DLN: 93491131020988

OMB No 1545-0052

2017

Return of Private Foundation

Department of the Treasury

Form 990-PF

Internal Revenue Service

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

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

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01-01-20)17 , a	nd er	nding 12-31-	2017	
		indation .S SCHWARTZ & PAUL MARTIN WOLFF			A Employer Id	entification numbe	r
	UNDAT				52-1852485		
Num	ber and	street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instructior	ns)
٥,	J00 VV 13	SCONSIN AVENUE NO 200		(202) 434-5000)		
		, state or province, country, and ZIP or foreign postal code SE, MD 20815	1		C If exemption	application is pendin	g, check here
G CH	neck al	I that apply	former public charity		D 1 . Foreign on	ganizations, check he	ere -
	iccix ui	☐ Final return ☐ Amended return	Torritor public charity			ganizations meeting	▶ ∟
		Address change Name change			test, chec	k here and attach cor	mputation 🕨 📙
H Ch	neck tv	pe of organization Section 501(c)(3) exempt private	foundation			undation status was t n 507(b)(1)(A), chec	
		· · · · · · · · · · · · · · · · · · ·	e private foundation		under sectio	11 307(b)(1)(A), cliec	Killere - —
			☑ Cash ☐ Accru	ıal	F If the founda	ation is in a 60-month	n termination
		rom Part II, col (c), \$ 1,225,789	be on cash basis)		under sectio	n 507(b)(1)(B), chec	k here 🕨 🗀
Pa	rt I	Analysis of Revenue and Expenses (The total		Ι			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment income	(c) Adjusted net	for charitable purposes
		equal the amounts in column (a) (see instructions))	books		meome	meome	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	14,710				
	_	·					
	2	Check ► ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	16,009		16,009	16,009	
	5a	Gross rents					
	ь	Net rental income or (loss)					
Kle	6a	Net gain or (loss) from sale of assets not on line 10	-3,953	3			
Revenue	ь	Gross sales price for all assets on line 6a 250,827					
\aleph	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	26,766	5	16,009	16,009	
	13	Compensation of officers, directors, trustees, etc	()	0	0	(
	14	Other employee salaries and wages					
6S	15	Pension plans, employee benefits		ļ			
ens	16a	Legal fees (attach schedule)					
Operating and Administrative Expenses	b	Accounting fees (attach schedule)	6,250	1	0	0	(
ė.	С	Other professional fees (attach schedule)					
ativ	17	Interest		<u> </u>			
2	18	Taxes (attach schedule) (see instructions)	141		0	0	(
≣	19	Depreciation (attach schedule) and depletion					
Ę	20	Occupancy					
υ Ο	21	Travel, conferences, and meetings					
a	22	Printing and publications		<u> </u>			
ğ	23	Other expenses (attach schedule)	101		0	0	(
rat	24	Total operating and administrative expenses.					
<u>8</u>		Add lines 13 through 23	6,492	-	0	0	(
ں	25	Contributions, gifts, grants paid	101,750				101,750
	26	Total expenses and disbursements. Add lines 24 and 25	108,242		0	0	101,750
	27	Subtract line 26 from line 12	,				,,,,,
	а	Excess of revenue over expenses and	-81,476	5			
	ь	disbursements Net investment income (if negative, enter -0-)		 	16,009		
	c	Adjusted net income(if negative, enter -0-)		<u> </u>	• • • •	16,009	
	L T	work Deduction Act Notice are instructions			O I NI 44000	<u> </u>	000 PE (2217

		should be for end-or-year amounts only (see instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	370,063	23,825	23,825
	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 ▶			
S	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U S and state government obligations (attach schedule)			
	ь	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)	682,086	973,617	1,201,964
	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			
		ınstructions Also, see page 1, item I)	1,052,149	997,442	1,225,789
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			

	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	682,086	973,617	1,201,964
	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)	1,052,149	997,442	1,225,789
	17	Accounts payable and accrued expenses			
	18	Grants payable			
les	19	Deferred revenue			
ilt.	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)	0	0	

Ses	and complete lines 24 through 26 and lines 30 and 31.		
<u> </u>	Unrestricted	1,052,149	997,442
දු වූ 25	Temporarily restricted		
26	Permanently restricted		
키	Foundations that do not follow SFAS 117, check here 🕨 🗌		

1,052,149

1,052,149

997,442

997,442

1

2

3

4

5

6

1,052,149

-81,476

26,769

997,442

997,442 Form **990-PF** (2017)

Foundations that follow SFAS 117, check here ▶

Capital stock, trust principal, or current funds . . .

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances (see instructions) . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶

Net Assets or

27

28

29 30

31 Part III

2

Page **3**

List and describe 2-story brick war	(b) How acquired P—Purchase D—Donation	l Da	(c) ite acquired o , day, yr)	(d) Date sold (mo , day, yr)		
1a See Additional Data Tabl	(***		(**** / ***// /* /			
b	e					
С						
d						
 e						
	(f)		(g)			h)
(e) Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale		Gain c	or (loss)) minus (g)
a See Additional Data Tabl	e					
b						
С						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69			(1)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col (ı) l (ʒ), ıf any	cc	ol (k), but not	h) gain minus less than -0-) or om col (h))
a See Additional Data Tabl			. (3// =/			,
b						
 C						
d						
e						
2 Capital gain net income	Part I, line 7 Part I, line 7	} 2		-3,953		
•	gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instruction	ons) If (loss), enter -0)-	} 3		-2,931
Part V Qualification I	Jnder Section 4940(e) for Re	educed Tax on Net	Investment	Income		
	rivate foundations subject to the sec					
(Tor optional use by domestic p	invate roundations subject to the sec	ction +5+o(a) tax on in	et investment inc	onie j		
If section 4940(d)(2) applies, le	eave this part blank					
	e section 4942 tax on the distributal of qualify under section 4940(e) Do			od?	□ Y	es 🗹 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	e making any ent	ries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(col	(d) Distribution rat (b) divided by o	
2016	68,375		1,098,873			0 062223
2015	69,466		1,307,011			0 053149
2014	76,638		1,485,067			0 051606
2013	66,634		1,349,280			0 049385
2012	45,603		1,125,028			0 040535
2 Total of line 1, column (d)		:	2		0 256898
number of years the four	o for the 5-year base period—divide to indation has been in existence if less	than 5 years 🔒 🐍	· . ·	3		0 051380
	ncharitable-use assets for 2017 from	├	4		1,161,982	
5 Multiply line 4 by line 3			_	5		59,703
	ent income (1% of Part I, line 27b)		· · · · · · -	6		160
				7 B		59,863 101,750
	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						e tne Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

	Information About Officers, Di	irectors Trustees	Foundation Managers	Highly Paid Employees
Down MITT	Initiation About Officers, Di	inectors, musices,	i oundation managers,	inging raid Employees,
Part VIII	and Contractors			

and Contractors					
1 List all officers, directors, truste	es, f	oundation managers ar	d their compensation	(see instructions).	
(a) Name and address		Title, and average hours per week b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RHEA S SCHWARTZ 5600 WISCONSIN AVENUE SUITE 20B	CHA: 0 00	IRMAN	0	0	C
CHEVY CHASE, MD 20815 PAUL MARTIN WOLFF	PRE	SIDENT	0	0	1
5600 WISCONSIN AVENUE SUITE 20B CHEVY CHASE, MD 20815	0 00		0	U	
MICHAEL LEVITT		PRESIDENT	0	0	C
5408 WEHAWKEN ROAD BETHESDA, MD 20816	0 00				
2 Compensation of five highest-pa	id er	nployees (other than t	nose included on line 1	.—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE		-			
		1			
		_			
		-			
Total number of other employees paid ov	er \$5	50,000			C
3 Five highest-paid independent of	ontra	actors for professional	services (see instruction	ons). If none, enter "NON	E".
(a) Name and address of each perso	n pai	d more than \$50,000	(b) Typ	e of service	(c) Compensation
NONE			-		
			1		
			-		
			1		
Total number of others receiving over \$50	0,000) for professional services			C
Part IX-A Summary of Direct (
List the foundation's four largest direct charitable organizations and other beneficiaries served, cor	e activ iferen	rities during the tax year Incli ces convened, research paper	ude relevant statistical inform s produced, etc	nation such as the number of	Expenses
1		· · ·			
2					
3					
4					
Part IX-B Summary of Progra	m-R	elated Investments	(see instructions)		
Describe the two largest program-related inv			<u> </u>	and 2	Amount
1					
2					
All other program-related investments	See	instructions			
3					
Total. Add lines 1 through 3 .					
<u>-</u>					

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

3a 3h

4

5

101.750

101.590

Form 990-PF (2017)

160

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

1 Distributable amount for 2017 from Part XI, line 7

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

Subtract lines 7 and 8 from line 6a

(If an amount appears in column (d), the

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.

57,939

57,939

Form 990-PF (2017)

0

(d)

2017

/ 1 1	,,,	20		12	, ,	,
P	ari	ΕX	П		τ	ı

b Total for prior years

a From 2012.

d From 2015.

e From 2016.

b From 2013. . . . c From 2014. . .

r (20	117)		
14	Undistributed Income (see instruc	tions)	
			_

ted Income (see instruc	tions)
	(a) Corpus

2,146

5 103

9.040 13,469

> 2.146 5,103

> 9.040

13,469

43.811

(b)

Years prior to 2016

29.758

43.811

73,569

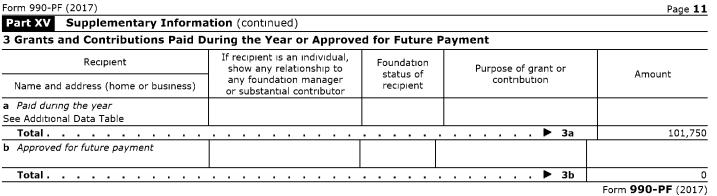
73,569

0

(c)

2016

orr	n 990-PF (2017)					Page 10
P	art XIV Private Operating Found	ations (see ınstr	uctions and Part V	/II-A, question 9)		
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	17, enter the date of	of the ruling	▶∟_	,	1
	Check box to indicate whether the organizat	on is a private oper	ating foundation des	cribed in section L	J 4942(j)(3) or ∟	4942(_J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	. ,
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					
а	"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) Cross investment income					
	(4) Gross investment income Supplementary Information	(Complete this	part only if the	l organization had	d \$5,000 or more	e in
Pa	assets at any time during th	e year—see inst	-			
a	Information Regarding Foundation Man- List any managers of the foundation who hav before the close of any tax year (but only if PAUL MARTIN WOLFF	e contributed more				n
b	List any managers of the foundation who ow				arge portion of the	
	ownership of a partnership or other entity)	of which the foundar	tion has a 10% or gr	eater interest		
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Pro	ograms:		
	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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.					
а	The name, address, and telephone number of	or email address of	the person to whom	applications should	be addressed	
b	The form in which applications should be sul	omitted and informa	ation and materials th	ney should include		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, su factors	ch as by geographic	cal areas, charitable f	fields, kinds of instit	utions, or other	



Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by sectio	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
c					
d					
e f					1
 g Fees and contracts from government agencies 2 Membership dues and assessments. 3 Interest on savings and temporary cash 					
Investments					16,009
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					-3,953
9 Net income or (loss) from special events					-3,933
LO Gross profit or (loss) from sales of inventory LO Other revenue a					
b					
c					
d e					
12 Subtotal Add columns (b), (d), and (e)		0	1	.3	0 12,056 12,056
(See worksheet in line 13 instructions to verify calcu	ılatıons)				12,000
Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which the accomplishment of the foundation's exinstructions)					0
THE RHEA S SCHWARTZ AND PAUL MARTIN 16,1993 THE FOUNDATION IS ORGANIZED PURPOSES THE FOUNDATION'S PRIMARY P D C AREA WITH AN EMPHASIS ON AIDING	EXCLUSIVELY FOURPOSE IS TO P	OR CARRYING OUT	CHARITABLE, EDUC TO CHARITABLE INS	CATIONAL, LITERA STITUTIONS IN TH	RY OR SCIENTIFIC
		·			
					-
L					orm QQQ-DF (2017)

orm 9	990-PF (<u> </u>							Pa	ge 13
	t XVII	Exempt Organia	zations				onships With Nonch			
		ganization directly or in- Code (other than sectio					on described in section 5 organizations?	501	Yes	No
a Tra	ansfers i	from the reporting foun	dation to a non	charitable exe	empt organization	of				
(1) Cash.							1a(1)		No
(2) Other	rassets						1a(2)		No
		sactions								
•	•	of assets to a nonchari	•	-				1b(1)		No
-	-	nases of assets from a n						. 1b(2)		No
•	-	al of facilities, equipmen bursement arrangemen	•					. 1b(3) 1b(4)		No No
-	-	s or loan guarantees.						1b(4)		No
•	•	mance of services or m						1b(5)		No
•	-	facilities, equipment, n	·	-				1c		No
of	the goo any trar	ds, other assets, or serv	vices given by t ngement, show	the reporting in column (d	foundation If the t	foundation receiv goods, other ass	Iways show the fair maried less than fair market ets, or services received f transfers, transactions, and	value	ngemen	nts
de	scribed	ndation directly or indire	Code (other th					. 🗆 Yes	✓	No
p It	"Yes," c	omplete the following so (a) Name of organizatio		(1) Type of organization	n I	(c) Description of r	elationship		
				,	, , , , , , , , , , , , , , , , , , ,		, , , ,	,		
	of m		, it is true, corr				ring schedules and state r than taxpayer) is based			
Sign Here		*****			2018-05-11	*****		lay the IRS di eturn rith the prepa		
	9	Signature of officer or to	rustee		Date	Title		elow see instr)? [√ Yes	□ _{No}
		Print/Type preparer's	name P	reparer's Sıgr	nature	Date	Check if self-			
Paid		KELLY TOOLE					employed ▶ □	P00173	3840	
_	oarer Only	i i i i i i i i i i i i i i i i i i i	LE KATZ & ROE	MERSMA LLP		•	Firm	ı's EIN ▶47	-17674	122
	_		11 N FORT MYE	R DRIVE SUI	TE 600					
		ARLINGTON VA 22209					Pho	ne no (703) 248-9	9200

ARLINGTON, VA 22209

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation APPLE INC Р 2015-11-12 2017-12-01 TWILIO INC CLASS A Ρ 2016-11-17 2017-12-14 APPLE INC Р 2017-10-19 2017-12-01 AT&T Р 2017-01-01 2017-07-12 BRITISH AMERICAN TOBACCO Р 2017-07-25 2017-07-27 Ρ BRITISH AMERICAN TOBACCO 2017-07-25 2017-08-14 Р CHEVRON CORPORATION 2017-01-01 2017-08-02 Р CISCO SYSTEMS 2016-10-03 2017-07-12 Ρ 2017-01-01 DISCOVER FINANCIAL SERVICES 2017-05-31 Р 2017-03-08 2017-07-12 EXXON MOBIL CORP Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 145 100 45 3,670 2,506 -1,16434,626 31,734 2,892 44,153 45,348 -1,195 35 35 0 8,163 9,072 -909 16,506 15,801 705 9,297 9,522 -225 23,393 27,518 -4,125 16,142 16,524 -382 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 45 -1,1642,892 -1,195-909 705 -225 -4,125 -382

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Р KAYNE ANDERSON ENERGY TOTAL RETURN FUND 2017-01-01 2017-07-12 REYNOLDS AMERICAN INC Р 2016-10-03 2017-07-25 ROYAL DUTCH SHELL Р 2017-01-01 2017-07-12 TWILIO INC CLASS A Р 2017-01-01 2017-12-14 Ρ VERIZON COMMUNICATIONS 2017-02-22 2017-07-12 Ρ 2017-02-14 ZIMMER BIOMET HOLDINGS 2017-08-02 CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 16.056 17.058 -1,002 11,787 16,466 4,679 26.712 25,195 1,517 7,519 9.756 -2,237 -2,639 17,231 19.870 11,780 11,790 -10 97 97 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -1,002 4,679 1,517 -2,237-2,639-10 97

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient	recipient		
a Paid during the year					
BCC RESCUE SQUAD 5020 BATTERY LANE BETHESDA, MD 20814		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	250	
FRED HUTCHINSON CANCER CENTER 1100 FAIRVIEW AVENUE N SEATTLE, WA 98109		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	1,000	
FRIENDS OF THE PATIENTS OF THE NIH PO BOX 34139 BETHESDA, MD 20827		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	500	
HEBREW HOME6121 MONTROSE ROAD ROCKVILLE, MD 20852		OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	500	

500

OTHER TO SUPPORT OPERATIONS AND PUBLIC PROGRAMS FOR THE

JEWISH COUNCIL ON THE AGING 12320 PARKLAWN DRIVE

ROCKVILLE, MD 20852 CHARITY COMMUNITY

101,750

Total . . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JEWISH FEDERATION OF GREATER OTHER TO SUPPORT PROGRAM 25,000 WASHINGTON PUBLIC INITIATIVES 6101 EXECUTIVE BLVD 100 CHARITY

NORTH BETHESDA, MD 20852			
JEWISH FOUNDATION FOR GROUP HOMES 1500 EAST JEFFERSON STREET ROCKVILLE, MD 20852	OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	500
JEWISH SOCIAL SERVICE AGENCY 200 WOOD HILL ROAD ROCKVILLE, MD 20850	OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	500
PENN STATE UNIVERSITY 103 WEAVER BUILDING UNIVERSITY PARK, PA 16802	OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	2,500
MICHAEL LEVITT CHARITY - MAZON 10850 WILSHIRE BLVD LOS ANGELES, CA 90024	OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	500
Total	101,750		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
NANCY LEAMOND CHARITY - AARP LEGAL FUND 601 E STREET NW WASHINGTON, DC 20049		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	500	
NATIONAL YIDDISH BOOK CENTER 1021 WEST STREET AMHERST, MA 01002		OTHER PUBLIC CHARITY	TO SUPPORT NEWBUILDING AND MEMORIAL	500	
PLANNED PARENTHOOD OF THE GREATER NORTHWEST 2112 FRANKLIN MERIDIAN, ID 20814		OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	500	
RETURN BASEBALL TO THE INNER CITY 4001 BLUE PARKWAY SUITE 102 KANSAS CITY, MO 64130		OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	2,500	

PLANNED PARENTHOOD OF THE GREATER NORTHWEST 2112 FRANKLIN MERIDIAN, ID 20814	OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	500
RETURN BASEBALL TO THE INNER CITY 4001 BLUE PARKWAY SUITE 102 KANSAS CITY, MO 64130	OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	2,500
SIXTH & I SYNAGOGUE	OTHER	TO SUPPORT PROGRAM	500

MERIDIAN, ID 20814			
RETURN BASEBALL TO THE INNER CITY 4001 BLUE PARKWAY SUITE 102 KANSAS CITY, MO 64130	OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	2,50
SIXTH & I SYNAGOGUE	OTHER	TO SUPPORT PROGRAM	50

RETURN BASEBALL TO THE INNER CITY 4001 BLUE PARKWAY SUITE 102 KANSAS CITY, MO 64130	OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	2,500
SIXTH & I SYNAGOGUE 600 I STREET NW	OTHER PUBLIC	TO SUPPORT PROGRAM INITIATIVES	500

WASHINGTON, DC 20001 CHARITY

101,750 Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
TEMPLE RODEF SHALOM 2100 WESTMORELAND STREET FALLS CHURCH, VA 22043		OTHER PUBLIC CHARITY	TO SUPPORT OPERATIONS AND PROGRAMS FOR THE COMMUNITY	10,000	
ST LUKES MEDICAL CENTER WOOD RIVER FOUNDATION PO BOX 7005 KETCHUM, ID 83340		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	500	
SUN VALLEY CENTER FOR THE ARTS PO BOX 656 SUN VALLEY, ID 83353		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	1,000	
SUN VALLEY SUMMER SYMPHONY PO BOX 1914 SUN VALLEY, ID 83353		OTHER PUBLIC CHARITY	FOR FUNDING OF THE SYMPHONY	2,500	
		+			

OTHER

PUBLIC

CHARITY

TO SUPPORT PROGRAM

INITIATIVES

1,000

101,750

SUN VALLEY CENTER FOR THE ARTS PO BOX 656 SUN VALLEY, ID 83353	OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	1,0
PO BOX 7005 KETCHUM, ID 83340	CHARITY		

SV COMMUNITY LIBRARYPO BOX 2168

KETCHUM, ID 83340

Total . .

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNIV OF WISCONSIN - MADISON PMW OTHER TO SUPPORT THE DEPARTMENT 1,000 **SCHOLARSHIP** PUBLIC: OF HISTORY'S PROGRAMS BOX 78807 CHARITY MILWAUKEE, WI 78807 WOOD RIVER COMMUNITY YMCA OTHER TO SUPPORT PROGRAM 1,000 PO BOX 6801 PUBLIC INITIATIVES

KETCHUM, ID 83340 CHARITY TO SUPPORT PROGRAMS AND WOOD RIVER JEWISH COMMUNITY OTHER 1,000 PO BOX 837 PUBLIC **EVENTS** KETCHUM, ID 83340 CHARITY

500

500

FRIENDS OF THE IDF1430 BROADWAY OTHER TO SUPPORT PROGRAM NEW YORK, NY 10138 PUBLIC **INITATIVES** CHARITY OTHER AMERICAN FRIENDS OF MAGEN DAVID TO SUPPORT PROGRAM ADOM PUBLIC **INITATIVES** 352 7TH AVENUE SUITE 400 CHARITY

NEW YORK, NY 10001 101,750 Total

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
WOOD RIVER WOMEN'S FOUNDATION PO BOX 3686 KETCHUM, ID 83340		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	1,600		
JEWISH NATIONAL FUND8607 2ND AVE SILVER SPRING, MD 20910		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITATIVES	500		
WOOLLY MAMMOTH THEATER COMPANY 641 D ST NW WASHINGTON, DC 20004		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITATIVES	1,000		
OVARIAN CANCER RESEARCH FUND ALLIANCE 1101 14TH ST NW SUITE 850 WASHINGTON, DC 20005		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	400		
THE HUNGER COALITION		OTHER	TO SUPPORT PROGRAM	500		

OTHER TO SUPPORT PROGRAM PUBLIC INITIATIVES

THE HUNGER COALITION 121 HONEYSUCKLE STREET

BELLEVUE, ID 83313 CHARITY

101,750

Total . . За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GSCNC - SHARE OTHER TO SUPPORT PROGRAM 2,000 4304 CONNECTICUT AVE NW PUBLIC INITIATIVES WASHINGTON, DC 20008 CHARITY

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

EDLAVITCH DCJCC 1529 16TH STREET NW WASHINGTON, DC 20077		TO SUPPORT PROGRAM INITIATIVES	40,000
TRS - SR RABBI DISCRETIONARY FUND 2100 WESTMORELAND STREET	OTHER PUBLIC	TO SUPPORT PROGRAM INITIATIVES	500

ı				
ı	TRS - SR RABBI DISCRETIONARY FUND 2100 WESTMORELAND STREET FALLS CHURCH, VA 22043	OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	50
1	·			

TRS - SR RABBI DISCRETIONARY FUND 2100 WESTMORELAND STREET FALLS CHURCH, VA 22043		OTHER PUBLIC CHARITY	TO SUPPORT PROGRAM INITIATIVES	5
---	--	----------------------------	-----------------------------------	---

101,750

3a

efile GRAPHIC print - DO NOT F	ROCESS	As Filed D	ata -	DI	N: 93491131020988
TY 2017 Accounting Fees Schedule					
	Name:	THE RHE	A S SCHWARTZ &	PAUL MARTIN WOLF	F
		FOUNDA [*]	TION		
	EIN:	52-1852	485		
Accounting Fees Schedule	i.				
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES		6,250	0	0	0

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93491131020988 TY 2017 Explanation of Non-Filing with Attorney General Statement Name: THE RHEA S SCHWARTZ & PAUL MARTIN WOLFF FOUNDATION **EIN:** 52-1852485 **Statement:** DC DOES NOT REQUIRE FILING FORM 990 PF

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131020988			
TY 2017 Investments - Other Schedule					
11 2017 Investments Other	Scricadic				
Name:	THE RHEA S SCHI	VARTZ & PAUL MARTIN WOLFF			
	FOUNDATION				
ETNI.	52_1052405				

EIN. 32-1032403					
Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
L.M. KOHN & COMPANY	AT COST	973,617	1,201,964		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	93491131020988	
TY 2017 Other Expenses Schedule					
Name:	THE RHEA S SC	HWARTZ & PAUL	MARTIN WOLFF		
	FOUNDATION				
EIN:	EIN: 52-1852485				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
BANK FEES	90	0	0	0	
INVESTMENT EXPENSES	11	0	0	0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491131020988	
TY 2017 Other Increases Schedule				
Name:	THE RHEA S S	SCHWARTZ & PAUL MARTIN W	OLFF	
	FOUNDATION			
EIN:	52-1852485			
Dr	escription		Amount	
OTHER INCREASES			26,769	

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLN	N: 93491131020988		
TY 2017 Taxes Schedule						
	ne: THE RHEA S FOUNDATIO IN: 52-1852485		UL MARTIN WOLFF	=		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREGIN TAXES PAID	141	0	0	0		

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -				DLN: 93491131020988	
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990					2017	
Name of the organization THE RHEA S SCHWARTZ & I		FF			Employer id	lentification number	
FOUNDATION Organization type (check	· ono)				52-1852485		
Organization type (check	. One)						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)() (enter number) c	organization				
	☐ 4947(a)(1	1) nonexempt char	ritable trust not treated a	s a private founda	tion		
	☐ 527 politi	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation				
	☐ 4947(a)(´	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3)	501(c)(3) taxable private foundation					
			PF that received, during complete Parts I and II S				
Special Rules							
under sections 509	9(a)(1) and 170(b) one contributor, d	(1)(A)(vi), that che uring the year, tota	g Form 990 or 990-EZ th ecked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that	
during the year, to	tal contributions of	f more than \$1,000	, or (10) filing Form 990 o Dexclusively for religious animals Complete Part	, charitable, scient			
during the year, co If this box is check purpose Don't cor	entributions exclus ed, enter here the aplete any of the p	ively for religious, total contributions parts unless the G o	or (10) filing Form 990 or charitable, etc., purpose s that were received during eneral Rule applies to the or more during the year	s, but no such con ng the year for an us organization be	tributions tota exclusively re cause it recei	aled more than \$1,000 digious, charitable, etc.,	
Caution. An organization 990-EZ, or 990-PF), but it Form 990-EZ or on its For 990-EZ, or 990-PF)	must answer "No	on Part IV, line 2	, of its Form 990, or che	ck the box on line	H of its		
For Paperwork Reduction Act for Form 990, 990-EZ, or 990-		ructions	Cat No 30613X	Schedu	ile B (Form 990	, 990-EZ, or 990-PF) (2017)	

Name of organi THE RHEA S SCH FOUNDATION	zation WARTZ & PAUL MARTIN WOLFF	Employer identification 52-1852485	Employer identification number 52-1852485			
Part I	Contributors (See instructions) Use duplicate copies of Part I if a	dditional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	RHEA S SCHWARTZ PAUL MARTIN WOLFF 5600 WISCONSIN AVENUE NO 20B CHEVY CHASE, MD 20815	\$ 14,710	Person Payroll Noncash (Complete Part II for noncash			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions) (d) Type of contribution			
			Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
·			Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-			Person			
		Cabadula D /E.	000 000 E7 000 DE\ (0047)			

Schedule B (Form	990, 990-EZ, or 990-PF) (2017)		Page 4
Name of organizat THE RHEA S SCHWA FOUNDATION	cion RTZ & PAUL MARTIN WOLFF		Employer identification number 52-1852485
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) throu of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No. from Part I		(6) 63c 61 gill	(a) Description of new gift is field
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
			schedule B (Form 990, 990-EZ, or 990-PF) (2017)