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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017 or tax year beginning , and ending

Name of foundation

DE BEAUMONT FOUNDATION, INC.

A Employer identification number

04-3467074

Number and street (or P O box number if mail is not delivered to street address): 7501 WISCONSIN AVENUE — Room/suite: 1310E

B Telephone number: 301-961-5800

City or town, state or province, country, and ZIP or foreign postal code: BETHESDA, MD 20814

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization: [X] Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶$ 186,859,397.

J Accounting method: ☐ Cash ☐ Accrual [X] Other (specify) MODIFIED CASH (Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

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))

	Line		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc., received	2,983,337.		N/A	
	2	Check ▶ ☐ if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	77.	77.		STATEMENT 1
	4	Dividends and interest from securities	2,412,237.	2,412,237.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	3,036,608.			
	b	Gross sales price for all assets on line 6a: 59,147,278.				
	7	Capital gain net income (from Part IV, line 2)		3,036,608.		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss)				
	11	Other income				
	12	**Total.** Add lines 1 through 11	8,432,259.	5,448,922.		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	402,875.	27,038.		375,837.
	14	Other employee salaries and wages	963,805.	47,013.		916,791.
	15	Pension plans, employee benefits	197,324.	0.		197,324.
	16a	Legal fees STMT 3	27,418.	0.		27,418.
	b	Accounting fees STMT 4	26,372.	0.		26,372.
	c	Other professional fees STMT 5	948,242.	267,264.		680,978.
	17	Interest	1,908.	0.		1,908.
	18	Taxes STMT 6	68,376.	0.		0.
	19	Depreciation and depletion	43,964.	0.		
	20	Occupancy	173,608.	0.		173,608.
	21	Travel, conferences, and meetings	288,732.	5,033.		283,699.
	22	Printing and publications	26,263.	0.		26,263.
	23	Other expenses STMT 7	548,725.	27,044.		521,681.
	24	**Total operating and administrative expenses.** Add lines 13 through 23	3,717,612.	373,392.		3,231,879.
	25	Contributions, gifts, grants paid	9,104,510.			9,104,510.
	26	**Total expenses and disbursements** Add lines 24 and 25	12,822,122.	373,392.		12,336,389.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-4,389,863.			
	b	**Net investment income** (if negative, enter -0-)		5,075,530.		
	c	**Adjusted net income** (if negative, enter -0-)			N/A	

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Part II **Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing		2,649,548.	2,649,548.
	2 Savings and temporary cash investments	5,822,711.	18,058,016.	18,058,016.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less. allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 8	154,394,490.	135,041,688.	165,992,009.
	14 Land, buildings, and equipment basis ▶ 262,833.			
	Less accumulated depreciation ▶ 116,165.	68,582.	146,668.	146,668.
	15 Other assets (describe ▶ DEPOSITS)	13,156.	13,156.	13,156.
	16 **Total assets** (to be completed by all filers - see the instructions. Also, see page 1, item I)	160,298,939.	155,909,076.	186,859,397.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here** ▶ [X] **and complete lines 24 through 26, and lines 30 and 31.**			
	24 Unrestricted	159,745,148.	155,888,843.	
	25 Temporarily restricted	553,791.	20,233.	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ [ ] **and complete lines 27 through 31.**			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances**	160,298,939.	155,909,076.	
	31 **Total liabilities and net assets/fund balances**	160,298,939.	155,909,076.	

Part III **Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	160,298,939.
2 Enter amount from Part I, line 27a	2	-4,389,863.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	155,909,076.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	155,909,076.

Part IV Capital Gains and Losses for Tax on Investment Income

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

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a				
b				
c				
d				
e	59,147,278.		56,110,670.	3,036,608.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a				
b				
c				
d				
e				3,036,608.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } 2 3,036,608.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c).
If (loss), enter -0- in Part I, line 8 } 3 N/A

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

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

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

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

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	9,833,876.	168,109,756.	.058497
2015	10,998,211.	178,494,800.	.061616
2014	7,714,359.	186,159,866.	.041439
2013	4,969,136.	141,789,561.	.035046
2012	4,755,832.	95,415,003.	.049844

2	Total of line 1, column (d)	2	.246442
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.049288
4	Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	181,969,486.
5	Multiply line 4 by line 3	5	8,968,912.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	50,755.
7	Add lines 5 and 6	7	9,019,667.
8	Enter qualifying distributions from Part XII, line 4	8	12,336,389.

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

7

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

1a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: ______ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ [X] and enter 1% of Part I, line 27b		1	50,755.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	50,755.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 **Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-		5	50,755.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 102,679.		
b Exempt foreign organizations - tax withheld at source	6b 0.		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.		
d Backup withholding erroneously withheld	6d 0.		
7 Total credits and payments. Add lines 6a through 6d		7	102,679.
8 Enter any **penalty** for underpayment of estimated tax. Check here [X] if Form 2220 is attached		8	0.
9 **Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	
10 **Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	51,924.
11 Enter the amount of line 10 to be: **Credited to 2018 estimated tax** ▶ 51,924. **Refunded** ▶		11	0.

Part VII-A Statements Regarding Activities

		Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b Did it spend more than $100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c Did the foundation file **Form 1120-POL** for this year?	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ $ 0. (2) On foundation managers. ▶ $ 0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the 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 instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	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 either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7 Did the foundation have at least $5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ DE,MD			
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	8b	X	
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 2017 or the tax year beginning in 2017? See the 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

Part 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 ▶ WWW.DEBEAUMONT.ORG

14 The books are in care of ▶ ARIEL MOYER Telephone no. ▶ 301-961-4948

Located at ▶ 7501 WISCONSIN AVENUE, SUITE 1310E, BETHESDA, MD ZIP+4 ▶ 20814

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** - check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A

			Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			

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

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No			
	If "Yes," list the years ▶ ______, ______, ______, ______			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ ______, ______, ______, ______			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2017?	4b		X

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

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

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

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9		402,875.	15,302.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BRIAN CASTRUCCI - 7501 WISCONSIN AVENUE, BETHESDA, MD 20814	CHIEF PROGRAM & STRATEGY OFFICER 40.00	200,901.	17,678.	0.
ARIEL MOYER - 7501 WISCONSIN AVENUE, BETHESDA, MD 20814	CHIEF OPERATING OFFICER 40.00	193,926.	11,579.	0.
EMILY YU - 7501 WISCONSIN AVENUE, BETHESDA, MD 20814	BUILD EXECUTIVE DIRECTOR 40.00	143,000.	12,548.	0.
THERESA CHAPPLE - 7501 WISCONSIN AVENUE, BETHESDA, MD 20814	SR. RESEARCH & EVALUATION OFFICER 40.00	125,000.	14,622.	0.
ADAM JUDGE - 7501 WISCONSIN AVENUE, BETHESDA, MD 20814	SENIOR LEARNING OFFICER 40.00	109,114.	8,551.	0.
Total number of other employees paid over $50,000 ▶				4

Form **990-PF** (2017)

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

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
DBA SPARK POLICY INSTITUTE 2717 WELTON STREET, DENVER, CO 80205	EVALUATION	258,963.
PRIME, BUCHHOLZ & ASSOCIATES, INC 273 CORPORATE DRIVE, PORTSMOUTH, NH 03801	INVESTMENT ADVISOR	212,032.
PR COLLABORATIVE - 2900 M STREET, NW, SUITE 200, WASHINGTON, DC 20007	COMMUNICATIONS CONSULTING	180,000.
MCCABE MESSAGE PARTBERS - 1825 CONNECTICUT AVENUE, NW, SUITE 300, WASHINGTON, DC 20009	COMMUNICATIONS CONSULTING	160,820.
STARFISH MEDIA GROUP 134 W 26TH STREET, NEW YORK, NY 10001	PRODUCTION DEVELOPMENT	69,950.
Total number of others receiving over $50,000 for professional services ▶		1

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SEE STATEMENT 10	258,963.
2 SEE STATEMENT 11	160,820.
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 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3 ▶	0.

Form **990-PF** (2017)

723561 01-03-18

11141113 137216 064-03810600 2017.05000 DE BEAUMONT FOUNDATION, INC 064-00Y1

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	176,948,612.
b	Average of monthly cash balances	1b	7,791,983.
c	Fair market value of all other assets	1c	
d	**Total** (add lines 1a, b, and c)	1d	184,740,595.
e	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	184,740,595.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,771,109.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	5	181,969,486.
6	**Minimum investment return.** Enter 5% of line 5	6	9,098,474.

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

1	Minimum investment return from Part X, line 6	1	9,098,474.
2a	Tax on investment income for 2017 from Part VI, line 5 — 2a: 50,755.		
b	Income tax for 2017. (This does not include the tax from Part VI.) — 2b:		
c	Add lines 2a and 2b	2c	50,755.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,047,719.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,047,719.
6	Deduction from distributable amount (see instructions)	6	0.
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	9,047,719.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	12,336,389.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	12,336,389.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	50,755.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	12,285,634.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				9,047,719.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years: ______ , ______ , ______		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016 1,129,522.				
f **Total** of lines 3a through e	1,129,522.			
4 Qualifying distributions for 2017 from Part XII, line 4. ▶$ 12,336,389.				
a Applied to 2016, 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) **	1,773,815.			
d Applied to 2017 distributable amount				9,047,719.
e Remaining amount distributed out of corpus	1,514,855.			
5 Excess distributions carryover applied to 2017 (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:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,418,192.			
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 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	2,903,337.			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7	0.			
9 **Excess distributions carryover to 2018.** Subtract lines 7 and 8 from line 6a	1,514,855.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017 1,514,855.				

** SEE STATEMENT 12

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling ▶

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

	Tax year	Prior 3 years			
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)

1 **Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

c Any submission deadlines.

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

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ASSOCIATION OF SCHOOL AND PROGRAMS OF PUBLIC HEALTH 1900 M STREET, NW, SUITE 710 WASHINGTON, DC 20036	NONE	PC	PHILANTHROPY FELLOW	63,256.
ASSOCIATION OF SCHOOL AND PROGRAMS OF PUBLIC HEALTH 1900 M STREET, NW, SUITE 710 WASHINGTON, DC 20036	NONE	PC	PHILANTHROPY FELLOW	37,001.
ASSOCIATION OF STATE & TERRITORIAL HEALTH OFFICIALS 2231 CRYSTAL DRIVE, SUITE 450 ARLINGTON, VA 22202	NONE	PC	PUBLIC HEALTH WORKFORCE INTERESTS AND NEEDS SURVEY (PH WINS)	250,000.
ASSOCIATION OF STATE & TERRITORIAL HEALTH OFFICIALS 2231 CRYSTAL DRIVE, SUITE 450 ARLINGTON, VA 22202	NONE	PC	RECOGNIZING EXCELLENCE IN PUBLIC HEALTH LEADERSHIP	10,000.
ASSOCIATION OF STATE & TERRITORIAL HEALTH OFFICIALS 2231 CRYSTAL DRIVE, SUITE 450 ARLINGTON, VA 22202	NONE	PC	GRANT REFUND	-4,722.
Total SEE CONTINUATION SHEET(S)			▶ 3a	9,104,510.
b Approved for future payment				
ASSOCIATION OF SCHOOLS AND PROGRAMS OF PUBLIC HEALTH 1900 M STREET, NW, SUITE 710 WASHINGTON, DC 20036	NONE	PC	ASPPH PUBLIC HEALTH PHILANTHROPY FELLOWSHIP YEARS 2-6	436,285.
ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS 2231 CRYSTAL DRIVE, SUITE 450 ARLINGTON, VA 22202	NONE	PC	PH WINS 2.0/3.0	481,587.
ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS 2231 CRYSTAL DRIVE, SUITE 450 ARLINGTON, VA 22202	NONE	PC	ASTHO SENIOR DEPUTIES LEADERSHIP PROGRAM	150,000.
Total SEE CONTINUATION SHEET(S)			▶ 3b	5,841,441.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income (a) Business code	Unrelated business income (b) Amount	Excluded by section 512, 513, or 514 (c) Exclusion code	Excluded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	77.	
4 Dividends and interest from securities			14	2,412,237.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	3,036,608.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		5,448,922.	0.

13 Total. Add line 12, columns (b), (d), and (e) 13 5,448,922.

(See worksheet in line 13 instructions to verify calculations.)

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

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

Part XVII **Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

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 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 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) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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.

Signature of officer or trustee: [signature] Date: 11/15/18 Title: CHIEF OPERATING OFFICER

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
IVY BECKHAM	Ivy Beckham	11/13/2018		P01316131

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 901 N. GLEBE ROAD, SUITE 200, ARLINGTON, VA 22203 — Phone no. 571-227-9500

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization	Employer identification number
DE BEAUMONT FOUNDATION, INC.	04-3467074

Organization type (check 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	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000, or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year ▶ $ ____________

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "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 Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
DE BEAUMONT FOUNDATION, INC.	04-3467074

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ADVISORY BOARD 2445 M STREET, NW WASHINGTON, DC 20037	$ 80,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
2	BLUECROSS BLUESHIELD OF NORTH CAROLINA FOUNDATION PO BOX 2291 DURHAM, NC 27702	$ 155,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	COLORADO HEALTH FOUNDATION 501 SOUTH CHERRY STREET, SUITE 1100 DENVER, CO 80244	$ 500,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
4	EPISCOPAL HEALTH FOUNDATION 500 FANNIN STREET, SUITE 300 HOUSTON, TX 77002	$ 310,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
5	INTERACT FOR HEALTH 3805 EDWARDS ROAD, SUITE 500 CINCINNATI, OH 45209	$ 155,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
6	KRESGE FOUNDATION 3215 W. BIG BEAVER ROAD TROY, MI 48084	$ 600,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)

Name of organization	Employer identification number
DE BEAUMONT FOUNDATION, INC.	04-3467074

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MID-IOWA HEALTH FOUNDATION 3900 INGERSOLL AVENUE DES MOINES, IA 50312	$ 77,500.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
8	ROBERT WOOD JOHNSON FOUNDATION ROUTE 1 & COLLEGE ROAD EAST PRINCETON, NJ 08543	$ 390,837.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
9	TELLIGEN COMMUNITY INITIATIVE 1776 WEST LAKES PARKWAY WEST DES MOINES, IA 50266	$ 90,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
10	W. K. KELLOGG FOUNDATION 1 MICHIGAN AVENUE EAST BATTLE CREEK, MI 04901	$ 625,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)

Name of organization	Employer identification number
DE BEAUMONT FOUNDATION, INC.	04-3467074

Part II **Noncash Property** (see instructions) Use duplicate copies of 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
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization	Employer identification number
DE BEAUMONT FOUNDATION, INC.	04-3467074

Part III *Exclusively* religious, charitable, etc , contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc , contributions of $1,000 or less for the year (Enter this info once) ▶ $

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	FIRST AMER GOVT OBLIG FUND CL Z	P		
b	PARAMETRIC TAX MANAGED EMERG MKT INS	P		
c	VANGUARD MUTUAL EQUITY FUND	P		
d	VICTORY GLOBAL NATURAL RESOURCES CI	P		
e	FPA CRESCENT PORTFOLIO CL I	P		
f	AMERICAN SECURTIES PARTNERS VII LP.	P		
g	CONVEXITY CAPITAL OFFSHORE LP.	P		
h	ETON PARK OVERSEES FUND, LTD	P		
i	LEGACY VENTURE VII, LLC	P		
j	MASON CAPITAL LTD	P		
k	MONDRIAN GLOBAL FIXED INCOME	P		
l	NEWBURY EQ PARTNERS III	P		
m	SSGA REAL ASSET FD-CLIENT CNTRLD	P		
n	SUMMIT PARTNERS GROWTH EQ FUND	P		
o				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	21,257,847.		21,257,847.	0.
b	2,000,000.		1,936,514.	63,486.
c	12,500,000.		9,051,489.	3,448,511.
d	2,568,402.		3,790,606.	-1,222,204.
e	57,197.			57,197.
f	51,960.		51,960.	0.
g	975,846.		975,846.	0.
h	3,708,449.		3,794,244.	-85,795.
i	25,860.		25,860.	0.
j	205,901.		228,552.	-22,651.
k	5,001,461.		4,991,108.	10,353.
l	735,392.		735,392.	0.
m	9,235,282.		8,447,571.	787,711.
n	823,681.		823,681.	0.
o				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a				0.
b				63,486.
c				3,448,511.
d				-1,222,204.
e				57,197.
f				0.
g				0.
h				-85,795.
i				0.
j				-22,651.
k				10,353.
l				0.
m				787,711.
n				0.
o				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7; If (loss), enter "-0-" in Part I, line 7 }	2	3,036,608.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

723591
04-01-17

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ASSURING BETTER CHILD HEALTH & DEVELOPMENT 8801 E HAMPDEN AVENUE, SUITE 106 DENVER, CO 80231	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
AVENUE CDC 2505 WASHINGTON AVENUE, SUITE 400 HOUSTON, TX 77007	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
CABIN CREEK HEALTH SYSTEMS PO BOX 70 DAWES, WV 25054	NONE	PC	GENERAL OPERATING SUPPORT	5,000.
CHILDREN'S LAW CENTER 501 3RD STREET, NW, SUITE 800 WASHINGTON, DC 20001	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
COMMUNITY HEALTH PARTNERSHIP 6005 DELMONICO DRIVE, SUITE 225 COLORADO SPRINGS, CO 80919	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
COMMUNITY SERVINGS 18 MARBURY TERRACE JAMAICA PLAIN, MA 02130	NONE	PC	GENERAL OPERATING SUPPORT	20,000.
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DRIVE, SUITE 700 ARLINGTON, VA 22202	NONE	PC	GENERAL OPERATING SUPPORT	7,300.
COVENANT HOUSE 461 EIGHTH AVENUE NEW YORK, NY 10001	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
DANA-FARBER CANCER INSTITUTE 44 BINNEY STREET BOSTON, MA 02115	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
DANA-FARBER CANCER INSTITUTE 44 BINNEY STREET BOSTON, MA 02115	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
Total from continuation sheets				8,748,975.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DUKE UNIVERSITY PO BOX 2914, MEDICAL CENTER DURHAM, NC 27710	NONE	PC	PRACTICAL PLAYBOOK	931,771.
DUKE UNIVERSITY PO BOX 2914, MEDICAL CENTER DURHAM, NC 27710	NONE	PC	BUILD HEALTH CHALLENGE TECHNICAL ASSISTANCE	375,000.
ENVIRONMENTAL HEALTH WATCH 3500 LORAIN AVENUE, SUITE 302 CLEVELAND, OH 44113	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
FRIENDS OF BOSTON HOMELESS, INC. 12 WISE STREET BOSTON, MA 02130	NONE	PC	GENERAL OPERATING SUPPORT	15,000.
GENERATE HEALTH 1300 HAMPTON AVENUE, SUITE 111 ST. LOUIS, MO 63139	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION 55 PARK PLACE, 8TH FLOOR ATLANTA, GA 30303	NONE	PC	BUILD HEALTH CHALLENGE TECHNICAL ASSISTANCE	33,500.
GRANTMAKERS IN HEALTH 1100 CONNECTICUTE AVENUE, NW, SUITE 1200 WASHINGTON, DC 20036	NONE	PC	GENERAL OPERATING SUPPORT	11,500.
GREENSBORO HOUSING COALITION 122 N ELM STREET, SUITE 204 GREENSBORO, NC 27401	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
JACKSON MEDICAL MALL FOUNDATION 2548 LIVINGSTON ROAD, SUITE 1 JACKSON, MS 39213	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH 615 N. WOLFE STREET BALTIMORE, MD 21205	NONE	PC	GRANT REFUND	-3,796.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LOUISIANA PUBLIC HEALTH INSTITUTE 1515 POYDRAS STREET, SUITE 1200 NEW ORLEANS, LA 70112	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
MENTAL HEALTH ASSOCIATION IN TULSA, INC. 1870 SOUTH BOULDER AVENUE TULSA, OK 74119	NONE	PC	GENERAL OPERATING SUPPORT	5,000.
NATIONAL ACADEMY FOR STATE HEALTH POLICY 2 MONUMENT SQUARE, SUITE 910 PORTLAND, ME 04101	NONE	PC	BLENDING, BLOCKING, & BRAIDING PUBLIC HEALTH	75,223.
NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS 100 17TH STREET, NW, SUITE 200 WASHINGTON, DC 20036	NONE	PC	BIG CITIES HEALTH COALITION	200,673.
NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS 100 17TH STREET, NW, SUITE 200 WASHINGTON, DC 20036	NONE	PC	BIG CITIES HEALTH COALITION	300,000.
NATIONAL PRESS FOUNDATION 1211 CONNECTICUT AVENUE, NW, SUITE 310 WASHINGTON, DC 20036	NONE	PC	JOURNALIST TRAINING PROGRAM	95,000.
NEO PHILANTHROPY 45 W 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	CITYHEALTH	1,664,500.
NEO PHILANTHROPY 45 W 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	CITYHEALTH	248,570.
NEW BRUNSWICK TOMORROW 390 GEORGE STREET, 2ND FLOOR NEW BRUNSWICK, NJ 08901	NONE	PC	BUILD HEALTH CHALLENGE AWARD	138,700.
NORC 4350 EAST WEST HIGHWAY BETHESDA, MD 20814	NONE	PC	PUBLIC HEALTH POLLING	25,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NORTH JERSEY HEALTH COLLABORATIVE PO BOX 150 GREEN VILLAGE, NJ 07935	NONE	PC	BUILD HEALTH CHALLENGE AWARD	125,000.
NORTH JERSEY HEALTH COLLABORATIVE PO BOX 150 GREEN VILLAGE, NJ 07935	NONE	PC	BUILD HEALTH CHALLENGE AWARD	25,000.
NORTHERN KENTUCKY REGIONAL ALLIANCE 50 E RIVERCENTER BOULEVARD, SUITE 250 COVINGTON, KY 41011	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
POLK COUNTY HOUSING TRUST FUND 505 5TH AVENUE, SUITE 1000 DES MOINES, IA 50309	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
PROJECT DESTINY, INC 2200 CALIFORNIA AVENUE PITTSBURGH, PA 15212	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
PUBLIC HEALTH - SEATTLE & KING COUNTY 401 FIFTH AVENUE, SUITE 1300 SEATTLE, WA 98104	NONE	PC	GRANT REFUND	-111,580.
REBUILDING TOGETHER PHILADELPHIA 4355 ORCHARD STREET, SUITE 2R PHILADELPHIA, PA 19124	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
RENAISSANCE WEST COMMUNITY INITIATIVE 3610 NOBLES AVENUE, BOX 199 CHARLOTTE, NC 28208	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
SEA EDUCATION ASSOCIATION (S.E.A.) PO BOX 6 WOODS HOLE, MA 02543	NONE	PC	GENERAL OPERATING SUPPORT	25,000.
SISTER CARMEN COMMUNITY CENTER 655 ASPEN RIDGE DRIVE LAFAYETTE, CO 80026	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SPOKANE REGIONAL HEALTH DISTRICT 1101 W. COLLEGE AVENUE SPOKANE, WA 99201	NONE	PC	GRANT REFUND	-1,559.
TASK FORCE FOR GLOBAL HEALTH 325 SWANTON WAY DECATUR, GA 30030	NONE	PC	DIGITAL BRIDGE	250,000.
THE CIVIC CANOPY 3532 FRANKLIN STREET DENVER, CO 80205	NONE	PC	BUILD HEALTH CHALLENGE AWARD	25,000.
THE COMMUNITY BUILDERS 185 DARTMOUTH STREET, 9TH FLOOR BOSTON, MA 02116	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
THE REGENTS OF THE UNIVERSITY OF MICHIGAN 881 N UNIVERSITY AVENUE ANN ARBOR, MI 48109	NONE	PC	FLINT LEGAL ANALYSIS	86,061.
TRENTON HEALTH TEAM ONE WEST STATE STREET TRENTON, NJ 08608	NONE	PC	BUILD HEALTH CHALLENGE AWARD	150,000.
TRUSTEES OF INDIANA UNIVERSITY 501 INDIANA AVENUE, SUITE 100 INDIANAPOLIS, IN 46202	NONE	PC	SHO RESEARCH PROJECT	199,237.
UCLA FIELDING SCHOOL OF PUBLIC HEALTH 1111 FRANKLIN STREET, 12TH FLOOR OAKLAND, CA 94607	NONE	PC	THE WIN-WIN PROJECT	614,892.
UNIVERSITY OF CHICAGO MEDICINE & BIOLOGICAL SCIENCES DEVELOPMENT 130 EAST RANDOLPH STREET, SUITE 2500 CHICAGO, IL 60601	NONE	PC	GENERAL OPERATING SUPPORT	25,000.
UNIVERSITY OF MIAMI 1120 NW 14TH STREET, SUITE 912 MIAMI, FL 33136	NONE	PC	BUILDING EXPERTISE IN ADMINISTRATION AND MANAGEMENT (BEAM) CERTIFICATE PROGRAM	545,394.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIVERSITY OF OTAGO IN AMERICA, INC. 800 TOWNSHIP LINE ROAD, SUITE 250 YARDLEY, PA 19067	NONE	PC	GENERAL OPERATING SUPPORT	12,500.
VICTORY PROGRAMS, INC. 965 MASSACHUSETTS AVE BOSTON, MA 02115	NONE	PC	GENERAL OPERATING SUPPORT	5,000.
WAKE FOREST UNIVERSITY HEALTH SCIENCES MEDICAL CENTER BOULEVARD WINSTON-SALEM, NC 27157	NONE	PC	JOURNAL OF PUBLIC HEALTH MANAGEMENT & PRACTICE	189,589.
WASHINGTON GRANTMAKERS 1400 16TH STREET, NW, SUITE 740 WASHINGTON, DC 20036	NONE	PC	GENERAL OPERATING SUPPORT	6,500.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS 100 17TH STREET, NW, SUITE 200 WASHINGTON, DC 20036	NONE	PC	BIG CITIES HEALTH COALITION	300,000.
NEO PHILANTHROPY 45 W 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	CITYHEALTH PHASE 2 & 3	2,247,460.
NEO PHILANTHROPY 45 W 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	US CONFERENCE OF MAYORS SPONSORSHIP	98,958.
THE ASPEN INSTITUTE 1 DUPONT CIRCLE, NW, SUITE 700 WASHINGTON, DC 20036	NONE	PC	PROMOTING THE POWER OF PUBLIC HEALTH	1,529,293.
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES 881 N UNIVERSITY AVENUE ANN ARBOR, MI 48109	NONE	PC	WIN-WIN COLLABORATION ACROSS SECTORS. TECHNICAL ASSISTANCE IN COMMUNICATION & IMPLEMENTATION	248,367.
UNIVERSITY OF MIAMI 1120 NW 14TH STREET, SUITE 912 MIAMI, FL 33136	NONE	PC	UNIVERSITY OF MIAMI PUBLIC HEALTH BUSINESS FUNDAMENTAL CERTIFICATE PROGRAMS	349,491.
Total from continuation sheets				4,773,569.