XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	3	<del></del>
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	124,200.
	Program-related investments - total from Part IX-B	16	0.
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:	ý	
	Suitability test (prior IRS approval required)	3a	
	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	124,200.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<del></del>
-	income. Enter 1% of Part I, line 27b	5	1,054.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,054. 123,146.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies f	
	4040(a) radiction of tay in those were	100111001	o 00011011

Form **990-PF** (2016)

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,	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	100.0 p.10.1 to 20.0	20.0	
line 7	1			128,038.
2 Undistributed income, if any, as of the end of 2016				3 21
a Enter amount for 2015 only			124,369.	1, 4,
b Total for prior years:	,			N.
,		0.		,
3 Excess distributions carryover, if any, to 2016:	//			
a From 2011	,			
<b>b</b> From 2012	1	J		•
<b>c</b> From 2013	*	`	,	,
<b>d</b> From 2014			,	
e From 2015	1	, ,		, ,
f Total of lines 3a through e	0.	,	,	ć · ,
4 Qualifying distributions for 2016 from	, ,		~	
Part XII, line 4: ►\$124,200.	· · ·	, ,	\$ 3.7	, , , , , ,
a Applied to 2015, but not more than line 2a	· , ),	1 1	124,200.	· · · · · · · · · · · · · · · · · · ·
<b>b</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	,8*			0.
e Remaining amount distributed out of corpus	0.	* \$7.	\$ 15 5	, , ,
5 Excess distributions carryover applied to 2016	0.	., ,	N	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	18		***	*
6 Enter the net total of each column as indicated below				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	ō.			, ** } *
<b>b</b> Prior years' undistributed income. Subtract	(m) (m)		· · · · · · · · · · · · · · · · · · ·	
line 4b from line 2b	14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	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.			169.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				128,038.
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.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2012				
<b>b</b> Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

		HELEN							52-1276	724	Page 10
Part XIV   Private Operation							1 9)	<u> N/A</u>			
1 a If the foundation has received a re	•			•	ite operating	)					
foundation, and the ruling is effec				_			▶└┌─				
<b>b</b> Check box to indicate whether the				g foundation	on described		<u> </u>	4942(j)(3) or	4942(	<u>J)(5)</u>	
2 a Enter the lesser of the adjusted no		Tax ye (a) 20		(6)	2015		3 years 2014	(d) 20	12	(e) Tota	ol.
income from Part I or the minimu		(a) 20	-	(0)	12013	(6)	2014	(u) 20	13	(6) 1018	
investment return from Part X for											
each year listed	-					+		<del> </del>			<del></del>
b 85% of line 2a	VII	<u> </u>				<del>                                     </del>			<del></del>		
<ul> <li>Qualifying distributions from Part line 4 for each year listed</li> </ul>	AII,										
d Amounts included in line 2c not								<del> </del>			
used directly for active conduct of	F										
exempt activities											
e Qualifying distributions made dire	ctly					<del> </del>					
for active conduct of exempt active	•										
Subtract line 2d from line 2c  Gomplete 3a, b, or c for the alternative test relied upon:						-				<del></del>	· · · · · · · · · · · · · · · · · · ·
<ul><li>a "Assets" alternative test - enter:</li><li>(1) Value of all assets</li></ul>											
(2) Value of assets qualifying under section 4942(j)(3)(B)(i	•										
b "Endowment" alternative test - ent 2/3 of minimum investment return shown in Part X, line 6 for each years	n										
c "Support" alternative test - enter:											
(1) Total support other than gros investment income (interest, dividends, rents, payments of securities loans (section											
512(a)(5)), or royalties)						<del>-  </del> -			+		
(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 fr	om										
an exempt organization											
(4) Gross investment income											
Part XV Supplementary						if the four	ndation h	ad \$5,000	or more ii	n assets	;
at any time duri	<u> </u>		e instru	ctions.	<u> </u>						
1 Information Regarding Foun		-									
a List any managers of the foundati year (but only if they have contrib						tributions rece	eived by the f	oundation befoi	e the close of	any tax	
NONE											
<ul> <li>b List any managers of the foundation</li> <li>other entity) of which the foundation</li> </ul>					corporation	(or an equally	large portion	of the owners	nip of a partner	rship or	
NONE											
	ation o	nly makes cont	ributions to	preselect	ed charitable	organizations				for funds. If	
the foundation makes gifts, grants  a The name, address, and telephone		·	•				-	-	, D, C, allu u.	<del> </del>	
SEE STATEMENT 9											
b The form in which applications sh	ould b	e submitted and	d information	on and mat	terials they s	hould include:					
c Any submission deadlines:					-						
d Any restrictions or limitations on a	awards	s, such as by ge	ographical	areas, cha	ritable fields	, kinds of insti	tutions, or of	her factors:			

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ACTIVE MINDS NONE SUPPORT MENTAL HEALTH 2001 S STREET NW SUITE 450 EDUCATION 5,000. WASHINGTON, DC 20009 ARENA STAGE TO PROMOTE AND SUPPORT NONE PC 1101 6TH STREET SW THEATRE AND ARTS WASHINGTON, DC 20024 5,000. TO SUPPORT JEWISH AMERICA JEWISH COMMITTEE NONE 1156 15TH STREET NW COMMUNITY WASHINGTON, MD 20005 1,000. BENDER JCC OF GREATER WASHINGTON NONE PC TO SUPPORT JEWISH 6125 MONTROSE RD COMMUNITY ROCKVILLE MD 20852 10,000. BETH SHALOM CONGREGATION NONE ÞС PROMOTE RELIGION 8067 HARRIET TUBMAN LANE COLUMBIA, MD 21044 2,500. SEE CONTINUATION SHEET(S 124,200. Total b Approved for future payment NONE <u>3b</u> 0. Total

Page 12

LOUIS & HELEN FANAROFF CHAR. FOUNDATION

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	( <b>d)</b> Amount	Related or exempt function income
a				· <del></del>	
b	- <del>                                    </del>				
c	, i				
d	1				
				<del></del>	
e	_ <del>    </del>		1-	<del></del>	
g Fees and contracts from government agencies	— <del>  —  -</del>		1		<del></del>
2 Membership dues and assessments	<del> </del>				<del></del>
3 Interest on savings and temporary cash	<del></del>				
investments			14	4,810.	
4 Dividends and interest from securities			14	107,352.	
5 Net rental income or (loss) from real estate:	2 3		16. 19.8 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.		
a Debt-financed property		, y ,,	·		
b Not debt-financed property	<del> </del>		_		<del></del>
6 Net rental income or (loss) from personal	-		_		
property			1	'	
7 Other investment income	<del></del>				
8 Gain or (loss) from sales of assets other	<u> </u>				
than inventory			18	33,296.	
9 Net income or (loss) from special events	<del></del>		1-3	33,230.	<u> </u>
O Gross profit or (loss) from sales of inventory			-		
1 Other revenue:		<del></del>	1		
a MISC INCOME			01	14.	
	— <del> </del>		101		<del></del>
<del></del>		<del></del>			<del></del>
<u> </u>	1				
d	_	<del></del>			<del></del>
e2 Subtotal. Add columns (b), (d), and (e)			3.	145,472.	0
3 Total. Add line 12, columns (b), (d), and (e)			, v t		4.45 450
See worksheet in line 13 instructions to verify calculations	. \			13	143,472
					<u></u>
Part XVI-B Relationship of Activities	s to the Accom	plishment of E	xempt	Purposes	
Line No. Explain below how each activity for which i	noomo io roportod in o	olumn (a) of Part VI	L A contrib	utad importantly to the secon	anlichment of
the foundation's exempt purposes (other th			I-A CONTID	uted importantly to the accom	ipiisnment oi
the foundation's exempt purposes (other tr	an by providing funds	tor such purposes).			
		<del></del>	<u> </u>		
				<del> </del>	
	<del></del>				

Firm's address ► 11200 ROCKVILLE PIKE, #400 NORTH BETHESDA, MD 20852

Exempt Organizations    Dot the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c) organizations) or in section 527, relating to political organizations?   Transfers from the reporting foundation to a noncharitable exempt organization of:   113	Part XV				and Transactions ar		ins With Nonchar	itable		iye is
1. Die the organization directly or indirectly engage in any of the following with any other organization described in section 50 (c) of the Code (other than section 50 (c) of symmetric production of a noncharitable exempt organization of:  1. (1) Cash 1. (2) China seeks 1. (3) Cash 1. (3) Cash 1. (4) Sales of assests to a noncharitable exempt organization 1. (5) Sales of assests to an oncharitable exempt organization 1. (6) Sales of assests from a noncharitable exempt organization 1. (7) Sales of assests from a noncharitable exempt organization 1. (8) Performance of services or other assests 1. (4) Rembu sement arrangements 1. (5) Cars or of an apurantase 1. (6) Performance of services or membership or fundaming solicitations 1. (6) Cars or other assests 1. (7) Sales of assests on a noncharitable exempt organization 1. (8) Performance of services or membership or fundaming solicitations 1. (6) Cars or other products, equipment, maning lests, other assets, or paid employees 1. (7) Cash 1. (8) Cars or other paid organization 1. (8) Performance of services or membership or fundaming solicitations 1. (8) Performance of services or membership or fundaming solicitations 1. (6) Exemption of the product of the goods, other assets, or services received. 1. (7) Cash organization of the product of the goods, other assets, or services received. 1. (8) Performance of services organization organization assets or an annual rangement, show in column (d) the value of the goods, other assets, or services received. 1. (6) Perceived or vanidam, because of the goods, other assets, or services received. 1. (8) Performance of services organization o						ia riciationion	po min monona.			
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of:  1 Sales of assets from a noncharitable exempt organization  2 Differ transactions:  1 Sales of assets from a noncharitable exempt organization  2 Purchases of assets from a noncharitable exempt organization  3 Rental of facilities, equipment, or other assets  4 Rental organization  4 Int(1) X  4 Rental organization organization  5 Int(3) X  5 Sharing of facilities, equipment, multing lists, other assets, or paid complevees  4 If the answer to any of the above is Yes, complete the following solicidus.  5 Sharing of facilities, equipment, multing lists, other assets, or paid complevees  4 If the answer to any of the above is Yes, complete the following solicidus.  5 Sharing of facilities, equipment, multing lists, other assets, or paid complevees  4 If the answer to any of the above is Yes, complete the following solicidus.  5 Sharing of facilities, equipment, multing lists, other assets, or paid complevees  4 If the answer to any of the above is Yes, complete the following solicidus.  5 Sharing of facilities, equipment, multing lists, other assets, or paid complete solicidus in a market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services proceeded.  1 In In In Internet (g) Amount involved (g) Name of monthartable exempt organization (g) Description of relationship arrangements. Show in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  1 In In Internet (g) Amount involved (g) Name of monthartable exempt organization (g) Description of relationship  1 In Internet (g) Amount involved (g) Name of monthartable exempt organization (g) Description of relationship  1 In Internet (g) Description o	1 Did th	<del></del>		of the followin	in with any other organization	n described in section	on 501(c) of	13 7.3	Yes	No
a Transfer's from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets  1(2) Uncharse of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Renat of facilities, equipment, or other assets (4) Renation facilities, equipment, or other assets (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Exemption of the assets or an anocharitable exempt organization (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) It the answer or any of the above is "yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) Amount involved (c) Name of inocharitable exempt organization (d) Description of readers, transactions, and sharing arrangements  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (b) Amount involved (c) Name of inocharitable exempt organization (d) Description of readers, transactions, and sharing arrangements  N/A  11-Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship  12-Yes  13-Yes  14-Yes  15-Yes							301(0) 01	3 3	C.,	
(1) Sales of assets to a noncharitable exempt organization (2) Purchase of a seets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reminiscent arrangements (5) Loans or bean quarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Sales of assets from a noncharitable exempt organization (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (15) Loans or band quarter or services growers in the following soliciduse. Column (b) should always show the fair market value of the goods, other assets, or services growers.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of sharing arrangement, show in column (d) this value of the goods, other assets, or services fromework.  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 Coloe (other than section 501(c)(3)) or in section 527?    Ves		•				2410113			٠, ١	ξερο <sub>τ</sub> .
22   Other assets   1820   X   X   X   X   X   X   X   X   X			ation to a noncharital	oic excilipt or	janization of.			<u> </u>		
b Other transactions:  (1) Sales of a seets to a noncharitable exempt organization  (2) Purchase of a seets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rental of facilities, equipment, or other assets  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing selectations  (7) Sales of a seets from a noncharitable exempt organization  (8) Performance or services or membership or fundrasing selectations  (9) Performance or services or membership or fundrasing selectations  (1) Sales of a seet in the above is "tes; complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  (1) Amount timolyted  (2) Name of incharitable exempt organization  (3) Incharitable organization or services given by the reporting foundation. If the foundation organization or services given by the reporting foundation of the foundation of t					÷		-		<u> </u>	-
(1) Siles of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental of facilities, equipment, or other assets (5) Lons or of ona quarantees (6) Performance of services or membership or fundrasing solicitations (7) Lons or of ona quarantees (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (10) Lons or large of the services of services or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (f) the value of the goods, other assets, or services required.  (a) Incerio (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of harders, transactions, and abarring arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization  N/A  (a) Incerio (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of harders, transactions, and abarring arrangements  N/A  (b) Type of organization (d) Description of relationship  N/A  (c) Name of organization (e) Type of organization (e) Description of relationship  N/A  (a) Incerio (b) Type of organization (e) Description of relationship  N/A  (b) Type of organization (e) Description of relationship  N/A  (b) Type of organization (e) Description of relationship  N/A  (c) Description of relationship  N/A  (d) Description of transactionship  N/A  (e) Description of relationship  N/A  (f) Type of organization (e) Type of o			-	=			-		<u> </u>	
(2) Perchases of assets from a noncharitable exempt organization  (3) Rental of facilities, guipment, or other sasets  (4) Rembusement arrangements  (5) Loans or fixing quarantees  (6) Performance of services or membership or fundrasing solicitations  (7) Exemploid to fix the saset or any of the above x7 'exc, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Amount involved  (b) Amount involved  (c) Rame of noncharidable exempt organization  (d) Cescription of transfers, transactions, and drawing arrangements  N/A  (d) Cescription of transfers, transactions, and drawing arrangements  (e) H'Yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (f) Prins, complete the following schedule.  (a) Rame of organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (f) Rame of organization  (h) Type of organization  (h) Description of relationship  (h) Type of organization  (h) Type			ible evernt organizat	hon				15/1)		x
(a) Rendulation directives, equipment, or other assets (b) Loans or loan quarantees (c) Ferformance of services or membership or fundrasing solicitations (c) Loans or loan quarantees (d) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Sharing of Lacitives, equipment, mailing lists, other assets, or paid employes  It is \$\frac{1}{2}\$ X  If the answer to any of the above is "ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) How value of the goods, other assets, or services reported.	٠,,		. •			-				
(4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (8) Estaing of facilities, equipment, mailing lists, other assets, or paid employees or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services received.  (a) Immort (b) Amount triviolved (c) Name of noncharitable exempt organization (d) Description of standers, transactions, and charing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  2b If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Sign and beland, it is the connect and complete Occaration proposers (other than tax-payers) is based on all information of which prepare that in howe examined the return, including accompanying schedules.  Sign and beland, it is they connect and complete Occaration proposers (other than tax-payers) is based on all information of which prepare that in those examined the return, including accompanying schedules.  Signalure of Officer or trifice:    Print'ly per preparer's signalure   Print's signal			· · · · · · · · · · · · · · · · · · ·	nyamzauon	•					
(5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Enformance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Enformance of services or membership or fundrasing solicitations (8) Enformance of services or membership or fundrasing solicitations (8) Enformance of services or services speem by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received.  (9) Amount involved (1) Amount involved (2) Name of noncharitable exempt organization (3) Description of standars, transactions, and sharing arrangements (4) Description of standars, transactions, and sharing arrangements (5) Loans or loan guarantees (6) Involved the sale of the goods, other assets, or paid to see that fail the second of the control of the control of the goods, other assets, or services received.  (a) Involved (c) Name of noncharitable exempt organization (b) Amount involved (c) Name of noncharitable exempt organization (b) Amount involved (c) Name of noncharitable exempt organization (b) Amount involved (c) Name of noncharitable exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  [Yes X] No (b) If Yes, complete the following schedule.  (a) Rame of organization (b) Type of organization (c) Description of relationship  [Yes Yes X] No [Yes X] No [Yes Yes X] No [Yes	٠,	, , , ,				•	-			_
(6) Performance of services or membership or fundraising solicitations  © Sharing of facilities, equipment, maining lists, other assets, or paid employees  If the answer to any of the above is "Ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) 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 arrangements.  N / A  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 52??  (a) Name of organization (b) Type of organization (c) Description of relationship  N / A  (a) Name of organization (b) Type of organization (c) Description of relationship  N / A  (b) Type of organization (c) Description of relationship  N / A  (c) Description of relationship  Report is any howevided organization of which prepare has any howevided or signature of officer or inflates    Print/Type preparer's name   Preparer's signature   Proparer's signa		<del>-</del>								
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greened less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  a) Line to (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and charring arrangements  N / A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (a) Name of organization (b) Type of organization (c) Description of relationship  N / A  (b) Type of organization (c) Description of relationship  N / A  (c) Description of relationship  N / A  (d) Description of relationship  Printy is prepared in an exemption of the code (other than section 501(c)(3)) or in section 527?  Indicate penalties of pergan, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and best of the code (other than section 501(c) of the penalties of pergan, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and best of the code (other than section 501(c) of the code of my knowledge of the code (other than section 501(c) of the code of the code (other than section 501(c) of the code (other than section 501(c) of the code of the code (other than section 501(c) of the code of the code (other than section 501(c) of the cod	٠,	· ·	mbarahin ar fundras	ouna colioitatio	- no	-			<del>                                     </del>	
d If the answer to any of the above is "res," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received.  a) Line no. (b) Amount involved (c) Name of noncharlable exempt organization (d) Description of transfers, transactions, and sharing arrangements.  N/A  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 X No. If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Sign and belief, as they corned print of the code (other than those examined this return, including accompanying schedules and statements, and to the best of my knowledge.  Sign and belief, as they corned and complete Declarity of hispane (other than bicapyer) is based of mall information of which prepare it is any knowledge. If the prepared is name.  Printflype prepared is name.  Proparer's signature of failer or this termination of which prepare it is any knowledge. The proparer's signature of failer or this termination of which prepare it is any knowledge of the name of the proparer's signature.  Printflype preparer's name.  Propost 4429  Preparer   Firm's name.  PERRILIN RAMOS & COMPANY, P.A.  Firm's EIN > 52 – 1367749			•	•					<del></del>	
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of banders, transactions, and sharing arrangements  N/A  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 X] No  If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Signature of follicer or infalse  Primy Line Residences this factories that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules may be supplied to the schedules are statements, and to the best of my knowledge schedules are statements, and to the best of my knowledge schedules may be schedules and statements, and to the best of my knowledge schedules.  Signature of officier or mystee and the management of the my knowledge schedules may be schedules and statements, and to the best of my knowledge schedules.  If the my to the schedules are statements, and to		• • • • •	•	•		vave about the fore m	arkat value of the goods		L	
column (d) 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 banders, transactions, and sharing arrangements  N/A  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?  If Yes, complete the following schedule:  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Divide penalties of psysy, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, its the correct and complete Declaration or which prepare has any knowledge and statements, and to the best of my knowledge and belief, its the correct and complete Declaration or which prepare has any knowledge and statements, and to the best of my knowledge and state					• •				G15,	
a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of banders, transactions, and sharing arrangements N/A  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?  3 If Yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign and belief, sign they correct, and complete Declarations Preparer (either than saxpayer) is based on all information of which prepare has any knowledge shown below (see mith 17). Signature of officer or infection 10 In the Code (information of which preparer has any knowledge shown below (see mith 17). Signature of officer or infecte.  Print/Type preparer is name.  Preparer's signature  David Flink Ramos & COMPANY, P.A.  Firm's name > BERLIN RAMOS & COMPANY, P.A.  Firm's name > BERLIN RAMOS & COMPANY, P.A.					eu iess man iair market vaiut	e in any transaction (	JI SHAHIIY ATTAIIYEHICHI, S	HOW III		
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					a evernt erganization	(4) 0				
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	(a) Line no	(U) Amount involved	(c) Name of		exempt organization	(u) Description	or transfers, transactions, and	snaring air	arigemer	
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749		<u>-</u> -	<del> </del>	N/A	····	<del> </del>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749		<del></del> -	<del> </del>		·····	<del> </del>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749		<del></del>	<del></del>			<del></del>	<del></del>			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749		<del></del>	<del></del>			<del></del>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749			<del></del>			<del></del>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749			<del> </del>			<del></del>		·		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			<del> </del>							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749			<del> </del>			<del> </del>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			<del>                                     </del>			<u> </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 the perior than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)?  Signature of officer or mystee  Print/Type preparer's name  Preparer's signature  Date  Date  Check if self- employed  Preparer's signature  Date  DAVID FLINCHUM, CPA  Preparer's signature  Date  Prim's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749			ļ	·						_
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		<del></del>				<del></del>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						ļ <u>-</u>				_
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			ļ			ļ				_
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?				··-		<u> </u>				_
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			<u> </u>			<u> </u>				_
b. If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  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 shown below (see inst 1)?  Yes No  Print/Type preparer's name  Preparer's signature  Date  Date  Title  Print/Type preparer's name  Preparer's signature  Date  Date  Title  Print/Type preparer's name  Preparer's signature  Date  Firm's name  BERLIN RAMOS & COMPANY, P.A.  Firm's EIN  52-1367749	2a Is the	foundation directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organiz	ations described	_			_
(a) Name of organization  N/A  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 return with the preparer shown below (see instr)?  Signature of officer or highter  Print/Type preparer's name.  Preparer's signature  Date  Check If self-employed  Preparer  Firm's name ▶ BERLIN RAMOS & COMPANY, P.A.  Firm's RIN ▶ 52-1367749				(3)) or in sect	ion 527?		Ĺ	Yes	X	_ No
N/A  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 shown below (see instr.)?    Visual Company   Preparer   Signature   Date   Title	<u>b</u> If "Yes				<del> </del>					
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 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 shown below (see instriction with the preparer shown below (see instriction). It is suffered by the preparer is name.  Print/Type preparer's name.  Preparer's signature.  Date  Check if self- employed  Pooo54429  Preparer  Firm's name ▶ BERLIN RAMOS & COMPANY, P.A.  Firm's EIN ▶ 52-1367749			<u>janization</u>		(b) Type of organization		c) Description of relations	ship		
Sign   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 IF sidscuss this return with the preparer shown below (see instr)?   X Yes		N/A						_		
Sign   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 IF sidscuss this return with the preparer shown below (see instr)?   X Yes										
Sign   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 IF sidscuss this return with the preparer shown below (see instr)?   X Yes		<del> </del>								
Sign   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 IF sidscuss this return with the preparer shown below (see instr)?   X Yes										
Sign Here    Signature of officer or trustee   Date   Title										
Here Signature of officer or trustee    Date   Title	۱.,						Ma	y the IRS	iscuss t	his
Signature of officer or trustee  Date    Print/Type preparer's name   Preparer's signature   Date   Check   if self-employed   Preparer's name   Preparer's signature   Date   Check   if self-employed   Preparer's name   Preparer   Preparer   Preparer   Prim's name   Preparer   Prepare	Sign		iblete Declaration (ile	parer (other than	taxpayer) is based off all informati	on or which preparer has		urn with th own below	e prepare (see inst	er br)?
Print/Type preparer's name  Preparer's signature  Date  Check if self- employed  Preparer  Prim's name ► BERLIN RAMOS & COMPANY, P.A.  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Print/Ty	Here	NO CHE	my/		10/6/	Miec		X Yes		No
Paid DAVID FLINCHUM, CPA WAS & COMPANY, P.A.   Firm's name ► BERLIN RAMOS & COMPANY, P.A.   Firm's EIN ► 52-1367749						Title	·			
Paid DAVID FLINCHUM, CPA NUNCCON 4/8/2017 P00054429  Preparer Firm's name ► BERLIN RAMOS & COMPANY, P.A. Firm's EIN ► 52-1367749		Print/Type preparer's na	me/	Preparer's s	gnature	Date	Check If PTIN			
Preparer Firm's name ► BERLIN RAMOS & COMPANY, P.A. Firm's EIN ► 52-1367749				1//	120/11 can	aldon	self- employed			
	Paid			<del></del>	WWW 4H	71012				
	•		LIN RAMOS	& COM	PANY, P.A.		Firm's EIN ► 52-1	3677	49	

Phone no. 301-589-9000

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. 1a BLACKROCK DEBT STRAT FUND - 0.666 SHRS 06/04/1411/15/16 06/04/1405/17/17 b SEE MAY ACCT -502 ATTACHMENT 06/06/1407/22/16 c SEE JUL ACCT -565 ATTACHMENT ACCT -565 ATTACHMENT 02/11/1607/07/16 d SEE JUL 06/06/1408/26/16 e SEE AUG ACCT -565 ATTACHMENT 07/21/1610/26/16 SEE OCT ACCT -565 **ATTACHMENT** g SEE 06/06/14/10/24/16 OCT ACCT ~565 ATTACHMENT 12/31/1511/04/16 h SEE NOV ACCT -565 ATTACHMENT 06/06/1411/30/16 SEE NOV ACCT -565 ATTACHMENT 06/06/1401/25/17 I SEE JAN ACCT -565 ATTACHMENT 01/26/16|01/20/17 k SEE JAN ACCT -565 ATTACHMENT 06/06/1402/24/17 | SEE FEB ACCT ~565 ATTACHMENT -565 ATTACHMENT |06/06/14||03/30/17 m SEE MAR ACCT 02/17/1703/03/17 n SEE MAR ACCT -565 ATTACHMENT -565 ATTACHMENT 06/06/1404/28/17 O SEE APR ACCT (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale -1. 7. 8. a 110,767. 119,476. -8,709. b 70,648. 9,281. 61,367. C 541. 81. 622. 4,807. 18,991. 14,184. 869. 15,552. 14,683. 73,909. 57,809. 16,100. 1,772. 1,441. 331. 34,957. 37,028. -2,071.46,389. 58,433. -12,044. 5,349. 4,873. -476. 6,708. 83,008. 76,300. 53,703. 7,963. 61,666. m 37. 3,306. 3,269. n 6,912. 44,175. 51,087. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (ı) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (i), if any -1. -8,709. b 9,281. C 81. d 4,807. 869. 16,100. a 331. h -2,071.-12,044.-476. k 6,708. 1 7,963. m 37. n 6,912. { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 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).

If (loss), enter "-0-" in Part I, line 8

- diversi Gallis allu Lus	2262 IOL LAY OIL HIACSTILICHT HICOINE			<del></del>	
(a) List and 2-story bi	describe the kind(s) of property solution describe the kind(s) of property solution (s) and stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<u></u>	565 ATTACHMENT		D - Dollation	06/06/14	
	565 ATTACHMENT	<del>.</del>		02/17/17	
	565 ATTACHMENT			06/06/14	
	502 ATTACHMENT			06/30/16	
e SEE APR ACCT -	565 ATTACHMENT			06/06/14	02/28/17
f				l	
g					
h	<del></del>				
1				<del> </del> -	
k				<del> </del>	
	<del></del>	<del></del>		<del> </del>	
	<del></del>	· · · · · · · · · · · · · · · · · · ·		<del> </del>	
<u>m</u>					
n				<del> </del>	
0	<del></del>	<del></del>		<u></u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis	(b)	) Gain or (loss) blus (f) minus (g)	
	(or allowable)	plus expense of sale	(e) [	nus (1) minus (y)	0 ===
a 63,782.		66,557.			-2,775.
b 12,086.		11,402.			684.
c 46,640.		41,041.			5,599.
d 12.		12.			0.
e 18.		18.			0.
f					·
g					
h					
1					
1					
k					
1					
m					
			<del></del>		<del></del>
<u>n</u>					<del></del>
Complete only for accets shown	ng gain in column (h) and owned by t	he foundation on 12/31/60	(1) Los	ann (from an (h))	<del></del>
Complete only for assets shown			(I) LOS	sses (from col. (h)) of col. (h) gain over	col (k)
(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	but r	ot less than "-0-")	001. (N),
	4001.1201.00	0101 0011 (j), 11 q.1.y			-2,775.
<u>a</u>			<del></del>		
<u>b</u>			<del></del>	·	684.
<u>c</u>			<del></del>		5,599.
<u>d</u>	<u> </u>		·		0.
<u>e</u>					0.
<u>f</u>			<del> </del>		
<u>g</u>					
<u>h</u>					
1					
<u> </u>					
k					
1					
m					
n					
0					
2 Capital gain net income or (net ca	pital loss) { If gain, also enter for the loss, enter for the loss of the loss	in Part I, line 7	2		33,296.
		, I	-		
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		1 (6):	1		
If (loss), enter "-0-" in Part I, line 8		J l	3	N/A	
	<u> </u>		<u> </u>		

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient BNAI ISRAEL NONE PC PROMOTE RELIGION 6301 MONTROSE RD ROCKVILLE, MD 20852 11,000. CHARLES E. SMITH JEWISH DAY SCHOOL NONE РC TO SUPPORT JEWISH 10901 E. JEFFERSON ST COMMUNITY AND YOUTH ROCKVILLE, MD 20852 EDUCATION 10,000. CYSTIC FIBROSIS FOUNDATION NONE TO SUPPORT CYSTIC ₽C 4550 MONTGOMERY AVE, SUITE 1100 N FIBROSIS RESEARCH BETHESDA, MD 20814 4,600. EAGLEBANK FOUNDATION NONE PC SUPPORT BREAST CANCER 1201 ROCKVILLE PIKE AWARENESS ROCKVILLE, MD 20852 5,000. FRIENDS OF LUBAVITCH NONE ÞС PROMOTION OF RELIGION 11621 SEVEN LOCKS ROAD POTOMAC, MD 20854 12,500. JEWISH FEDERATION OF GREATER NONE ÞС SUPPORT COMMUNITY IN WASHINGTON NEED 6101 MONTROSE ROAD ROCKVILLE, MD 20852 25,500. JWB CHAPLAIN COUNCIL NONE PC TO SUPPORT JEWISH 520 8TH AVENUE COMMUNITY NEW YORK, NY 10018 600. MATAN NONE ÞС TO ASSIST JEWISH 520 8TH FLOOR STUDENTS WITH SPECIAL NEW YORK, NY 10018 NEEDS 2,500. MEDSTAR GEORGETOWN UNIVERSITY NONE PC SUPPORT MEDICAL HOSPITAL EDUCATION AND RESEARCH 3800 RESERVOIR ROAD NW WASHINGTON, DC 20007 1,000. MENTAL HEALTH ASSOCIATIONS OF MONT. NONE ÞС SUPPORT MENTAL HEALTH CO. - EVER MIND RESEARCH 1000 TWINBROOK PKWY ROCKVILLE, MD 20851 5,000. 100,700. Total from continuation sheets

LOUIS & HELEN FANAROFF CHAR. FOUNDATION 52-1276724

3 Grants and Contributions Paid During the Ye		<del></del>		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	L <sub>ion</sub>		TWDDOVE WOVECOMEDY	
MONTGOMERY PARKS FOUNDATION	NONE	PC	IMPROVE MONTGOMERY COUNTY PARKS	
9500 BRUNETT AVENUE SILVER SPRING, MD 20901			COUNTY PARKS	1,00
SHADY GROVE ADVENTIST HOSPITAL	NONE	PC	TO HELP PROVIDE MODERN	
FOUNDATION			MEDICAL FACILITIES AND	
9901 MEDICAL CENTER DR			TECHNOLOGICALLY	
ROCKVILLE, MD 20850			ADVANCED TREATMENTS TO	
			THE COMMUNITY	10,00
SHARE AND CARE CS NETWORK	NONE	PC	TO SUPPORT FAMILIES	
P.O. BOX 282			WITH CHILDREN WITH	
WATEFORD, VA 20197	· · · · · · · · · · · · · · · · · · ·	<del> </del>	COCKAYNE SYNDROME	10,00
SULAM	NONE	PC	PROVIDE EDUCATION TO	
13300 ARCTIC AVENUE			THE JEWISH COMMUNITY	
ROCKVILLE, MD 20853				1,00
WASHINGTON HOSPITAL CENTER FOUNDATION	NONE	PC	TO SUPPORT HOSPITAL	
110 IRVING ST NW			CARE	
WASHINGTON, DC 20010			1	1,00
				<del></del> -
				<u></u>
		1	1	

FORM 990-PF INTERE	ST ON SAVIN	IGS AND	TEMPORA	ARY CA	ASH II	NVESTMENTS	STATEMENT 1
SOURCE			(A) EVENUE R BOOKS			(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY			4,8	10.		4,810.	
TOTAL TO PART I, LI	NE 3		4,8	10.		4,810.	
FORM 990-PF	DIVIDENDS	S AND IN	TEREST	FROM	SECUI	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPI GAI DIVID	NS	REVI PER I	ENUE	(B) NET INVES MENT INCO	
MORGAN STANLEY	107,352		0.	107	7,352	. 107,35	2.
TO PART I, LINE 4	107,352		0.	107	7,352	. 107,35	2.
FORM 990-PF		ОТНЕ		AE (A) /ENUE		(B) NET INVEST-	STATEMENT 3  (C) ADJUSTED
DESCRIPTION				BOOKS		MENT INCOME	
MISC INCOME					14.	14	•
TOTAL TO FORM 990-P	F, PART I,	LINE 11			14.	14	•
FORM 990-PF		LE	GAL FEI	······································			STATEMENT 4
FORM 990-PF DESCRIPTION		LE (A) EXPENSE PER BOO	s ne:	ES (B) FINVE		(C) ADJUSTED NET INCOM	(D) CHARITABLE
		(A) EXPENSE PER BOO	s ne:	(B)		ADJUSTED	(D) CHARITABLE

FORM 990-PF	ACCOUNTING FEES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	3,700.	3,700.		0.
TO FORM 990-PF, PG 1, LN 16B	3,700.	3,700.		0.
FORM 990-PF	TAXES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	3,455.	3,455.		0.
TO FORM 990-PF, PG 1, LN 18	3,455.	3,455.		0.
FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES BANK SERVICE CHARGES NONDEDUCTIBLE DONATIONS	32,844. 116. 1,000.	32,844. 116. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	33,960.	32,960.		0.
			<u></u>	<del></del>

FORM 990-PF OTHER	INVESTMENTS	<del></del>	STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MORGAN STANLEY BOND	COST COST	2,415,595. 25,000.	2,513,659. 25,000.
TOTAL TO FORM 990-PF, PART II, LINE	13	2,440,595.	2,538,659.

## FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

STEVEN FANAROFF 16021 INDUSTRIAL DRIVE BAY 8 GAITHERSBURG, MD 20877

TELEPHONE NUMBER

301.230.3020

FORM AND CONTENT OF APPLICATIONS

LETTER STATING NAME OF ORGANIZATION AND SUBMITTING PROOF OF ITS TAX-EXEMPT STATUS AND STATING PURPOSE FOR WHICH GRANT WILL BE USED.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE