

Form **990-PF****Return of Private Foundation**
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning

, 2017, and ending

, 20

Name of foundation SZILAGYI FAMILY FOUNDATION, INC.		A Employer identification number 81-0840430
Number and street (or P O box number if mail is not delivered to street address) 100 JACKSON STREET	Room/suite	B Telephone number (see instructions) (304) 329-1514
City or town, state or province, country, and ZIP or foreign postal code KINGWOOD WV 26537		C If exemption application is pending, check here ☐
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 565,896.		J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	40,000.			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	13.	13.	13.	
	4 Dividends and interest from securities	8,236.	8,236.	8,236.	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	10,176.			
	b Gross sales price for all assets on line 6a 37,990.		L-6a Stmt		
	7 Capital gain net income (from Part IV, line 2)		10,176.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	58,425.	18,425.	8,249.	
	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) L-16b Stmt	2,150.			2,150.
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) See instructions See Stmt	25.	20.	5.	0.
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) See Stmt	109.			109.
	24 Total operating and administrative expenses. Add lines 13 through 23	2,284.	20.	5.	2,259.
	25 Contributions, gifts, grants paid	23,350.			23,350.
	26 Total expenses and disbursements. Add lines 24 and 25	25,634.	20.	5.	25,609.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	32,791.			
	b Net investment income (if negative, enter -0-)		18,405.		
	c Adjusted net income (if negative, enter -0-)			8,244.	

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

BAA

REV 01/03/18 PRO

RECEIVED JUL 19 2018

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash—non-interest-bearing					
	2 Savings and temporary cash investments			2,095.	46,511.	46,511.
	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) L-6 Stmt			0.	1,000.	1,000.
	7 Other notes and loans receivable (attach schedule) ▶					
	Less: allowance for doubtful accounts ▶					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments—U.S. and state government obligations (attach schedule)					
	b Investments—corporate stock (attach schedule)					
	c Investments—corporate bonds (attach schedule)					
	11 Investments—land, buildings, and equipment: basis ▶					
Liabilities	Less: accumulated depreciation (attach schedule) ▶					
	12 Investments—mortgage loans					
	13 Investments—other (attach schedule) L-13 Stmt			502,672.	490,047.	518,385.
	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)			504,767.	537,558.	565,896.
	17 Accounts payable and accrued expenses					
	18 Grants payable					
	19 Deferred revenue					
Net Assets or Fund Balances	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶)					
	23 Total liabilities (add lines 17 through 22)					
	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.					
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds					
	28 Paid-in or capital surplus, or land, bldg., and equipment fund					
Net Assets or Fund Balances	29 Retained earnings, accumulated income, endowment, or other funds			504,767.	537,558.	
	30 Total net assets or fund balances (see instructions)			504,767.	537,558.	
	31 Total liabilities and net assets/fund balances (see instructions)			504,767.	537,558.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	504,767.
2 Enter amount from Part I, line 27a	2	32,791.
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	537,558.
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	537,558.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr)
1a 119.320 AMCAP FUND CL A	P	02/11/2016	12/15/2017
b 79.123 AMERICAN MUTUAL FUND CL A	P	02/11/2016	12/15/2017
c 1504.436 BOND FUND OF AMERICA CL A	P	04/22/2016	12/15/2017
d 38.817 GROWTH FUND OF AMERICA CL A	P	02/11/2016	12/15/2017
e See Statement			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 3,886.	0.	2,777.	1,109.
b 3,370.	0.	2,526.	844.
c 19,438.	0.	19,430.	8.
d 2,046.	0.	1,394.	652.
e 9,250.	0.	1,687.	7,563.

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

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col. (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			1,109.
b			844.
c			8.
d			652.
e			7,563.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	10,176.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
 If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	8,219.	506,338.	0.016232
2015	1,774.	430,937.	0.004117
2014			
2013			
2012			

2 Total of line 1, column (d)	2	0.020349
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.010175
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	530,168.
5 Multiply line 4 by line 3	5	5,394.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	184.
7 Add lines 5 and 6	7	5,578.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	25,609.

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		N/A
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	184.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0.
3	Add lines 1 and 2	3	184.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	184.
6	Credits/Payments:		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	184.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		x
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		x
c Did the foundation file Form 1120-POL for this year?		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		x
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		x
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		x
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	x	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	x	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ WV		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	x	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		x
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	x	

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	X	
14 The books are in care of ► MALONEY & ASSOCIATES, PLLC Telephone no. ► (304) 329-2752 Located at ► 316 E. MAIN STREET KINGWOOD WV ZIP+4 ► 26537		
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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

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

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

	Yes	No
1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No		
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)		
c 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____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.)		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		X

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

5a	During the year, did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☒ No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance, check here	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
IMRE SZILAGYI 100 JACKSON STREET KINGWOOD WV 26537	DIRECTOR 1.00	0.	0.	0.
JANET L. SZILAGYI 100 JACKSON STREET KINGWOOD WV 26537	DIRECTOR 1.00	0.	0.	0.
ELIZABETH M. SZILAGYI 100 JACKSON STREET KINGWOOD WV 26537	DIRECTOR 0.00	0.	0.	0.
KRISTINA L. SZILAGYI 100 JACKSON STREET KINGWOOD WV 26537	DIRECTOR 0.00	0.	0.	0.

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

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

Total number of other employees paid over \$50,000 0

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	532,941.
b	Average of monthly cash balances	1b	5,301.
c	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	538,242.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	538,242.
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	8,074.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	530,168.
6	Minimum investment return. Enter 5% of line 5	6	26,508.

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

1	Minimum investment return from Part X, line 6	1	26,508.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	184.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	184.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	26,324.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	26,324.
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, line 1	7	26,324.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	25,609.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	25,609.
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	184.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,425.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				26,324.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only			25,312.	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017:				
a From 2012				0.
b From 2013				0.
c From 2014				0.
d From 2015				1,774.
e From 2016				7,279.
f Total of lines 3a through e	9,053.			
4 Qualifying distributions for 2017 from Part XII, line 4: ► \$ 25,609.				
a Applied to 2016, but not more than line 2a			25,312.	
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2017 distributable amount				
e Remaining amount distributed out of corpus	297.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	9,350.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				26,324.
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)	0.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	9,350.			
10 Analysis of line 9:				
a Excess from 2013				0.
b Excess from 2014				0.
c Excess from 2015				1,774.
d Excess from 2016				7,279.
e Excess from 2017				297.

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

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling **09/26/2016**

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

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

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

1 Information Regarding Foundation Managers:

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

N/A

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

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

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

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

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

c Any submission deadlines:

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

	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1997	1996	1995	1994	1993	1992	1991	1990	1989	1988	1987	1986	1985	1984	1983	1982	1981	1980	1979	1978	1977	1976	1975	1974	1973	1972	1971	1970	1969	1968	1967	1966	1965	1964	1963	1962	1961	1960	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938	1937	1936	1935	1934	1933	1932	1931	1930	1929	1928	1927	1926	1925	1924	1923	1922	1921	1920	1919	1918	1917	1916	1915	1914	1913	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902	1901	1900	1899	1898	1897	1896	1895	1894	1893	1892	1891	1890	1889	1888	1887	1886	1885	1884	1883	1882	1881	1880	1879	1878	1877	1876	1875	1874	1873	1872	1871	1870	1869	1868	1867	1866	1865	1864	1863	1862	1861	1860	1859	1858	1857	1856	1855	1854	1853	1852	1851	1850	1849	1848	1847	1846	1845	1844	1843	1842	1841	1840	1839	1838	1837	1836	1835	1834	1833	1832	1831	1830	1829	1828	1827	1826	1825	1824	1823	1822	1821	1820	1819	1818	1817	1816	1815	1814	1813	1812	1811	1810	1809	1808	1807	1806	1805	1804	1803	1802	1801	1800	1799	1798	1797	1796	1795	1794	1793	1792	1791	1790	1789	1788	1787	1786	1785	1784	1783	1782	1781	1780	1779	1778	1777	1776	1775	1774	1773	1772	1771	1770	1769	1768	1767	1766	1765	1764	1763	1762	1761	1760	1759	1758	1757	1756	1755	1754	1753	1752	1751	1750	1749	1748	1747	1746	1745	1744	1743	1742	1741	1740	1739	1738	1737	1736	1735	1734	1733	1732	1731	1730	1729	1728	1727	1726	1725	1724	1723	1722	1721	1720	1719	1718	1717	1716	1715	1714	1713	1712	1711	1710	1709	1708	1707	1706	1705	1704	1703	1702	1701	1700	1699	1698	1697	1696	1695	1694	1693	1692	1691	1690	1689	1688	1687	1686	1685	1684	1683	1682	1681	1680	1679	1678	1677	1676	1675	1674	1673	1672	1671	1670	1669	1668	1667	1666	1665	1664	1663	1662	1661	1660	1659	1658	1657	1656	1655	1654	1653	1652	1651	1650	1649	1648	1647	1646	1645	1644	1643	1642	1641	1640	1639	1638	1637	1636	1635	1634	1633	1632	1631	1630	1629	1628	1627	1626	1625	1624	1623	1622	1621	1620	1619	1618	1617	1616	1615	1614	1613	1612	1611	1610	1609	1608	1607	1606	1605	1604	1603	1602	1601	1600	1599	1598	1597	1596	1595	1594	1593	1592	1591	1590	1589	1588	1587	1586	1585	1584	1583	1582	1581	1580	1579	1578	1577	1576	1575	1574	1573	1572	1571	1570	1569	1568	1567	1
--	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	---

BAA REV 01/03/18 PRO Form **990-PF** (2017)

Enter gross amounts unless otherwise indicated.

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

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

[illegible]

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

- | | | Yes | No |
|---|--|-------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | 1a(1) | x |
| | (2) Other assets | 1a(2) | x |
| b | Other transactions: | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | x |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | x |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | x |
| | (4) Reimbursement arrangements | 1b(4) | x |
| | (5) Loans or loan guarantees | 1b(5) | x |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | x |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | x |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
	 Signature of officer or trustee	05/14/2018 Date	DIRECTOR Title
			May the IRS discuss this return with the preparer shown below? See instructions ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name ROGER A. BARTLETT, CPA		Preparer's signature <i>Roger A. Bartlett</i>		Date 05/14/2018	Check ☐ if self-employed	PTIN P00196874	
	Firm's name ▶ MALONEY & ASSOCIATES, P.L.L.C.					Firm's EIN ▶ 55-0686284		
	Firm's address ▶ P.O. BOX 520					Phone no (304) 329-2752		

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

SZILAGYI FAMILY FOUNDATION, INC.

Employer identification number

81-0840430

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization SZILAGYI FAMILY FOUNDATION, INC.	Employer identification number 81-0840430
---	---

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	IMRE SZILAGYI 100 JACKSON STREET KINGWOOD WV 26537	\$ 40,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

SZILAGYI FAMILY FOUNDATION, INC.

Employer identification number

81-0840430

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization SZILAGYI FAMILY FOUNDATION, INC.	Employer identification number 81-0840430
--	--

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. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	

Form 990-PF: Return of Private Foundation**Part XV, Line 3a: Grants and Contributions Paid During the Year****Continuation Statement**

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
GIRL SCOUTS OF BLACK DIAMOND COUNCIL P. O. BOX 507 CHARLESTON, WV 25322-9983		PC	SUPPORT THE DEVELOPMENT OF GIRLS AS THEY LEARN, GROW AND THRIVE	100.
BUCKEYE CLINIC OF SOUTH SUDAN P. O. BOX 21794 COLUMBUS, OH 43221-0794		PC	MATERNAL AND CHILD HEALTH IN SOUTH SUDAN	200.
DOCTORS WITHOUT BORDERS P. O. BOX 5022 HAGERSTOWN, MD 21741-5023		PC	MEDICAL ASSISTANCE TO POPULATIONS IN DISTRESS DUE TO NATURAL DISASTERS AND ARMED CONFLICT	250.
FIRST PRESBYTERIAN CHURCH 104 E. HIGH STREET KINGWOOD, WV 26537		PC	SUPPORT MUSIC AND EDUCATION IN A CHURCH SETTING	2,000.
FIRST PRESBYTERIAN CHURCH 2331 NE 26TH AVENUE POMPAHO BEACH, FL 33062		PC	SUPPORT OF SPIRE SERIES MUSIC CONCERTS	200.
THE OHIO STATE UNIVERSITY FOUNDATION 1480 W. LANE AVENUE COLUMBUS, OH 43221		PC	SUPPORT EDUCATION IN SOCIAL WORK AND MATHEMATICS	1,000.
PRESTON COUNTY 4-H 115 W. COURT STREET KINGWOOD, WV 26537		PC	FREE EDUCATION PROGRAMS FOR YOUTH AND CAMPING EXPERIENCES	250.
THEATER ON THE LAKE 384 PARSONS ROAD AURORA, WV 26705		PC	EDUCATIONAL ACTIVITIES DESIGNED TO EXPLORE THEATRICAL ARTS	200.
OARS FOUNDATION P. O. BOX 67 ANGELS CAMP, CA 95222		PC	PROVIDE EDUCATIONAL OPPORTUNITIES FOR YOUTH ABOUT THE NATURAL ENVIRONMENT	250.
WEST VIRGINIA RIVERS COALITION 3501 MACCORKLE AVENUE CHARLESTON, WV 25304		PC	STATEWIDE VOICE FOR WATER-BASED RECREATION AND TO PROMOTE CLEAN WATER	150.
WVU SCHOOL OF SOCIAL WORK P. O. BOX 1650 MORGANTOWN, WV 26507-1650		PC	SUPPORT SCHOLARSHIPS FOR SOCIAL WORK STUDENTS AT WVU	250.
CENTER STAGE THEATER 700 N. CALVERT STREET BALTIMORE, MD 21202		PC	PROFESSIONAL THEATRE PROVIDING QUALITY PRODUCTIONS AND EDUCATIONAL OPPORTUNITIES	250.
BALTIMORE SHAKESPEARE FACTORY P. O. BOX 5639 BALTIMORE, MD 21210		PC	PROMOTES SHAKESPEARE SHOWS AND COMMUNITY OUTREACH	100.

Form 990-PF: Return of Private Foundation**Part XV, Line 3a: Grants and Contributions Paid During the Year****Continuation Statement**

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
THE SAMARITAN WOMEN 602 S. CHAPEL GATE LANE BALTIMORE, MD 21229		PC	PROVIDES RESTORATIVE CARE TO SURVIVORS AND BRING TO AN END HUMAN TRAFFICKING	250.
UNITED WAY OF MONOGALIA AND PRESTON COUNTIES 278 C SPRUCE STREET MORGANTOWN, WV 26505		PC	PROVIDE FUNDING TO NON-PROFIT ORGANIZATIONS IN BOTH COUNTIES	250.
UNIVERSITY OF AKRON P. O. BOX 2203 AKRON, OH 44398-9649		PC	SCHOLARSHIP FUND FOR SOCIAL WORK STUDENTS	200.
IASWG 101 WEST 23RD STREET, SUITE 108 NEW YORK, NY 10011		PC	SOCIAL GROUP WORK ORGANIZATION	200.
YMCA CAMP ALFRED L WILSON 2732 COUNTY ROAD 11 BELLEFOUNTAINE, OH 43311		PC	SUPPORT YMCA CAMP	100.
CUYAHOGA FALLS COMMUNITY BAND 1201 GRANT AVENUE CUYAHOGA FALLS, OH 44223		PC	SUPPORT COMMUNITY BAND	100.
HAROLD AND SANDRA STUBBS SCHOLARSHIP FUND 1900 W. MARKET STREET, SUITE G AKRON, OH 44313		EOF	SCHOLARSHIPS FOR GRADUATING SENIORS AKRON, OHIO	200.
JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY, 4TH FLOOR NEW YORK, NY 10004		PC	RESEARCH TO PROMOTE LIVES AND CURE TYPE 1 DIABETES	250.
ALZHEIMERS FOUNDATION OF AMERICA 322 EIGHTH AVENUE, 7TH FLOOR NEW YORK, NY 10001		PC	PROVIDE EDUCATION AND SUPPORT TO THOSE LIVING WITH ALZHEIMERS	250.
ROWLESBURG REVITALIZATION COMMITTEE P. O. BOX 135 ROWLESBURG, WV 26425		PC	TO REVIVE AND PRESERVE THE ECONOMIC, HISTORIC, CULTURAL, ETC LIFE OF ROWLESBURG	500.
PRO ARCHAEOLOGIA HUNGARIEA ALAPITVANY URI U. 49 BUDAPEST HUNGARY 1014		NC	SUPPORT KNOWLEDGE ABOUT THE AVAR POPULATION THRU ARCHAEOLOGICAL ANALYSIS	9,900.
				17,400.

Form 990-PF: Return of Private Foundation

Part IV: Capital Gains and Losses for Tax on Investment Income

Continuation Statement

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired	(d) Date sold
26.462 INVESTMENT CO OF AMERICA FD A		P	02/11/16	12/15/17
24.395 WASHINGTON MUTUAL INVS FD CL A		P	02/11/16	12/15/17
CAPITAL GAIN DISTRIBUTIONS		P	01/01/16	12/31/17
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
1,126.	0.	818.	308.	
1,151.	0.	869.	282.	
6,973.	0.	0.	6,973.	
9,250.	0.	1,687.	7,563.	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
			308.	
			282.	
			6,973.	
0.	0.	0.	7,563.	

Additional information from your Form 990-PF: Return of Private Foundation**Form 990-PF: Return of Private Foundation****Taxes****Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FEDERAL EXCISE TAX - 2016	5.		5.	0.
FOREIGN TAX WITHHELD	20.	20.	0.	0.
Total	25.	20.	5.	0.

Form 990-PF: Return of Private Foundation**Other Expenses****Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
WIRE FEE FOR DONATION	100.			100.
OFFICE SUPPLIES	9.			9.
Total	109.			109.

Name
SZILAGYI FAMILY FOUNDATION, INC.

Employer Identification No.
81-0840430

Asset Information:

Description of Property 119.320 AMCAP FUND CL A
Business Code Exclusion Code
Date Acquired 02/11/16 How Acquired Purchased
Date Sold 12/15/17 Name of Buyer
Check Box, if Buyer is a Business ☐
Sales Price 3,886. Cost or other basis (do not reduce by depreciation) 2,777.
Sales Expense Valuation Method
Total Gain (Loss) 1,109. Accumulated Depreciation

Description of Property 79.123 AMERICAN MUTUAL FUND CL A
Business Code Exclusion Code
Date Acquired 02/11/16 How Acquired Purchased
Date Sold 12/15/17 Name of Buyer
Check Box, if Buyer is a Business ☐
Sales Price 3,370. Cost or other basis (do not reduce by depreciation) 2,526.
Sales Expense Valuation Method
Total Gain (Loss) 844. Accumulated Depreciation

Description of Property 1504.436 BOND FUND OF AMERICA CL A
Business Code Exclusion Code
Date Acquired 04/22/16 How Acquired Purchased
Date Sold 12/15/17 Name of Buyer
Check Box, if Buyer is a Business ☐
Sales Price 19,438. Cost or other basis (do not reduce by depreciation) 19,430.
Sales Expense Valuation Method
Total Gain (Loss) 8. Accumulated Depreciation

Description of Property 38.817 GROWTH FUND OF AMERICA CL A
Business Code Exclusion Code
Date Acquired 02/11/16 How Acquired Purchased
Date Sold 12/15/17 Name of Buyer
Check Box, if Buyer is a Business ☐
Sales Price 2,046. Cost or other basis (do not reduce by depreciation) 1,394.
Sales Expense Valuation Method
Total Gain (Loss) 652. Accumulated Depreciation

Description of Property See Net Gain or Loss from Sale of Assets
Business Code Exclusion Code
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business ☐
Sales Price Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss) Accumulated Depreciation

Totals:

Total Gain (Loss) of all assets 10,176.
Gross Sales Price of all assets 37,990.
Unrelated Business Income Business Code
Excluded by section 512, 513, 514 Exclusion Code
Related/Exempt Function Income 10,176.

QuickZoom here to Form 990-PF, Page 1 ►
QuickZoom here to Form 990-PF, Page 12 ►

Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets**Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets****Net Gain or Loss from Sale of Assets****Continuation Statement**

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
26.462 INVESTMENT CO OF AMERICA FD A			02/11/16	Purchased	12/15/17			1,126.	818.			308.	
24.395 WASHINGTON MUTUAL INVS FD CL A			02/11/16	Purchased	12/15/17			1,151.	869.			282.	
EDWARD JONES INVESTMENT ACCOUNT CAPITAL GAIN DISTRIBUTIONS			Various		12/31/17			6,973.	0.			6,973.	

Name	Employer Identification No
SZILAGYI FAMILY FOUNDATION, INC.	81-0840430

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-PF, Part I, Line 16a					

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MALONEY & ASS	TAX PREPARATIO	2,150.			2,150.
Total to Form 990-PF, Part I, Line 16b		2,150.			2,150.

Line 16c - Other Professional Fees[illegible]

Name SZILAGYI FAMILY FOUNDATION, INC.	Employer Identification No 81-0840430
--	--

Lender Information:

Loan Receivable Type 2
Borrowers Name IMRE SZILAGYI
Borrower's Title GRANTOR
Check Box, if Borrower is a Business ☐
Relationship of Borrower (Other loans only) _____
Repayment Terms IMMEDIATE
Borrower's Security NONE
Purpose of Loan BROKER ERROR - ADVANCE FOR EXPE
Description of Consideration NONE
Original Amount 1,000.
Beginning Year Balance 0. Year End Balance 1,000.
FMV at Year End 1,000. FMV of Consideration 1,000.
Allowance for Doubtful Accounts(other loans only) _____
Date of Note 12/19/17 Maturity Date IMMEDIATE Interest Rate 0.00

Loan Receivable Type _____
Borrowers Name _____
Borrower's Title _____
Check Box, if Borrower is a Business ☐
Relationship of Borrower (Other loans only) _____
Repayment Terms _____
Borrower's Security _____
Purpose of Loan _____
Description of Consideration _____
Original Amount _____
Beginning Year Balance _____ Year End Balance _____
FMV at Year End _____ FMV of Consideration _____
Allowance for Doubtful Accounts(other loans only) _____
Date of Note _____ Maturity Date _____ Interest Rate _____

Loan Receivable Type _____
Borrowers Name _____
Borrower's Title _____
Check Box, if Borrower is a Business ☐
Relationship of Borrower (Other loans only) _____
Repayment Terms _____
Borrower's Security _____
Purpose of Loan _____
Description of Consideration _____
Original Amount _____
Beginning Year Balance _____ Year End Balance _____
FMV at Year End _____ FMV of Consideration _____
Allowance for Doubtful Accounts(other loans only) _____
Date of Note _____ Maturity Date _____ Interest Rate _____

QuickZoom to Form 990-PF, Page 2. ▶

Name

SZILAGYI FAMILY FOUNDATION, INC.

Employer Identification No

81-0840430

Line 10a - Investments - US and State Government Obligations:	End of Year		End of Year	
	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a				

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 10b		

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 10c		

Line 12 - Investments - Mortgage loans:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 12		

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
EDWARD JONES INVESTMENT ACCOUNT #337-15459-1-8	490,047.	518,385.
Totals to Form 990-PF, Part II, Line 13	490,047.	518,385.

Additional Information**2017****Name**

SZILAGYI FAMILY FOUNDATION, INC.

Identification Number

81-0840430

PART VII-A, LINE 10

IMRE AND JANET SZILAGYI

100 JACKSON STREET

KINGWOOD, WV 26537

Additional Information

2017

Name	Identification Number
SZILAGYI FAMILY FOUNDATION, INC.	81-0840430

PART XV, LINE 3(a) FOREIGN DONATION

PRO ARCHAEOLOGIA HUNGARIEA ALAPITVANY

URI U. 49

BUDAPEST, HUNGARY

9,900