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			_						OMB No 1545-0687
Form	990-T		- (an	anization Busin id proxy tax under	section	6033(e))	eturn		2017
	rtment of the Treasury all Revenue Service	Į	endar year 2017 or other tax  Go to www.ir not enter SSN numbers	year beginning s. <i>gov/Form990T</i> for instr s on this form as it may b	uctions and	d ending I the latest informatio Dic if your organization	on. on is a 501(c)(3).		en to Public Inspection ( (c)(3) Organizations On
_	Check box if address changed		Name of organization  JOSEPH E.		-		D Employer id (Employees' t		
- 12	<b>K</b> 501( <b>C</b> )( <b>3</b> )	Print	FOUNDATION					600	0E1
ŀ	408(e) -220(e)	or	1	suite no lía PO box, see instruct CTICUT AVE ]		١٥	52-1		
ŀ	408A 530(a)	Туре		nce, country, and ZIP or foreign		, o	E Unrelated be		activity codes
	529(a)		WASHINGTON		DC 2	0009	5311	20	
	Book value of all assets at end of year	F G		er (See instructions )					
-	14,759,374		heck organization type		oration	501(c) trust	401(a) trus	st	Other trust
1 [	Describe the organizatio							•	
	During the tax year, was f "Yes," enter the name			n an affiliated group or a parent corporation	parent-sub	osidiary controlled gr	oup?		Yes X
<u>.                                     </u>	The books are in care of	i ▶ J	OYCE HAVARI	)		Tele	phone number	> 2	02-797-672
			e or Business Inc			(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sale								
b	Less returns and allow	vances		c Balance	1c				
2	Cost of goods sold (Se	chedule	A, line 7)		2				
3	Gross profit Subtract				3				
4a	Capital gain net incom	-	•		4a				
b			line 17) (attach Form 479)	7)	4b			_	
C	Capital loss deduction				4c				
5 c	Income (loss) from partnerships		porations (attach statement)		5			_	
6 7	Rent income (Schedul					1,043,	895	-63,13	
, 8		ed income (Schedule E)  7 980,765 1,043 es, and rents from controlled organizations (Schedule F)  8						023	03,13
9	Investment income of a se		•	• •	9		5-6	, <u> </u>	
0	Exploited exempt activ			acon (oundario o)	10		THE COLUMN	التار	VELIO
1	Advertising income (S				11		S AUC		୍ର ପ୍ର
2	Other income (See in:		•		12		AUG AUG	20	ZU10 13
3	Total. Combine lines 3				13	980,765	1,043,		
Рa	art II Deduction deduction	n <b>s No</b> t s must	t Taken Elsewher be directly conne	re (See instructions cted with the unrela	for limita	tions on deductiness income)	ons) (Except	-}fōr't	contributions,
14	Compensation of office	ers, dire	ctors, and trustees (So	hedule K)				14	
5	Salanes and wages							_15	
6	Repairs and maintena	nce						16	
7	Bad debts	ula)						17	
8 9	Interest (attach sched Taxes and licenses	uie)						18 19	
20	Charitable contributions (S	See instri	ictions for limitation rules)					20	
1	Depreciation (attach F		•			21	826,541	20	
2			Schedule A and elsewl	here on return		22a	826,541	22b	
3	Depletion					<u> </u>		23	
4	Contributions to deferr	ed com	pensation plans					24	
5	Employee benefit prog	grams						25	
6	Excess exempt expen-	ses (Sch	nedule I)					26	
7	Excess readership cos	sts (Sche	edule J)					27	
28	Other deductions (atta	ich sche	edule)				i	_28_	
9	Total deductions. Ad		-					29	
0				ing loss deduction Subt	ract line 29	from line 13		_30	-63,13
1	• -		limited to the amount o	•				31	
2			•	eduction Subtract line 3		30		32	-63,13
33	•	•		3 instructions for exception	•	45 1 00		33	1,00
34				33 from line 32 If line 33	s is greater	tnan line 32,			60 40
	enter the smaller of ze	ction A		<del></del>				_34	-63,13





<b>53</b> Er	nter the amount of tax-exemp								i
Sign Here	true, correct, and complete Declaration	of preparer (other than taxpayer)	is based on all information of PRESIDE		owledge and	1		RS discuss the eparer shown ictions)?	
	Signature of officer	Date	Trtle						<u></u>
	Print/Type preparer's name		Preparer's signature		Date	Check	ıf PTII	٧	- ;
Paid	FRANK J DELLA NOCE	III, CPA	FRANK J DELLA N	OCE_III,_CPA	06/27/	18 self-employ	red PO	0543582	
Prepare	Fr. Firm's name FRA	NK J DELLA N	OCE, CPA,	PC	F	ım's EIN	20-	-1937!	50

21401-2953

888 BESTGATE RD STE 315

ANNAPOLIS, MD

Form 990-T (2017)

20-1937500

410-224-0333

Firm's EIN

Phone no

Use Only

Firm's address

		HE. & MAF						<u>52-1</u>	628951			P	age <b>3</b>
Sch	edule A - Cost of God	ods Sold. Enter	metho	d of inve	enton	valuation							
1	Inventory at beginning of ye	ear 1			6	Inventory at e	end of y	/ear	ļ	_6	<u> </u>		
2	Purchases	2			7	Cost of goo	ds sold	I. Subtra	ect		Į.		
3	Cost of labor	3			1	ine 6 from lir	ne 5 Er	nter here	and		-		
4a	Additional sec 263A costs			ĺ		n Part I, line	2		į	_ 7	7		
	(attach schedule)	4a			8	Do the rules	of section	on 263A	(with respect to			Yes	No
b	Other costs (attach schedule)	4b			1	property proc	duced o	r acquire	ed for resale) apply			_	
5	Total. Add lines 1 through					to the organi							<u> </u>
Sch	edule C - Rent Incom	ne (From Real F	ropert	y and P	erso	nal Prope	erty Le	eased	With Real Prope	ert	y)		
_(se	e instructions)												
1 Des	cription of property												
(1)	N/A												
(2)													
(3)									<del></del>				
(4)													
		2 Rent receive	ed or accru	ed									
	(a) From personal property (if the p	ercentage of rent		(b) From re	eal and	personal property	(if the		3(a) Deductions d	lirect	tly connected with the	ıncome	
	for personal property is more than	in 10% but not		-		personal propert	•	6	ın columns 2(	(a) a	ind 2(b) (attach schedu	ıle)	
	more than 50%)			50% or if the	rent is t	pased on profit or	income)			_			
(1)	<del> </del>												
(2)													
(3)													
(4)													
Tota	<u></u> _		Total						(b) Total deduction	S.			
	otal income. Add totals of c		) Enter						Enter here and on page				
	and on page 1, Part I, line 6					<u> </u>			Part I, line 6, column	(B)	<u> </u>		
Sch	edule E - Unrelated [	Debt-Financed I	ncome	see ins	structi	ons)				_			
			ľ	2	Gross #	ncome from or			3 Deductions directly co				_
	1 Description of debt-fir	nanced property	İ			debt-financed		STMT 1 debt-fit				MT	2
			ł		pr	oroperty (a) Straight line depreciation				(b) Other deductions (attach schedule)			
	DEMATT DESIMAT					2 000	006	(attach schedule)					<u> </u>
(1)	RETAIL RENTAL	<u> </u>				3,089,	996		826,541	4	2,4	<u>62,:</u>	352
(2)	<del></del>							<u></u>		+			
(3)	<del></del>								<del></del>	+			
(4)	4 Amount of average	E Average advanted h							<del></del>	+			
	acquisition debt on or	5 Average adjusted to of or allocable to	basis			Column divided	l	7 G	ross income reportable	1	8 Allocable de		
	allocable to debt-financed property (attach schedule)	debt-financed prope (attach schedule)	rty			olumn 5	į		olumn 2 x column 6)	1	(column 6 x total of 3(a) and 3(b)		15
	3,392,757	<del></del>	044			21	740		000 766	+			OF
(1)	3,392,131	10,690,	044				74%		980,765	2	1,0	43,8	395
(2)	- <del></del>						%		<del></del>	+	<del></del>		
(3)		<del></del>					<u>%</u>		<del></del>	+			
(4)	EE STATEMENT 3 S	SEE STATEMEN	T 4				- %	<b>F</b>	<del></del>	+			
31	SE SIMIEMENI S	SEE STATEMEN	. 4						here and on page 1, line 7, column (A)		Enter here and of Part I, line 7, co		
Tota	le							,	980,765	۱,	1,0	•	•
	ıs I dividends-received deduc	ctions included in co	dumn 8				- (		980,763	十	<u> </u>	ع, ر	, 33
		versite introducte in the							_				

Form 990-T (2017) <b>JOSEPH</b>	E. & MAI	RJORIE B	. JON	ES	<u>_5</u> 2	<u>2-16289</u>	51		Page 4	
Schedule F - Interest, Anni	uities, Royalt	ies, and Rer	nts Fron	n Controll	ed Org	anizations	s (see instruc	ctions)		
,			Exemp	t Controlled	d Organ	ızatıons				
Name of controlled organization	ıder	2 Employer atification number	t	related income e instructions)		a) of specified nents made	5 Part of column included in the conganization's gro	controlling	6 Deductions directly connected with income in column 5	
- 37/3							Organizadoris gio	33 111001116	- Column 5	
(1) <b>N/A</b>							<b> </b> _			
(2)										
(3)					<u> </u>		<u> </u>			
(4)					<u> </u>					
Nonexempt Controlled Organiza	ations		-							
7 Taxable Income	ľ	Net unrelated income iss) (see instructions)			fied le	10 Part of column 9 included in the control organization's gross in		1	Deductions directly nected with income in column 10	
(1)								<u></u>		
(2)										
(3)										
(4)										
						Enter here a	ns 5 and 10 nd on page 1, column (A)	Ente	d columns 6 and 11 or here and on page 1, t I, line 8 column (B)	
Totals					<u> </u>			l		
Schedule G - Investment In	ncome of a S	ection 501(c	)(7), (9) 	, or (17) O	rganiz	ation (see	instructions)			
1 Description of income		2 Amount of income		3 Deductions directly connected (attach schedule)		(2	4 Set-asides (attach schedule)		5 Total deductions and set-asides (col 3 plus col 4)	
(1) <b>N/A</b>							- <del></del>	$\neg$	· <del></del> -	
				†				-+-		
(2)				+		<del></del>				
(3)				<del> </del>		-+			<del></del>	
(4)				<b> </b>						
	Enter here and o Part I, line 9, col					•		ter here and on page 1, art I, line 9, column (B)		
Totals				4						
Schedule I - Exploited Exe	mpt Activity	Income, Oth	<u>er Thar</u>	<u>Advertisi</u>	ing Inc	ome (see ı	<u>nstructions)</u>		<del></del>	
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expendirectly connected production unrelate business in	with	4 Net income ( from unrelated to or business (co. 2 minus column If a gain, comp cols 5 through	trade lumn 1 3) oute	5 Gross income from activity that is not unrelated business income	t attnbut	penses able to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A	1	<del></del>					<del> </del>		+	
									<del> </del>	
(2)	<del> </del>	<del>-  </del>							<del> </del>	
(3)	ļ								<del></del>	
(4)									<u> </u>	
Totals ▶	Enter here and or page 1, Part I, line 10, col (A)	n Enter here a page 1, Pa fine 10, col	art I,						Enter here and on page 1, Part il, line 26	
Schedule J - Advertising Ir	Icome (see in	structions)			-		<del></del>		<del></del>	
Part I Income From F			Cores	lidated De	neis.		<del></del>			
Fatt Income From F	Enouicais IX	sported on a	Consc				<del></del>		<del> </del>	
1 Name of penodical	2 Gross advertising income	3 Directising	1	4 Advertising gain or (loss) ( 2 minus col 3) a gain, comput cols 5 through	col ) if ite	5 Circulation income	6 Read	dership sts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A				`					<del> </del>	
(2)		_ [			<u> </u>				┥	
	<del></del>				<u> </u>		<del></del>		-{	
(3)	<del> </del>	<del></del>			<u> </u>	<del></del>			-	
(4)	<del> </del>	<del>-                                    </del>					_+		<del> </del>	
Totals (carry to Part II, line (5))										

Form 990-T (2017) <b>JOSEPH</b>	E. & MARJORIE	B. JO	NES	52-16289	51		Page 5
Part II Income From F	Periodicals Reported	on a Sepa	rate Basis (For	each periodic	al listed in F	Part II, fi	Il in columns
. ' 2 through 7 on a	a line-by-line basis)		·				
1 Name of penodical	2 Gross advertising income adv	3 Direct ertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Rear		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A							
(2)							
(3)	<u> </u>						
(4)							
Totals from Part I							_
	page 1, Part I, pa	er here and on ge 1, Part I, e 11, col (B)					Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)			<u></u>				·
Schedule K - Compensatio	n of Officers, Directo	ors, and Tr	ustees (see inst	ructions)			
1 Name	•		2 Title		3 Percent of time devoted to business		ensation attributable to related business
(1) N/A							
(2)					%		
(3)					%		
(4)			<del></del>		%		
Total. Enter here and on page 1, Pa	rt II, line 14						

Form **990-T** (2017)

JOSE8951 Joseph E. & Marjorie B. Jones

Federal Statements

52-1628951 'FYE <sup>'</sup>12/31/2017

## Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

Desc	ription	Deduction
RETAIL RENTAL		
DEPRECIATION		826,541
TOTAL		826,541

## Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

Description	Deduction
RETAIL RENTAL	
INTEREST	121,036
AMORTIZATION	163,625
BAD DEBT	23,557
BANK CHARGES	1,540
BUILDING CONTRACT SERVICES	276,780
BUSINESS MEETINGS	960
COMPENSATION OF OFFICERS	351,402
COMPUTER EXPENSES	31,307
DUES & SUBSCRIPTIONS	1,302
EMPLOYEE BENEFITS	119,049
EMPLOYEE BENEFITS (NON OPERATING)	35,461
GARAGE AUTO REPAIRS	19,717
INSURANCE	41,945
LEGAL FEES	60,483
LOAN FEES	4,836
OFFICE SUPPLIES	8,640
OTHER EMPLOYEE SALARIES	318,735
PAYROLL TAXES	46,872
POSTAGE/FREIGHT/COURIER	606
PROFESSIONAL FEES	9,805
REPAIRS & MAINTENANCE	110,067
REPRODUCTION	5 <b>,</b> 689
TAXES	534,236
TELEPHONE	11,512
UTILITIES	163,190
TOTAL	2,462,352

## Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

Description	Deduction
RETAIL RENTAL	
SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH	40,713,083
DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	12
AVERAGE ACQUISITION DEBT	3,392,757
NAPIGION NESOTOTION PERI	3,392,131

JOSE8951 Joseph E. & Marjorie B. Jones
52-1628951 Federal Statements

FYE: 12/31/2017

## Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

Description	Deduction
RETAIL RENTAL ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	10,791,836 10,588,251
DIVIDED BY 2	21,380,087
AVERAGE ADJUSTED BASIS	10,690,044