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014 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

, 2017, and ending

, 20

Name of foundation
THE KATHRYN B MCQUADE FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite
P.O. BOX 1501, NJ2-130-03-31

City or town, state or province, country, and ZIP or foreign postal code
PENNINGTON, NJ 08534-1501

A Employer identification number
46-4122112

B Telephone number (see instructions)
609-274-6834

C If exemption application is pending, check here ☐

D 1 Foreign organizations, check here ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ☐

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

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

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

H Check type of organization ☒ Section 501(c)(3) exempt private foundation **04**
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 7,688,636.**

J Accounting method ☒ Cash ☐ Accrual
☐ Other (specify) _____
(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) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	782,681.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	125,985.	125,765.		STMT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	798,644.			
	b Gross sales price for all assets on line 6a 3,734,121.				
	7 Capital gain net income (from Part IV, line 2)		798,644.		
	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) (attach schedule)					
11 Other income (attach schedule)	2,884.				
12 Total. Add lines 1 through 11	1,710,194.	924,409.		STMT 2	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages		NONE	NONE	
	15 Pension plans, employee benefits		NONE	NONE	
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) STMT 3	2,500.	NONE	NONE	2,500.
	c Other professional fees (attach schedule) STMT 4	81,550.	48,930.		32,620.
	17 Interest				
	18 Taxes (attach schedule) (see instructions) STMT 5	6,786.	3,477.		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings		NONE	NONE	
	22 Printing and publications		NONE	NONE	
	23 Other expenses (attach schedule) STMT 6	17,919.			17,919.
	24 Total operating and administrative expenses Add lines 13 through 23.	108,755.	52,407.	NONE	53,039.
	25 Contributions, gifts, grants paid	900,333.			900,333.
26 Total expenses and disbursements Add lines 24 and 25	1,009,088.	52,407.	NONE	953,372.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	701,106.				
b Net investment income (if negative, enter -0-)		872,002.			
c Adjusted net income (if negative, enter -0-)					

JSA For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2017)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		2,832.	2,828.	2,828.
	2	Savings and temporary cash investments		106,767.	151,785.	151,785.
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶	NONE			
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U S and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis ▶				
	Less accumulated depreciation ▶ (attach schedule)					
12	Investments - mortgage loans					
13	Investments - other (attach schedule)	STMT 7.	6,568,813.	6,600,471.	7,534,023.	
14	Land, buildings, and equipment basis ▶					
	Less accumulated depreciation ▶ (attach schedule)					
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		6,678,412.	6,755,084.	7,688,636.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)				NONE	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.				
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds		6,678,412.	6,755,084.	
	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 (see instructions)		6,678,412.	6,755,084.	
	31	Total liabilities and net assets/fund balances (see instructions)		6,678,412.	6,755,084.	

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	6,678,412.
2	Enter amount from Part I, line 27a	2	701,106.
3	Other increases not included in line 2 (itemize) ▶ ROUNDING	3	9.
4	Add lines 1, 2, and 3	4	7,379,527.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 9	5	624,443.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,755,084.

Form 990-PF (2017)

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.)
1 a PUBLICLY TRADED SECURITIES					
b					
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 3,734,097.		2,935,453.	798,644.		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) Gains (Col. (h) gain minus col. (k), but not less than -0- or Losses (from col. (h))		
(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			
a			798,644.		
b					
c					
d					
e					
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	798,644.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8			3		

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

(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	436,084.	6,363,422.	0.068530
2015	444,111.	5,978,388.	0.074286
2014	185,813.	4,380,619.	0.042417
2013		4,051,007.	
2012			
2 Total of line 1, column (d)			2 0.185233
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 0.046308
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 7,062,571.
5 Multiply line 4 by line 3.			5 327,054.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 8,720.
7 Add lines 5 and 6			7 335,774.
8 Enter qualifying distributions from Part XII, line 4 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.			8 953,372.

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b.	1	8,720.
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	NONE
3	Add lines 1 and 2.	3	8,720.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4	NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	8,720.
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017.	6a	3,309.
b	Exempt foreign organizations - tax withheld at source.	6b	NONE
c	Tax paid with application for extension of time to file (Form 8868).	6c	NONE
d	Backup withholding erroneously withheld.	6d	
7	Total credits and payments Add lines 6a through 6d.	7	3,309.
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached.	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	5,411.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> NONE <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ (2) On foundation managers <input type="checkbox"/> \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
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.		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
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?	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	X	
8a Enter the states to which the foundation reports or with which it is registered See instructions <input type="checkbox"/> NV		
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 <i>General Instruction G</i> ? If "No," attach explanation.	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.		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. STMT 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		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	X	
14 The books are in care of ► <u>US TRUST FIDUCIARY TAX SERVICES</u> Telephone no. ► <u>(609) 274-6834</u> Located at ► <u>1300 MERRILL LYNCH DRIVE, PENNINGTON, NJ</u> ZIP+4 ► <u>08534</u>		
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
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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

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

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

	Yes	No
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	1b	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)	2b	X
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)	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

Form 990-PF (2017)

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

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation. See instructions.**

(a) Name and address	(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
KATHRYN B MCQUADE 420 VIA VENTANA DRIVE, MESQUITE, NV 89027-3701	TRUSTEE	-0-	-0-	-0-

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 **NONE**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."**

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

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 NONE	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total. Add lines 1 through 3	

Form **990-PF** (2017)

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	7,079,868.
b	Average of monthly cash balances	1b	90,255.
c	Fair market value of all other assets (see instructions).	1c	NONE
d	Total (add lines 1a, b, and c)	1d	7,170,123.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	7,170,123.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	107,552.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,062,571.
6	Minimum investment return. Enter 5% of line 5	6	353,129.

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	353,129.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	8,720.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	8,720.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	344,409.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	344,409.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	344,409.

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	953,372.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	953,372.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	8,720.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	944,652.

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				344,409.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			NONE	
b Total for prior years 20____, 20____, 20____		NONE		
3 Excess distributions carryover, if any, to 2017				
a From 2012				NONE
b From 2013				NONE
c From 2014				NONE
d From 2015				123,454.
e From 2016				124,531.
f Total of lines 3a through e	247,985.			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 953,372.				
a Applied to 2016, but not more than line 2a			NONE	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2017 distributable amount				344,409.
e Remaining amount distributed out of corpus.	608,963.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	856,948.			
b Prior years' undistributed income. Subtract line 4b from line 2b.		NONE		
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		NONE		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018.				NONE
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)	NONE			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	NONE			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	856,948.			
10 Analysis of line 9.				
a Excess from 2013				NONE
b Excess from 2014				NONE
c Excess from 2015				123,454.
d Excess from 2016				124,531.
e Excess from 2017				608,963.

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)**NOT APPLICABLE**

1a 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)

2a 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).)

KATHRYN B MCQUADE

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.

N/A

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

a here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, enter the details on lines 2a, b, c, and d. See instructions.

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

c Any submissions should be submitted and information and materials they should include:

d Any restrictions or factors:

such as by geographical areas, charitable fields, kinds of institutions, or other

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> SEE STATEMENT 21				900,333.
Total			▶ 3a	900,333.
b <i>Approved for future payment</i>				
Total			▶ 3b	

Schedule of Contributors

OMB No 1545-0047

2017

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

Name of the organization

Employer identification number

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

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
THE KATHRYN B MCQUADE FOUNDATION

Employer identification number
46-4122112

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	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 84,336.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 123,540.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 105,644.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 53,476.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 53,280.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 109,680.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization
THE KATHRYN B MCQUADE FOUNDATION

Employer identification number
46-4122112

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	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 23,541.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 112,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	KATHRYN B MCQUADE 420 VIA VENTANA DRIVE MESQUITE, NV 89027-3701	\$ 116,484.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

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
1	NORFOLK SOUTHERN CORP 705 SHARES	\$ 84,336.	04/27/2017
2	NORFOLK SOUTHERN CORP 1000 SHARES	\$ 123,540.	05/31/2017
3	NORFOLK SOUTHERN CORP 800 SHARES	\$ 105,644.	10/26/2017
4	NORFOLK SOUTHERN CORP 400 SHARES	\$ 53,476.	11/29/2017
5	CSX CORP 1000 SHARES	\$ 53,280.	11/29/2017
6	NORFOLK SOUTHERN CORP 800 SHARES	\$ 109,680.	12/01/2017

Name of organization

THE KATHRYN B MCQUADE FOUNDATION

Employer identification number

46-4122112

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
7	PEPSICO INC 203 SHARES	\$ 23,541.	12/01/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	NORFOLK SOUTHERN CORP 800 SHARES	\$ 112,200.	12/04/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
9	NORFOLK SOUTHERN CORP 800 SHARES	\$ 116,484.	12/27/2017
(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
		\$	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
USGI REPORTED AS NONQUALIFIED DIVIDENDS	6,732.	6,732.
FOREIGN DIVIDENDS	18,898.	18,898.
NONDIVIDEND DISTRIBUTIONS	220.	
DOMESTIC DIVIDENDS	66,436.	66,436.
OTHER INTEREST	184.	184.
US GOVERNMENT INTEREST REPORTED AS QUALI	192.	192.
NONQUALIFIED DOMESTIC DIVIDENDS	33,323.	33,323.
	-----	-----
TOTAL	125,985.	125,765.
	=====	=====

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART I - OTHER INCOME
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FEDERAL TAX REFUND	2,884.
TOTALS	----- 2,884. =====

FORM 990PF, PART I - ACCOUNTING FEES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEE	2,500.			2,500.
TOTALS	2,500.	NONE	NONE	2,500.
	=====	=====	=====	=====

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
UST-MLT FEES AS AGENT	40,775.	24,465.	16,310.
UST-MLT FEES AS AGENT	40,775.	24,465.	16,310.
	-----	-----	-----
TOTALS	81,550.	48,930.	32,620.
	=====	=====	=====

FORM 990PF, PART I - TAXES

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
FOREIGN TAXES	3,477.	3,477.
EXCISE TAX ESTIMATES	3,309.	
	-----	-----
TOTALS	6,786.	3,477.
	=====	=====

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART I - OTHER EXPENSES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	CHARITABLE PURPOSES -----
FOUNDATION ADVISORY SERVICE FE	17,769.	17,769.
WEBSITE HOSTING FEE	150.	150.
TOTALS	----- 17,919. =====	----- 17,919. =====

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART II - OTHER INVESTMENTS

=====

DESCRIPTION	COST/ FMV C OR F	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
-----	----	-----	-----	----
81369Y704 SECTOR SPDR TR	C		212,275.	278,469.
56063U638 MAINSTAY INTERNATIONAL	C		377,900.	458,005.
92204A702 VANGUARD INFORMATION	C		254,933.	358,452.
92204A405 VANGUARD FINANCIALS	C		158,376.	221,046.
74925K581 ROBECO BP LONG SHORT	C		119,294.	133,402.
63872T729 ASG MANAGED FUTURES	C		36,941.	37,638.
4812A4351 JP MORGAN STRATEGIC	C		76,075.	76,149.
30254T759 UAM FPA CRESCENT POR	C		121,671.	129,926.
09256H286 BLACKROCK STRATEGIC	C		74,369.	76,430.
81369Y886 SECTOR SPDR TR SHS B	C		68,062.	73,857.
81369Y407 SECTOR SPDR TR SHS B	C		192,735.	240,310.
81369Y308 SECTOR SPDR TR SHS B	C		162,831.	175,164.
00203H792 AQR MULTI STRATEGY	C		36,405.	34,896.
81369Y209 SECTOR SPDR TR SHS B	C		202,515.	215,712.
78464A789 SPDR KBW INSURANCE	C		59,949.	73,619.
47103C795 JANUS ENTERPRISE FUN	C		132,794.	171,572.
360873137 GOTHAM ABSOLUTE RETU	C		114,666.	132,951.
00203H859 AQR MANAGED FUTURES	C		39,755.	37,576.
81369Y860 REAL ESTATE SELECT	C		73,466.	77,936.
47803W406 JOHN HANCOCK DISCIPL	C		73,077.	82,391.
95768D400 WESTERN ASSET MACRO	C		91,505.	96,604.
94975J581 WELLS FARGO ADVANTAG	C		522,767.	523,935.
888894300 TOCQUEVILLE INTERNAT	C		123,066.	153,125.
81369Y506 SECTOR SPDR TR	C		160,150.	164,392.
69351J413 PNC MULTI FACTOR SMA	C		70,449.	85,994.
464287408 ISHARES TR	C		1,083,112.	1,203,290.
00770G847 JOHCM INTERNATIONAL	C		404,733.	459,774.
81369Y100 SECTOR SPDR TR SHS B	C		31,051.	39,526.
92204A884 VANGUARD TELECOMM SR	C		60,961.	59,703.

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART II - OTHER INVESTMENTS
=====

DESCRIPTION -----	COST/ FMV C OR F -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----	ENDING FMV ---
68380L407 OPPENHEIMER INTERNAT	C		122,577.	153,164.
592905509 METROPOLITAN WEST FD	C		794,445.	785,774.
246097208 DELAWARE SMALL CAP V	C		35,534.	42,945.
025076647 AMERICAN CENTURY MID	C		76,637.	81,023.
018914408 ALLIANCEBERNSTEIN SM	C		35,712.	41,095.
921075370 VAN ECK EMERGING MAR	C	6,568,813.	399,683.	558,178.
BEGBALANCE	C			
TOTALS		6,568,813.	6,600,471.	7,534,023.
		=====	=====	=====

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION -----	AMOUNT -----
EXCESS OF FMV/COST - CONTRIBUTED ASSETS	507,868.
NET YEAR END SALES	76,625.
COST BASIS ADJUSTMENT	39,644.
NET TIMING DIFFERENCE	306.

TOTAL	624,443.
	=====

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS
=====

NAME AND ADDRESS

KATHRYN B MCQUADE
420 VIA VENTANA DRIVE
MESQUITE, NV 89027-3701

BRUCE HADDAN
209A 88TH STREET
VIRGINIA BEACH, VA 23451

STATEMENT 10

THE KATHRYN B MCQUADE FOUNDATION 46-4122112
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
WOMEN'S GLOBAL EMPOWERMENT FUND
ADDRESS:
P O BOX 6283
DENVER, CO 80206
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
YOUNG WOMEN'S CHRISTIAN ASSOC
OF THE CENTRAL CAROLINAS INC
ADDRESS:
3420 PARK ROAD
CHARLOTTE, NC 28209-2008
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
SAVE THE CHILDREN
ADDRESS:
501 KINGS HIGHWAY EAST
FAIRFIELD, CT 06825
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
HURRICANE RELIEF
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 15,000.

STATEMENT 11

THE KATHRYN B MCQUADE FOUNDATION 46-4122112
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
AMERICARES FOUNDATION INC
ADDRESS:
88 HAMILTON AVENUE
STAMFORD, CT 06902-3111
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
HURRICANE RELIEF
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
RISING TIDE CAPITAL INC
ADDRESS:
334 MARTIN LUTHER KING JR DRIVE
JERSEY CITY, NJ 07305-3618
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:
TECHNOSERVE INC
ADDRESS:
1120 19TH STREET NW 8 FLOOR
WASHINGTON, DC 20036-3605
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SMART DUKA INITIATIVE - EMPOWER WOMEN NAIROBI
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

STATEMENT 12

RECIPIENT NAME:
FINCA INTERNATIONAL INC
ADDRESS:
1101 14TH STREET NW 11TH FLOOR
WASHINGTON, DC 20005
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 30,000.

RECIPIENT NAME:
BOYS & GIRLS CLUBS OF AMERICA
ADDRESS:
1275 PEACHTREE ST NE
ATLANTA, GA 30309-3580
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
INTERNATIONAL RESCUE COMMITTEE INC
ADDRESS:
122 E 42ND STREET
NEW YORK, NY 10168-0002
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORT FOR SYRIAN REFUGEES
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
NAWBO INSTITUTE FOR ENTREPRENEURIAL
DEVELOPMENT
ADDRESS:
601 PENNSYLVANIA AVE NW S 900
WASHINGTON, DC 20004
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 30,000.

RECIPIENT NAME:
PASO PACIFICO
ADDRESS:
P O BOX 1244
VENTURA, CA 93002-1244
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SEA TURTLE CONSERVATION / LOCAL WOMEN'S ROLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 18,500.

RECIPIENT NAME:
JUST LIKE MY CHILD FOUNDATION
ADDRESS:
P O BOX 22025
SAN DIEGO, CA 92192-2025
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 20,000.

THE KATHRYN B MCQUADE FOUNDATION 46-4122112
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
WOMEN'S GLOBAL EMPOWERMENT FUND
ADDRESS:
P O BOX 6283
DENVER, CO 80206-4707
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
HEALTHY PERIODS AND WOMEN BAKERY INITIATIVES
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 35,000.

RECIPIENT NAME:
ROOTS & WINGS FOUNDATION
ADDRESS:
75 BLOOMFIELD AVENUE STE 303
DENVER, NJ 07834-2735
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNION COUNTY RISE PROGRAM
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
THE INSIDE-OUT PRISON EXCHANGE
PROGRAM
ADDRESS:
3340 NORTH BROAD STREET 4TH FL
PHILADELPHIA, PA 19122
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
PROGRAM EXPANSION IN MEXICO
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 24,000.

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ACE USA

ADDRESS:

C/O SKODY, 520 8TH AVE NO 2200

NEW YORK, NY 10018

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

DREAMS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 30,000.

RECIPIENT NAME:

ROANOKE CHILDREN'S THEATRE INC

ADDRESS:

P O BOX 4392

ROANOKE, VA 24015

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

KALEIDOSCOPE & RCT4TEENS PROGRAMS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

CHARITIES AID FOUNDATION AMERICA

ADDRESS:

225 REINEKERS LANE STE 375

ALEXANDRIA, VA 22314-2848

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

RELIEF IN SYRIA

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 108,333.

STATEMENT 16

RECIPIENT NAME:
REFUGEE UTILITY PROJECT
ADDRESS:
659 IDLEWOOD PL
EL DORADO HLS, CA 95762-9588
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 20,000.

RECIPIENT NAME:
SYRIA FUND INC
ADDRESS:
424 3 117TH STREET APT 4
NEW YORK, NY 10035-5043
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 22,500.

RECIPIENT NAME:
CHILDREN AND FAMILIES FIRST DELAWARE INC
ADDRESS:
2005 BAYNARD BLVD
WILMINGTON, DE 19802
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 27,000.

RECIPIENT NAME:
CHILDREN'S TRUST FDN ROANOKE VALLEY INC
ADDRESS:
541 LUCK AVENUE STE 308
ROANOKE, VA 24016
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:
AMERICAN INDIAN COLLEGE FUND
ADDRESS:
P O BOX 172449
DENVER, CO 80217-9797
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 32,000.

RECIPIENT NAME:
AMERICAN FUND FOR CHARITIES
ADDRESS:
1000 N WEST STREET STE 1200
WILMINGTON, DE 19801
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
PROJECT GATEWAY FOR EMPOWERMENT PROGRAM
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

THE KATHRYN B MCQUADE FOUNDATION 46-4122112
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
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RECIPIENT NAME:
THE COLLEGE OF WILLIAM & MARY FDN
ADDRESS:
P O BOX 8795
WILLIAMSBURG, VA 23187-8795
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
TEN YEAR GRANT AWARDED IN 2016
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 125,000.

RECIPIENT NAME:
MILL MOUNTAIN PLAYHOUSE CO
ADDRESS:
1 MARKET SQUARE
ROANOKE, VA 24011-1429
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
MILL MOUNTAIN THEATRE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 8,000.

RECIPIENT NAME:
YOUNG WOMEN'S CHRISTIAN ASSOC
OF THE CENTRAL CAROLINAS INC
ADDRESS:
3420 PARK ROAD
CHARLOTTE, NC 28209-2008
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
WOMEN IN TRANSITION PROGRAM
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

UNITED NATIONS FOUNDATION

ADDRESS:

1800 MASSACHUSETTS AVE NW

WASHINGTON, DC 20036

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GIRL UP TEEN ADVISORY BOARD

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

FOUNDATION FOR PUERTO RICO INC

ADDRESS:

P O BOX 364029

SAN JUAN, PR 00936-4029

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

HURRICANE RELIEF

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

SCHOOL OF LEADERSHIP - AFGHANISTAN INC

ADDRESS:

700 N OLIVE AVENUE

WEST PALM BEACH, FL 33401-4004

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

RESIDENTIAL LIFE PROGRAM

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 25,000.

STATEMENT 20

THE KATHRYN B MCQUADE FOUNDATION

46-4122112

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

AFRICAID INC

ADDRESS:

1031 33RD STREET STE 174

DENVER, CO 80205-2764

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 25,000.

TOTAL GRANTS PAID:

900,333.

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STATEMENT 21