Form 990-PF

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Internal Revenue Service

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

Open to Public Inspection Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2017 or tax year beginning 2017, and ending 20 A Employer identification number Name of foundation THE GENAN FOUNDATION 54-1393561 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite 434-977-6803 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ CHARLOTTESVILLE, VA 22905 Initial return Initial return of a former public charity G Check all that apply: D 1. Foreign organizations, check here . Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, Name change Address change check here and attach computation If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . end of year (from Part II, col. (c), Other (specify) line 16) ► \$ (Part I, column (d) must be on cash basis.) 30,474,797 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes the amounts in column (a) (see Instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1,352,725 Check ► ☐ if the foundation is **not** required to attach Sch. B 2 3 Interest on savings and temporary cash investments 142 14. Dividends and interest from securities . . . 4 459,69° 459,691 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 738,115 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) . . . C 11 Other income (attach schedule) . . . Schedule 59,143 59,143 12 Total. Add lines 1 through 11 . . . 1,871,701 1,257,091 Compensation of officers, directors, trustees, etc. 13 Expenses 14 Other employee salaries and wages S 15 Pension plans, employee benefits 2018 0 16a Legal fees (attach schedule) 206 Accounting fees (attach schedule) 6,398 4,698 and Administrative Other professional fees (attach schedule) Schedule I 33,759 33,759 17 Taxes (attach schedule) (see instructions) . Schedule I 18 8,247 8,247 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings 22 Printing and publications . . . 23 Other expenses (attach schedule) . . Schedule Operating 25 Total operating and administrative expenses. 24 Add lines 13 through 23 48,635 46,704 Contributions, gifts, grants paid 25 1,277,178 1,277,178 26 Total expenses and disbursements. Add lines 24 and 25 46,704 1,277,178 1,325,813 Subtract line 26 from line 12: 27 Excess of revenue over expenses and disbursements 545,888 Net investment income (if negative, enter -0-) . 1,210,38 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see Instructions.

Cat. No. 11289X

Form **990-PF** (2017)



| l Da | rt II | Raiance Shoots Attached schedules and amounts in the description column | Beginning of year | ; | Ena c | of year |
|--------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| نابد | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | (a) Book Value | (b) Book Value | 8 | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | | | |
| | 2 | Savings and temporary cash investments | 401,461 | 44 | 7,820 | 447,820 |
| 1 | 3 | Accounts receivable ► | 2 3 | | | The same of the same of |
| - (| | Less: allowance for doubtful accounts ▶ | | | - | |
| | 4 | Pledges receivable ► | | د کا ما در هماند کا انتخاب د کا ما در هماند کا کامان | | 1 (A) (1) |
| | | Less: allowance for doubtful accounts ▶ | | | ~ . | , |
| - 1 | 5 | Grants receivable | | | | |
| i | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | | |
| Į | 7 | Other notes and loans receivable (attach schedule) ▶ | ``` | 1 | 5 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| - 1 | | Less: allowance for doubtful accounts ▶ | | | | |
| \$ | 8 | Inventories for sale or use | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | |
| A. | 10a | Investments—U.S. and state government obligations (attach schedule) | | | | |
| İ | b | Investments—corporate stock (attach schedule) | | | | |
| - { | C | Investments—corporate bonds (attach schedule) | | | | |
| | 11 | Investments—land, buildings, and equipment: basis ▶ | Maria San Control | 13 2516 | : ', | The state of the s |
| ļ | | Less: accumulated depreciation (attach schedule) ▶ | | 1 - 27 2 24 0 1 | | 10 02 31 2 100 410 1024 |
| - 1 | 12 | Investments—mortgage loans | | | | |
| - 1 | 13 | Investments—other (attach schedule) Schedule I | 24,007,808 | 25,24 | ,452 | 30,026,977 |
| | 14 | Land, buildings, and equipment: basis ► | المنابعة المتعادية المتعادية | | أ سائم | and the second second |
| - | | Less: accumulated depreciation (attach schedule) ▶ | | 43. 1. 300 (00 0000) | 22.00 | |
| | 15 | Other assets (describe ►) | | | | , |
| - 1 | 16 | Total assets (to be completed by all filers-see the | | | | |
| | | instructions. Also, see page 1, item I) | 24,409,269 | 25,693 | 3.272 | 30,474,797 |
| | 17 | Accounts payable and accrued expenses | | | - | |
| ~ | 18 | Grants payable | | | | The state of the state of the |
| Liabilities | 19 | Deferred revenue | | | | |
| ₩ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | Walter State House Mary |
| ia l | 21 | Mortgages and other notes payable (attach schedule) | | | - | |
| | 22 | Other liabilities (describe ► | | | | |
| 1 | 23 | Total liabilities (add lines 17 through 22) | o | | 0 | |
| ,, | | Foundations that follow SFAS 117, check here ▶ □ | | | | Territory and the |
| Balances | | and complete lines 24 through 26, and lines 30 and 31. | | | | |
| Ĕ | 24 | Unrestricted | | | | |
| 9 | 25 | Temporarily restricted | | | | |
| | 26 | Permanently restricted | | | | |
| | | Foundations that do not follow SFAS 117, check here ▶ □ | | | | |
| ヸ | | and complete lines 27 through 31. | | | | |
| Net Assets or Fun | 27 | Capital stock, trust principal, or current funds | 634,176 | 634 | .176 | |
| 3 | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | | |
| SS | 29 | Retained earnings, accumulated income, endowment, or other funds | 23,775,093 | 25,059 | .096 | ·新加克伦西斯特 |
| ĕ | 30 | Total net assets or fund balances (see instructions) | 24,409,269 | 25,693 | | المراجع |
| <u> </u> | 31 | Total liabilities and net assets/fund balances (see | 2 11 100/200 | 20,000 | , _ , _ | |
| 2 | | Instructions) | 24,409,269 | 25,693 | .272 | |
| Par | t III | Analysis of Changes in Net Assets or Fund Balances | 2 17 1007200 | 1.0,000 | 1572 | - |
| 1 | | al net assets or fund balances at beginning of year-Part II, colu | mn (a), line 30 (mus | t agree with | | |
| | | of-year figure reported on prior year's return) | | | 1 | 24,409,269 |
| 2 Enter amount from Part I, line 27a | | | | | 2 | 545,888 |
| | | r increases not included in line 2 (itemize) CAPITAL GAIN NET I | NCOME FROM PART | IV. I INF 2 | 3 | 738,115 |
| 4 | | lines 1, 2, and 3 | | | 4 | 25,693,272 |
| 5 | Dacr | reases not included in line 2 (itemize) | | + | 5 | 20,093,212 |
| 6 | Total | I net assets or fund balances at end of year (line 4 minus line 5)—F | art II, column (b). Iir | ie 30 | 6 | 25,693,272 |
| | | | , | | | Form 990-PF (2017) |

| Part | IV Capital Gains and | Losses for Tax on Investme | ent 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.) | | | | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) | |
| 1a | PUBLICLY TRADED SECURITIES P | | | | | | |
| b | CAPITAL GAIN DISTRIBUTI | | | | | | |
| <u>c</u> | NET GAINS FROM COMMO | DITY TRADING ACCOUNTS | | | | | |
| <u>d</u> | ······································ | | | | | | |
| <u>_</u> e_ | | (f) Depreciation allowed | (a) Cost or | other basis | (h) Ga | n or (loss) | |
| | (e) Gross sales price | (or allowable) | | nse of sale | | (f) minus (g)) | |
| а | 349,996 | | | 263,058 | | 86,938 | |
| b | | | | | | 638,275 | |
| c | | | | | | 12,902 | |
| <u>d</u> | | | | | | | |
| e | Complete only for assets sho | owing gain in column (h) and owned by | the foundation | on 12/31/60 | | | |
| | | (i) Adjusted basis | · · · · · · · · · · · · · · · · · · · | s of col. (i) | | l. (h) gain minus t less than -0-) or | |
| | (i) FMV as of 12/31/69 | as of 12/31/69 | | (j), if any | | rom col. (h)) | |
| a | | | | | | | |
| b | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| e_ | | (If poin o | loo optor in Do | willing 7 | | | |
| 2 | Capital gain net income or | | lso enter in Par enter -0- in Par | | 2 | 738,115 | |
| 3 | If gain, also enter in Part | n or (loss) as defined in sections 1 I, line 8, column (c). See instruct | ions. If (loss), | , enter -0- in \ | | | |
| Part | | | | | 3 | | |
| | | er Section 4940(e) for Reductions subject to the se | | | | | |
| Was t | | section 4942 tax on the distributa | | | ase period? | ☐ Yes 📝 No | |
| | | jualify under section 4940(e). Do r | | | | ······································ | |
| _1_ | | ount in each column for each year | ; see the instru | ictions before ma | king any entries. | | |
| Cale | (a) Base period years Indar year (or tax year beginning in) | (b) Adjusted qualifying distributions | Net value of | (c) nonchantable-use as | | (d) tribution ratio divided by col. (c)) | |
| | 2016 | 1,127, | | 22,868 | | 4.93% | |
| | 2015 | 1,093, | | 22,568 | | 4.85% | |
| | 2014 2013 | 889, | · · · · · · · · · · · · · · · · · | 21,829 | | | |
| | 2012 | 779, 765, | | | 113,802 4 08% 964,883 4 80% | | |
| 2 | Total of line 1, column (d) | | | | . 2 | 22.73% | |
| 3 | | for the 5-year base period—divic oundation has been in existence if | | | | 4.55% | |
| 4 | Enter the net value of none | charitable-use assets for 2017 fro | m Part X, line t | 5 | . 4 | 28,001,164 | |
| 5 | 5 Multiply line 4 by line 3 | | | | | 1,274,053 | |
| 6 | Enter 1% of net investmen | nt income (1% of Part I, line 27b) | • • • • | | . 6 | 12,104 | |
| 7 | Add lines 5 and 6 | | | | . 7 | 1,286,157 | |
| 8 | If line 8 is equal to or great | ns from Part XII, line 4 iter than line 7, check the box in f | Part VI, line 1b | , and complete the | . 8 nat part using a 1 | 1,277,178 % tax rate. See the | |
| | Part VI instructions. | | | | | | |

| Part | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se | e instr | uctio | ns) | | |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------|-----------------------------------------|--|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.) | , | 1 | 7 | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) | 100 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | المراجع المراجع المراجع المراجع | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 24,208 | | | |
| | here ▶ ☐ and enter 1% of Part I, line 27b | | | | | |
| С | 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-) | | | | | |
| 3 | Add lines 1 and 2 | | 24,208 | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | 24,208 | | | |
| 6 | Gredits/Payments: | _ ` ' | | 1.4 | | |
| а | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 5,251 | Sale in | | 4 | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | | 57, 3 | | |
| C | Tax paid with application for extension of time to file (Form 8868) . 6c 20.000 | | ام م العراس | | | |
| _d | Backup withholding erroneously withheld 6d | امضية | | The state of | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | <u> 25,251</u> | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 4.040 | | | |
| 10 11 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 Enter the amount of line 10 to be: Credited to 2018 estimated tax > 1,043 Refunded 11 | | 1,043 | | | |
| | Enter the amount of line 10 to be: Credited to 2018 estimated tax ► 1,043 Refunded ► 11 VII-A Statements Regarding Activities | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did | it T | Yes | No | | |
| | participate or intervene in any political campaign? | 1a | 1.00 | \ | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | | | | | |
| | instructions for the definition | 1b | | 1 | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia | | 19 | 100 | | |
| | published or distributed by the foundation in connection with the activities. | 4.1.20 | 2 e | و ما الما الما الما الما الما الما الما | | |
| C | Did the foundation file Form 1120-POL for this year? | 1c | ļ.,, | <u> </u> | | |
| d | Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year: | 0 3: | 1 | | | |
| | (1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$ 0 | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$0 | 2 | - 1 GE | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | 1 | √ | | |
| 3 | If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | of line | | | | |
| Ū | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | ('L 0. | ✓ | | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | L | ✓ | | |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | ļi | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | ļ | <u> </u> | | |
| _ | If "Yes," attach the statement required by General Instruction T. | | h.#. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | 3 | 1 | | |
| | By language in the governing instrument, or By state legislation that effectively amonds the governing instrument so that no mandaton, directions the | | []: [] | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions the conflict with the state law remain in the governing instrument? | | | - J.8% | | |
| 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 X's | / 6 | 1 | | | |
| 7 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | / | ' | | | |
| oa | VIRGINIA | | : | 7 | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | C 25 | - | , = , = ; | | |
| IJ | (or designate) of each state as required by General Instruction G? If "No," attach explanation | al : 8b | ~~ · | , , , , | | |
| Δ. | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating foundation within the meaning of the foundation claiming status as a private operating status | · · | '- | | | |
| 9 | 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes | | | | | |
| | complete Part XIV | 9 | | 1 | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the | | | | | |
| | names and addresses | 10 | | 1 | | |
| | | | لسيسيا | | | |

| Part | t VII-A Statements Regarding Activities (continued) | | | |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------|----------------------------------------------------------------------|
| | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | 1 |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | 1 |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | ✓ | |
| | Website address ► | . | | |
| 14 | *************************************** | 4) 977 2291 | | |
| | Located at ► 384 Worrell Drive, Charlottesville, VA ZIP+4 ► | 7291 | · | |
| 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 | | • | |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes ✓ | No |
| | See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of | 10 | ' » ç · | 12.7 |
| | the foreign country ▶ Cayman Islands, British Virgin Islands | કે ^મ ેર, . | م بر - ب | 1,1 |
| 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? Yes | - (m, m) | 3 | 100 |
| | disqualified person? | | , , , , , , , , , , , , , , , , , , , | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | - " | , , | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No | . 3 | | المحال ال |
| | (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)? | | | 1.3 |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | 1 | 45.7 | 1 |
| | foundation agreed to make a grant to or to employ the official for a period after | 1 1 | - : | |
| | termination of government service, if terminating within 90 days.) | 1. | - 15- | 3-14 |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | o | ا با د د | 100 |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | 15#1 | ्र' स्टू |
| _ | | 1,0 | 3 | $\left[\left[T_{i}^{2} \left[\frac{2}{3} \right] \right] \right]$ |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? | 1c | ئۇ <u>ئ</u> | £._\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| 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)): | 1347.19 13. | الموريد رمي | |
| а | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and | W. N. | | 150 |
| | 6e, Part XIII) for tax year(s) beginning before 2017? | | 1 - 1 | |
| | if "Yes," list the years ▶ 20 , 20 , 20 , 20 | 10 2 | * · · · | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | - 1 | ا اور اور | 1 |
| | (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.) | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 3 |
| _ | · | 2b | | <u> </u> |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20, 20 | 7 | , , , , , , , , , , , , , , , , , , , | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | 3. N | . , , |
| Ja | at any time during the year? | | 1 | 7, 4 |
| 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 | ., | , ** | 7 |
| | 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 | | 1 |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 4.0 | * ; | ', 2 |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? | 4b | ~~ - | 1 |

| Page | 6 |
|------|---|
| | |

| ;Part | VII-B Statements Regarding Activities | for W | hich Form | 4720 I | May Be R | equire | d (contil | nued) | | | |
|-------|-----------------------------------------------------------------------------------------------|----------|---------------------------------------|-----------|--------------|-----------|-----------------------|-----------|----------------|--------------------|---------|
| 5a | During the year, did the foundation pay or incur | any amo | ount to: | | | | | | ٠., | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt to | o influe | nce legislatio | n (sect | ion 4945(e) |)? . | Yes | ✓ No | Γ. | , | 4 1,1 |
| | (2) Influence the outcome of any specific public election (see section 4955); or to carry on, | | | | | | | | | | |
| | directly or indirectly, any voter registration drive? | | | | | | | | | ~ i | * 5. |
| | (3) Provide a grant to an individual for travel, stu- | dy, or c | ther similar p | ourpose | es? | | Yes | ✓ No | | - 5 20 5 | 1, 1 |
| | (4) Provide a grant to an organization other than | | | | | | | | | | |
| | section 4945(d)(4)(A)? See instructions | | | | | | ☐ Yes | ✓ No | 13 | 1,300 | - |
| | (5) Provide for any purpose other than religious, | charita | able, scientifi | c, litera | ry, or educ | ational | | | 2.* | 5 " | - t - 5 |
| | purposes, or for the prevention of cruelty to c | | | | | | | ✓ No | 1. | | 1 / |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | transa | ctions fail to | qualify | under the | exception | ons desci | ribed in | 1 | | |
| | Regulations section 53.4945 or in a current notice | regardir | ng disaster as | sistanc | e? See inst | ructions | | | 5b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | | | | | ., | 1 | | |
| C | If the answer is "Yes" to question 5a(4), does to | | | | | | | | 15.7 | ľ ~~ | |
| | because it maintained expenditure responsibility | for the | grant? | | | | Yes Yes | ☐ No | 35-5 | | |
| | If "Yes," attach the statement required by Regula | ations s | ection 53.49 | 45–5(d) | | | | | 1. | | |
| 6a | Did the foundation, during the year, receive any | funds, (| directly or inc | directly, | , to pay pre | emiums | | | - 1 | 14. | ું યુ |
| | on a personal benefit contract? | | | | | | Yes | ✓ No | -1-64 | £ | أنتسب |
| b | Did the foundation, during the year, pay premium | ns, dire | ctly or Indired | ctly, on | a personal | benefit | contract | ? . | 6b | | |
| | If "Yes" to 6b, file Form 8870. | | | | | | _ | | 3,17 | | |
| | At any time during the tax year, was the foundation a | | | | | | Yes | | 25.12 | | 7 |
| b | If "Yes," did the foundation receive any proceeds | or hav | e any net inc | come at | tributable | o the tr | ansaction | n? . | 7b | | |
| Part | VIII Information About Officers, Direct | tors, T | rustees, Fo | oundat | tion Mana | agers, | Highly F | Paid E | mploy | ees, | |
| | and Contractors | ••• | | -1 11 1 | | -4: 0 | ! | | | | |
| 1 | List all officers, directors, trustees, and found | | | | npensation | | ontribution | | | | |
| | (a) Name and address | hour | e, and average rs per week | ∣ `(∦fn | ot paid, | emplo | yee benefit | plans | (e) Expe | nse aco allowan | |
| | | devote | ed to position | en | ter -0-) | and dete | rred compe | ensation | | | |
| | | | nt, Director | | | | | | | | ^ |
| | x 5386, Charlottesville, VA 22905 | 1 hour/i | month | | -0- | | | -0- | | | -0- |
| | v J Dracopoli | | easurer | | • | | | ا | | | 0 |
| | x 5386, Charlottesville, VA 22905 | 3 hours | умеек | | -0- | | | -0- | | | -0- |
| | | Secreta | | | 0 | | | -0- | | | -0- |
| РОВс | x 5386, Charlottesville, VA 22905 | 1 hour/i | month | | -0- | | ····· | -()- | | | |
| | | | | | | | | • | | | |
| 2 | Compensation of five highest-paid employee | s (oth | er than thos | e inch | ided on li | ne 1—9 | see instr | uctions | s). If n | one. | enter |
| 2 | "NONE." | 3 (04) | | | | | | | ., | , | |
| | | | | | | | (d) Contrib | utions to | | | |
| | (a) Name and address of each employee paid more than \$50,00 | 0 | (b) Title, and a hours per v | veek | (c) Comper | nsation | employee plans and | benefit | (e) Expe | nse acc allowan | |
| | , , , , | | devoted to po | osition | | | compen | | Otrici | 2110174 | 000 |
| NONE | | | | | | | | | | | |
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| | | | | | | | | | | | |
| Total | number of other employees paid over \$50,000 . | • • | | | | | , , , | , 🕨 | | | |
| | <u> </u> | | · · · · · · · · · · · · · · · · · · · | | | | | | Form 99 | 0-PF | (2017) |

| Page | 1 |
|------|---|

Form 990-PF (2017)

| Par | VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En | nployees, |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| 3 | and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON" | E." |
| <u> </u> | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | , | |
| Total | number of others receiving over \$50,000 for professional services | |
| Par | IX-A Summary of Direct Charitable Activities | |
| | | 1 |
| | the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 | | |
| | | : : |
| _ | | |
| 2 | | |
| | | |
| 3 | | |
| • | | |
| | | |
| 4 | | |
| | | |
| | | <u> </u> |
| | IX-B Summary of Program-Related Investments (see instructions) | Amount |
| 1 1 | scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| ' | | |
| | | |
| 2 | | |
| | | |
| | | |
| Ali | other program-related investments. See instructions | |
| 3 | | |
| | | |
| T = 4 = 1 | Add lines 1 through 3 | |
| iotai | . Add lines 1 through 3 | Form 990-PF (2017) |

| Part | X Minimum Investment Return (All domestic foundations must complete this part. Fore | ign founda | tions, |
|------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------|
| | see instructions.) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes: | 1 1 | |
| а | | 1a | 28,157,201 |
| b | Average of monthly cash balances | 1b | 270,377 |
| C | Fair market value of all other assets (see instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 28,427,578 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | J: : \[\] | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 28,427,578 |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 426,414 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 28,001,164 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,400,058 |
| Part | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.) | oundations | } |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,400,058 |
| 2a | Tax on investment income for 2017 from Part VI, line 5 2a 24.208 | 1 - | |
| b | Income tax for 2017. (This does not include the tax from Part VI.) 2b | | |
| С | Add lines 2a and 2b | 2c | 24,208 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,375,850 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 1,375,850 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | f | |
| | line 1 | 7 | 1,375,850 |
| Part | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | [2] E | |
| а | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 1,277,178 |
| 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 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | - 500 | |
| а | Suitability test (prior IRS approval required) | 3a | ·· |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 1,277,178 |
| 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 | ····· |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 1,277,178 |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years. | g whether th | ne foundation |

| Part 2 | Undistributed Income (see instruction | ons) | | | |
|----------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------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| 1 | Distributable amount for 2017 from Part XI, | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
| • | line 7 | | , , , , | | 1,375,850 |
| 2 | Undistributed income, If any, as of the end of 2017: | | | | |
| а | Enter amount for 2016 only | | | 382,842 | |
| b | Total for prior years: 20,20,20 | | | 1 | |
| 3 | Excess distributions carryover, if any, to 2017: | | | | - A-1 |
| a | From 2012 | | | * * * | |
| b | From 2013 | , , , | | 6. | |
| C | From 2014 | <i>-</i> | | | |
| e e | From 2016 | | | | |
| - F | Total of lines 3a through e | مهیده (د. سخمه د. پدید | , , , | | |
| 4 | Qualifying distributions for 2017 from Part XII, | | 1 | | 0.4 |
| • | line 4: ▶ \$ 1,277,178 | | | | |
| а | Applied to 2016, but not more than line 2a. | | | 382,842 | · " (y) 41 |
| b | Applied to undistributed income of prior years | 5 6 7 7 7 7 | | , , , , | - 10 - 1 - 1 |
| | (Election required—see instructions) | 3 1 1 4 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | |
| C | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | | · · · · · · · · · · · · · · · · · · · | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 204 220 |
| q | Applied to 2017 distributable amount | 20 M. C. | , | | 894,336 |
| e | Remaining amount distributed out of corpus Excess distributions carryover applied to 2017 | | a s fag. | | 1 |
| 5 | (If an amount appears in column (d), the same | | | 1 1 1 1 1 1 1 1 1 1 | - S. 200 Sec. 14 |
| | amount must be shown in column (a).) | | The state of the s | and the same of th | |
| 6 | Enter the net total of each column as | | The state of the s | 3.0 | |
| • | indicated below: | A Commence of the Commence of | | 1414 | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | | | | 1, 2, 3 |
| b | Prior years' undistributed income. Subtract | | | 1. 4. 4. 1. 4. 1. | |
| | line 4b from line 2b | - 15 | | · · · · · · · · · · · · · · · · · · · | |
| c | Enter the amount of prior years' undistributed | | | | Property of the state of |
| | income for which a notice of deficiency has | | | | 1 x x x x x x x x x x x x x x x x x x x |
| | been issued, or on which the section 4942(a) tax has been previously assessed | | | 100 | 5- IN 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| d | Subtract line 6c from line 6b. Taxable | | | 385 | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
| u | amount—see instructions | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| е | Undistributed income for 2016. Subtract line | 121 | S. 1 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | , , , , |
| - | 4a from line 2a. Taxable amount-see | | 1. S. | | |
| | instructions | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 0 | 1 1 |
| f | Undistributed income for 2017. Subtract lines | |]- · · · · · · · · · · · · · · · · · · · | | |
| | 4d and 5 from line 1. This amount must be | | | 1 | 401 514 |
| | distributed in 2018 | 3' | | | 481,514 |
| 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) | } | 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 1 |
| 8 | Excess distributions carryover from 2012 not | | 1 | , , , | 2 3 3 3 |
| • | applied on line 5 or line 7 (see instructions). | | | 7 | |
| 9 | Excess distributions carryover to 2018. | | 4 | | 1 |
| | Subtract lines 7 and 8 from line 6a | | | 1 . 1 | |
| 10 | Analysis of line 9: | *, | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| а | Excess from 2013 | | | 1,35 % | |
| b | Excess from 2014 | 125 | 1: 1 | 1 | 100000 |
| C | Excess from 2015 | | , , , , , , , , , , , , , , , , , , , , | Time Y and | |
| đ | Excess from 2016 | 1273 45 | | 1 3 h M. | 12 1 1 1 1 1 1 |
| <u>e</u> | Excess from 2017 | <u></u> | <u> </u> | 1 | Form 990-PF (2017) |

| Form 9 | 90-PF (2017) | | | | | Page 10 |
|-------------|---------------------------------------------------------------------|----------------------|----------------------|--------------------------------------------------|---------------------|-----------------------|
| Part | XIV Private Operating Founda | tions (see instru | ictions and Part | VII-A, question 9 | 9) | |
| 1a | If the foundation has received a ruling | or determination | letter that it is a | private operating | | |
| | foundation, and the ruling is effective for | r 2017, enter the d | ate of the ruling . | | / | |
| b | Check box to indicate whether the four | ndation is a private | e operating founda | ation described in s | ection 4942(j |)(3) or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | income from Part I or the minimum investment return from Part X for | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | - (e) lotal |
| | each year listed | | | | | |
| b | 85% of line 2a | | | | / | |
| С | Qualifying distributions from Part XII, | | | | - | |
| | line 4 for each year listed | | | | | |
| ď | Amounts included in line 2c not used directly | | | / | | |
| | for active conduct of exempt activities | | | | | |
| 6 | Qualifying distributions made directly | | | | | |
| C | for active conduct of exempt activities. | | | | | |
| | Subtract line 2d from line 2c | | | | | 1 |
| 3 | Complete 3a, b, or c for the | | | / | | |
| 3 | alternative test relied upon. | | ľ | | 1 | |
| _ | , | | | / | | |
| а | "Assets" alternative test—enter: | | / | | | |
| | (1) Value of all assets | | / | · | | |
| | (2) Value of assets qualifying under | | / | | | |
| h | section 4942(j)(3)(B)(i) | | / | <u> </u> | | |
| b | of minimum investment return shown in | | / | | | į |
| | 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 | | 1/ | | ĺ | |
| | 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) | / | | 1 | | |
| | (3) Largest amount of support from | / | | | | |
| | an exempt organization | | | | | |
| | (4) Gross investment income | i, | | | | |
| Part | | n (Complete th | is part only if t | he foundation h | ad \$5,000 or m | ore in assets at |
| | any time during the year- | • | - | | • | |
| 1 | Information Regarding Foundation I | | | | | |
| а | List any managers of the foundation v | | uted more than 29 | % of the total cont | ributions received | by the foundation |
| | before the close of any tax year (but o | | | | | • |
| ANNE | R WORRELL | , | | , , | | |
| b | List any managers of the foundation | who own 10% o | r more of the sto | ck of a corporation | n (or an equally la | arge portion of the |
| _ | ownership of a partnership or other er | | | | | g- p |
| NONE | | 77 | | J | | |
| 2 | Information Regarding Contribution | Grant Gift Los | n Scholarshin | atc Programs: | | |
| 2 | Check here ► ✓ if the foundation | | | | organizations and | door not accent |
| | unsolicited requests for funds. If the fo | | | | | |
| | complete items 2a, b, c, and d. See in | | girts, grants, etc., | , to maividuals of o | rganizations unde | si otilei conditions, |
| | | | drage of the pares | n to whom applied | tions should be s | ddraaad |
| а | The name, address, and telephone nu | mber or email add | aress or the perso | on to whom applica | mons should be a | laaressea. |
| | | | | | | |
| | | | | | | |
| b | The form in which applications should | be submitted and | d information and | materials they sho | uld include: | |
| | | | | | | |
| | | | | | | |
| С | Any submission deadlines: | | | | | |
| | Any restrictions or limitations on aw | rards such as h | v geographical a | reas, charitable fi | elds, kinds of in- | stitutions or other |
| u | factors: | | , googiapinoai a | | | |

| 3 Grants and Contributions Paid During t | nued) ho Yoar or Annrow | ad for End | turo Dovmont | |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------|----------------------------------|--------------|
| Recipient | If recipient is an individual. | Foundation | | |
| | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) a Paid during the year | or substantial contributor | recipient | | |
| a raid during the year | | | | |
| SEE SCHEDULE II | | | | |
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| Pa | rt X | VI-A Analysis of Income-Producing A | ctivities | | | - | |
|--------------------------|------------------------------|-------------------------------------------------------|----------------------|---------------------------------------|--------------------------------------------------|----------------------|-----------------------------------------------------------|
| Ente | er gro | oss amounts unless otherwise indicated. | Unrelated bu | ısıness İncome | Excluded by sect | on 512, 513, or 514 | (a) |
| | _ | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions.) |
| 1 | Pro | gram service revenue: | | | ļ | | |
| | b | | ļ | | ļ | | |
| | C | | ļ | | | | |
| | d | | ļ | <u> </u> | | | |
| | e | | ļ | | | | |
| | f | | | | - | | |
| | g | Fees and contracts from government agencies | | · · · · · · · · · · · · · · · · · · · | | | |
| 2 | | mbership dues and assessments | } | · | | | |
| 3 | | rest on savings and temporary cash investments | | | 14 | 142 | |
| 4 | | dends and interest from securities | | | 14 | 459,691 | |
| 5 | | rental income or (loss) from real estate: | - 1- 18 | | 75 2 2 2 p 2 | 7, -,7, | + · · · |
| | | Debt-financed property | | | | | |
| | | Not debt-financed property | · | | | | |
| 6 | | rental income or (loss) from personal property | | | | | |
| 7 | | er investment income | | | | | |
| 8 | | n or (loss) from sales of assets other than inventory | | | | | |
| 9 | | income or (loss) from special events | | | | | |
| 10 | | ss profit or (loss) from sales of inventory | | | | | |
| 11 | Oth | er revenue: a Ordinary Larnings per Sch l | | | 14 | 59,143 | · |
| | b | | | | | | |
| | Ç | | | | | | |
| | d | | | | | | |
| | е | | | | | | |
| | Sut | ototal. Add columns (b), (d), and (e) | 5 1. 11 | | .* * 1 | 518,976 | |
| | | | | | | | |
| 13 | Tot | al. Add line 12, columns (b), (d), and (e) | | | | 13 | 518,976 |
| 13 (See | Tot wor | al. Add line 12, columns (b), (d), and (e) | s.) | | | | 518,976 |
| 13 (See Par | Tot wor t X\ | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot wor t X\ | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
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| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
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| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |
| 13 (See Par Lin | Tot work t X\ e No. | al. Add line 12, columns (b), (d), and (e) | | ent of Exemp | | 13 | |

| Par | XVII | Informatio Organizati | n Regarding Tra | ansfers to | and Tran | saction | ns and F | Relationshi | ps With No | ncharital | le Ex | empt |
|--------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------------------------------|----------------------------------------------|------------------------------------|------------------------------------|----------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------|---------------------------------|------------------|
| 1 | in s | the organization (| directly or indirectly other than section | y engage ir n 501(c)(3) | n any of the organizati | followin ons) or | g with an in sect | y other organion 527, rel | nization descr ating to pol | ribed litical | Yes | No |
| а | Tran (1) (| sfers from the rep | porting foundation | | | empt org | | of: | | . 1a(| | / |
| b | Othe (1) S (2) F (3) F (4) F (5) L (6) F | er transactions: Sales of assets to Purchases of asse Rental of facilities Reimbursement a Loans or loan gua Performance of se | ervices or members | itable exenter assetsship or fundamental | npt organiza | citations | | | | 1b(1b(1b(1b(1b(1b(| 1) 2) 3) 4) | <u> </u> |
| c d | If the value value | e answer to any e of the goods, o e in any transaction | equipment, mailing of the above is "Y other assets, or sen on or sharing arran | es," comp vices giver igement, sl | lete the follo by the rep how in colur | owing so orting fo nn (d) th | chedule. undation ie value c | Column (b) so the found of the goods, | should always lation receive other assets, | d less that or service | e fair n n fair n es rece | narket ived. |
| (a) Lin | e no. | (b) Amount involved | (c) Name of non | charitable exe | empt organizati | on | (d) Desc | ription of transfe | rs, transactions, a | and sharing a | rranger | ents |
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| | | | | | | | | | ······································ | | | |
| 2a b | desc | ribed in section 5 | ectly or indirectly a 501(c) (other than se following schedule | ection 501 | th, or relate (c)(3)) or in s | ed to, or section 5 | ne or mo | re tax-exemp | ot organizatio | ons · 🗌 Ye | s 🗹 | No |
| | 11 10 | (a) Name of organi | | | (b) Type of org | anization | | · · · · · · · · · · · · · · · · · · · · | (c) Description of | relationship | | |
| ··· | | | | | , , , , , | | | | <u> </u> | | | |
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| Sign Here | corre | | declare that I have examination of preparer (other to | | | | | | vledge Ma wit | knowledge and by the IRS disc the prepared constructions | cuss this | return relow? |
| Paid | _ | Print/Type preparer | | Preparer | s signature | 1 | / | Date | Chark | PTIN | | |
| Paid Prep | arer | Bradley E. C | Crowder | Sh | affly E. | Choule | h_ | 08/20/20 | Check 5 | oyed P00 | 39034 | 16 |
| | Only | Firm's name | Pricewaterho | ouseCoo | pers, LLP | | | | | 13-4008 | | |
| _ | | I r 11 | 021 F Cary St | SIA 1250 | 1 Kichmo | m/l V/∆ | 23210 | ŀ | Dhama 00 | 14 607 1 | ባለሰ | |

Schedule B

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

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2017

Employer identification number

| | NAN FOUNDATION | | · | 54-1393561 | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--|--|--|--|
| Organi | Organization type (check one): | | | | | | | |
| Filers of: | | Section: | | | | | | |
| Form 990 or 990-EZ | | ☐ 501(c)(|) (enter number) organization | | | | | |
| | | ☐ 4947(a)(1) non | exempt charitable trust not treated as a private for | undation | | | | |
| | | ☐ 527 political o | rganization | | | | | |
| Form 99 | 90-PF | √ 501(c)(3) exem | npt private foundation | | | | | |
| | | 4947(a)(1) non | exempt charitable trust treated as a private founda | ation | | | | |
| | | 501(c)(3) taxat | ole private foundation | | | | | |
| | | | | | | | | |
| | only a section 501(c)(7 | - | neral Rule or a Special Rule. zation can check boxes for both the General Rule a | and a Special Rule. See | | | | |
| Genera | l Rule | | | | | | | |
| Ø | 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 | | | | | | | |
| | regulations under se 13, 16a, or 16b, and | ctions 509(a)(1) and that received from | n 501(c)(3) filing Form 990 or 990-EZ that met the 3 d 170(b)(1)(A)(vi), that checked Schedule A (Form 99 any one contributor, during the year, total contribu orm 990, Part VIII, line 1h; or (ii) Form 990-EZ, line | 90 or 990-EZ), Part II, line itions of the greater of (1) | | | | |
| | 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) filling 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 receive 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., contribution totaling \$5,000 or more during the year | | | | es, but no such utions that were received If the parts unless the aritable, etc., contributions | | | | |
| Caution | : An organization that | isn't covered by th | e General Rule and/or the Special Rules doesn't fil | le 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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)
Name of organization Employer identification number THE GENAN FOUNDATION 54-1393561

| 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 | T Eugene Worrell 1999 Charitable Lead Unitrust fbo A S Worrell and T C Worrell, III P O Box 5386, Charlottesville, VA 22905 | \$ 462,725 | Person | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | |
| 2 | T Eugene Worrell 1999 Charitable Lead Annuity Trust fbo Z A Worrell and S C A Worrell P O Box 5386, Charlottesville, VA 22905 | \$ 140,000 | Person Payroll Noncash (Complete Part II for noncash contributions.) | | | | |
| (a) No. | (b) Name, address, and ZI P + 4 | (c) Total contributions | (d) Type of contribution | | | | |
| 3 | Anne R Worreli P O Box 5386, Charlottesville, VA 22905 | \$750,000 | 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 | | | | |

Employer identification number

| Part II | Noncash Property (see instructions). Use duplicate copies | of Part II if additional sp | f Part II if additional space is needed. | | | |
|---------------------------|-----------------------------------------------------------|-------------------------------------------------|------------------------------------------|--|--|--|
| (a) No. from Part I | (b) Description of noncash property given | (C) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization **Employer identification number** Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

THE GENAN FOUNDATION EIN 54-1393561 2017 FORM 990PF

SCHEDULE I

| Section 1256 Income/(Loss) Ordinary Income from Commodity Tr Ordinary Income from Private Funds | _ | ts | | | 56,222 2,921 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------------------------|
| Total Other Income | | | | \$ | 59,143 |
| Part 1, Line 16c, Other Professional | Fees | | | | |
| Investment Management Fees Investment Committee Fees | | | | | 13,759 20,000 |
| Total Other Professional Fees | | | | \$ | 33,759 |
| Part I, Line 18, Taxes | | | | | |
| Foreign Taxes | | | | \$ | 8,247 |
| Part 1, Line 23, Other Expenses | | | | | |
| Bank Charges | | | | \$ | 25 |
| Part II, Line 13, Investments - Other | # of Shares End of Year | Book Value Beginning of Year | Book Value End of Year | | ket Value End f Year |
| Vanguard Portfolio Davenport Portfolio JP Morgan Bond Portfolio Crabel Fund SPC Ltd QIM Global 1X Fund Benefit Street Partners Fund IV Ares PCS Private Investors IPM Systematic Macro Fund | various various various 442.27488 500 | 21,263,587 679,284 1,034,458 506,526 523,953 - - | 21,346,942 780,046 1,059,238 535,842 563,761 285,404 174,219 500,000 | 1 1 | ,689,831 ,284,540 ,068,517 480,455 563,761 271,354 168,519 500,000 |
| | | \$ 24,007,808 | \$ 25,245,452 | \$ 30 | ,026,977 |

GENAN FOUNDATION EIN 54-1393561 2017 FORM 990PF

SCHEDULE II

PART XV, 3a, Grants and Contributions Paid During the Year

| Recipient Name and Address | Status of Recipient | Purpose of Grant | Amount |
|-------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------|---------|
| Miller Center Foundation P O Box 400406 Charlottesville, VA 22904 | PC | Grant to support programs for the study of the presidency | 250,000 |
| Martha Jefferson Hospital Foundation 500 Martha Jefferson Drive Charlottesville, VA 22911 | PC | Grant to provide scholarships and other training for nurses | 150,000 |
| Piedmont Family YMCA 233 4th Street NW, Suite Y Charlottesville, VA 22903 | PC | Grant towards construction of new facility | 125,000 |
| Virginia Historical Society P O Box 7311 Richmond, VA 23221 | PC | Grant for World War I centennial exhibition | 100,000 |
| Miller Center Foundation P O Box 400406 Charlottesville, VA 22904 | PC | Endowment grant for Gerald L Baliles Institute for Presidential Studies | 100,000 |
| Jefferson Area Board for Aging 675 Hillsdale Drive, Suite 9 Charlottesville, VA 22901 | PC | Support indigent nursing home residents and rural community centers | 75,000 |
| Albemarle Housing Improvement Project 2127 Berkmar Drive Charlottesville, VA 22901 | PC | Grant towards rehabilitation of older affordable housing in Alberene, VA | 65,000 |
| Focused Ultrasound Foundation 1230 Cedars Court, Suite 206 Charlottesville, VA 22903 | PC | Grant for medical research on use of focused ultrasound in treating tumors | 50,000 |
| Jefferson Area Board for Aging 675 Hillsdale Drive, Suite 9 Charlottesville, VA 22901 | PC | Grant for capital improvements at Mountainside Senior Living in Crozet, VA | 50,000 |
| Jefferson Area Board for Aging 675 Hillsdale Drive, Suite 9 Charlottesville, VA 22901 | PC | Grant to support Care Transitions Program for patients leaving hospital | 50,000 |
| American Red Cross 1105 Rose Hill Drive Charlottesville, VA 22903 | PC | Smoke detector installation program in at risk communities | 41,500 |

GENAN FOUNDATION EIN 54-1393561 2017 FORM 990PF

SCHEDULE II (continued)

| The Bridge Progressive Arts Initiative P O Box 239 Charlottesville, VA 22902 | PC | General operating fund support and art for children | 37,500 |
|-------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------|--------|
| Building Goodness Foundation 128 Carlton Road Charlottesville, VA 22902 | PC | Grant for improvements to preschool, church and homeless shelter | 36,412 |
| Blue Ridge Area Food Bank P O Box 937 Verona, VA 24482 | PC | Operating funds to provide food for the needy and to support partner agencies | 35,000 |
| American Red Cross 1105 Rose Hill Drive Charlottesville, VA 22903 | PC | Disaster relief funds for SW Virginia | 35,000 |
| Epilepsy Foundation of Virginia P O Box 800754 Charlottesville, VA 22908 | PC | Grant for physician and patient education on sudden unexpected death in epilepsy sufferors | 21,340 |
| Virginia Navigator 7501 Boulders View Drive, Suite 201 North Chesterfield, VA 23225 | PC | Grant to improve accessability and usability of website for seniors, veterans and caregivers | 17,500 |
| Charlottesville City Schools 1562 Dairy Road Charlottesville, VA 22903 | Public School | Summer camps and tutoring support for low income children | 12,926 |
| Salvation Army P O Box 296 Charlottesville, VA 22902 | PC | General operating fund support | 10,000 |
| Charlottesville Tomorrow P O Box 1591 Charlottesville, VA 22902 | PC | Support for organization providing non- partisan news affecting the Charlottesville community | 5,000 |
| Shelter for Help in Emergency P O Box 1013 Charlottesville, VA 22902 | PC | Sponsor event for the support of abused women | 5,000 |
| Camp Virginia Jaycee, Inc. P O Box 648 Blue Ridge, VA 24064 | PC | Grant for summer camp for special needs adults and children | 5,000 |
| | | | |

1,277,178