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

Internal	Rev	enue Service Go to www	.irs.gov/Form990PF for instr	uctions and the latest info	ormation.	Open to Public Inspection
For ca	len	dar year 2017 or tax year beginning AUG	3 14, 2017 ·	, and ending	DEC 31, 2017	,
Nam	e of	foundation			A Employer identification	number
TH	Œ	ALFANDRE FAMILY FOUNDA	82-2473788 -			
Numb	er ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number .	,
98	06	6 E BEXHILL DR			301-237-15	67
-		own, state or province, country, and ZIP or foreign SINGTON, MD 20895	postal code		C If exemption application is po	ending, check here
		all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
		Final return	X Amended return			
		Address change	Name change	<u> </u>	Foreign organizations me check here and attach co	eting the 85% test, moutation
H Ch	eck	type of organization; X Section 501(c)(3)	exempt private foundation	• •	E If private foundation sta	tus was terminated
	Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition ''	under section 507(b)(1)	(A), check here
l Fair	ma	rket value of all assets at end of year J Accoun	ting method: X Cash	Accrual	F If the foundation is in a	60-month termination;
			Other (specify)	,	under section 507(b)(1)	(B), check here 🕨 📖
<u>_</u>	_	712,813. (Part I, colu	ımn (d) must be on cash basi	s.)	<u> </u>	T
Par	<u>τι</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	727,250.			
	2	Check If the foundation is not required to attitch Sch. B. Interest on savings and temporary				
- 1	0 A	Dividends and interest from securities			 	
İ	_	Gross rents				
ĺ		Net rental income or (loss)			RECEI	/ED
		Net gain or (loss) from sale of assets not on line 10			10	
100	b	Gross sales price for all assets on line 6a			8 DEC 1 1	200 8
Revenue	7	Capital gain net income (from Part IV, line 2)		0.	0 2011	rola Ó
æ	8	Net short-term capital gain				- X
	9	Income modifications			LOGDEN	UT
[10a	Gross sales less returns and allowances	1	· · · · · · · · · · · · · · · · · · ·		
		Less. Cost of goods sold			+	
		Gross profit or (loss)			 	
	11	Other income	727,250.	0.	0.	
\rightarrow	12 13	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
1		Other employee salaries and wages				_
_	15	Pension plans, employee benefits				
လ ရ	t6a	Legal fees				
		Accounting fees				
SCANNED Sesures	C	Other professional fees STMT_1	9,172.	0.	0.	9,172.
	17	Interest				
2	18	Taxes				
⊤n ≣l	19	Depreciation and depletion				
	20	Occupancy Travel, conferences, and meetings	5,000.	0.	0.	5,000.
_ +1.	21 22	Printing and publications	3,000	U.	1	3,000.
w	22 23	Other expenses STMT 2	265.	15.	0.	0.
		Total operating and administrative				<u> </u>
		expenses. Add lines 13 through 23	14,437.	15.	0.	14,172.
Ö	25	Contributions, gifts, grants paid	0.			14,172.
:	26	Total expenses and disbursements.				
		Add lines 24 and 25	14,437.	15.	0.	14,172.
Į:	27	Subtract line 26 from line 12;				ι
		Excess of revenue over expenses and disbursements	712,813.			
		Net investment income (if negative, enter -0-)		0.	0.	
i	Ç	Adjusted net income (if negative, enter -0-)		L	<u> </u>	l

For	m 99	0-PF (2017) THE ALFANDRE FAMILY FOUR		82-24	
۵	art	Balance Sheets Attached schedules and amounts in the description '	1. Beginning of year	End of year	
뜨	ai t	column should be for end-of-year amounts only	(a) Book Value) Fair Market Value
	1	Cash - non-interest-bearing		712,813.	712,813.
	2	Savings and temporary cash investments			
		· · · · · · · · · · · · · · · · · · ·			
	ľ	Accounts receivable ►			
	, ا	Pledges receivable			[
-	4				
		Less: allowance for doubtful accounts	ļ 		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			* *
		disqualified persons			
	7_	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
æ	8	Inventories for sale or use			<u> </u>
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock			-
		Investments - corporate bonds			_
		Investments - land, buildings, and equipment basis			
	l''				
-	4.0	Less accumulated deprecation			
		Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	ı	Other assets (describe			.
	16	Total assets (to be completed by all filers - see the	_		
_		ınstructions. Also, see page 1, item I)	0.	712,813.	712,813.
	17	Accounts payable and accrued expenses			
	18	Grants payable	, .	•	
, 100	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1
ē	21	Mortgages and other notes payable			.]
۳:		Other liabilities (describe			
		Calor naumaco (decembo P			
	,,,	Total liabilities (add lines 17 through 22)	0.	0.	
_	20		 		
		Foundations that follow SFAS 117, check here]	İ	
ø	١	and complete lines 24 through 28, and lines 30 and 31.		-	
စ္ည	24	Unrestricted			
횰	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
핕	1	Foundations that do not follow SFAS 117, check here		1	1
丘	1	and complete lines 27 through 31.	_	_ i	
ō	27	Capital stock, trust principal, or current funds	0.	0.	
£	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Aei	29	Retained earnings, accumulated income, endowment, or other funds	0.	712,813.	
ᅙ	30	Total net assets or fund balances	0.	712,813.	
2	-	* ' *			
	31	Total liabilities and net assets/fund balances	0.1	712,813.	
Ξ			·		<u></u>
P	<u>art</u>	Analysis of Changes in Net Assets or Fund Ba	aiances		
_	Total	not accests or fund halances at harinning of year. Part II. column (a) line	30		
1		net assets or fund balances at beginning of year - Part II, column (a), line	3 U		n
	-	t agree with end-of-year figure reported on prior year's return)		· · • • • • • • • • • • • • • • • • • •	712 012
		amount from Part I, line 27a		2	712,813.
		r increases not included in line 2 (itemize)		3	710 010
		lines 1, 2, and 3		4	712,813.
5	Decr	eases not included in line 2 (itemize)	<u> </u>		0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30		712,813.
					Form 990-PF (2017)

	ALFANDRE FAMILY			INC		82-247	3788	Page 3
PartilV Capital Gains a	and Losses for Tax on I	nvestment	Income				5	
	the kind(s) of property sold (for ex trehouse; or common stock, 200 st		te,	` P ·	low acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Dat (mo., da	
1a								
b NO	NE							
C								
d								· ·
0								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (los: ((e) plus (f) minus		
8			 					
b		Ì						
C			*		•			
d			· · · · · · · · · · · · · · · · · · ·					
6		<u> </u>						
	g gain in column (h) and owned by	the foundation	on 12/31/69.			(I) Gains (Col. (h) gan	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	cess of col. (i)			ol. (k), but not less that Losses (from col.	n -0-) or	
•		-	· · · · · · · · · · · · · · · · ·					
<u>a</u> b		<u> </u>						
C		1						
d		1						
		1					.	
θ	C.4		~	$\neg \uparrow$				
2 Capital gain net income or (net ca	ipital loss) { If gain, also enter-	er in Part I, line -0- in Part I, line	7 .	}	2			
 Net short-term capital gain or (los if gain, also enter in Part I, line 8, 		and (6):		7				
If (loss), enter -0- in Part I, line 8 Part VA Qualification U	nder Section 4040(a) fo	- Bodyood	Tay on No	<u> </u>	3	omo		
						ome		
(For optional use by domestic private	foundations subject to the section	i 4940(a) tax on	net investment	ıncome.)		N/A	
If section 4940(d)(2) applies, leave the	nie nart hlank							
11 Socion 4340(u)(2) appres, leave i	ns part blank.							
Was the foundation liable for the sec	tion 4942 tax on the distributable a	mount of any ye	ar in the base p	eriod?	-		Yes	No
If "Yes," the foundation doesn't qualif	· · · · · · · · · · · · · · · · · · ·							
1 Enter the appropriate amount in a	each column for each year; see the	instructions bet	ore making any	entries.				
(a) Base period years Calendar year (or tax year beginnii	ng in) Adjusted qualifying d	estributions	Net value of	(c) nonchar	ıtable-use asset	s Distri (col. (b) di	(d) bution ratio vided by col.	(c))
2016								
2015			·				·	
2014	-							
2013								•
2012							•	
2012					· ·		*	
2 Total of line 1, column (d)						2		
3 Average distribution ratio for the					 			
_	nce if less than 5 years			iboi oi y	0413	a		
the foundation has been in existen	1100 11 1055 Utali 3 years	•••	••	•-				
4 Enter the net value of noncharitab	ole-use assets for 2017 from Part X	, line 5				. 4	······································	
5 Multiply line 4 by line 3			····			5		
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)				•-	6		
7 Add lines 5 and 6						7		 -
8 Enter qualifying distributions from	n Part XII, line 4				<u></u>	8		
If line 8 is equal to or greater thar See the Part VI instructions.	n line 7, check the box in Part VI, lii	ne 1b, and comp	lete that part us	ing a 19	% tax rate.			

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	istruc	uon	5)
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)			<u> </u>
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			0.
	of Part I, line 27b			
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-)	-		0.
3	Add lines 1 and 2		•	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			 -
6	Credits/Payments:			·
	2017 estimated tax payments and 2016 overpayment credited to 2017 Exempt foreign organizations - tax withheld at source 6b 0 •			.]
-				
•				
				0.
	The state and payments are the state and the state are the state and the state are the state and the state are the			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
40	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			
11 Pa	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Τ	Yes	No
I	any political campaign?	18	<u> </u>	X
h	Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition	1b	 	X
•	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	···	1	
	distributed by the foundation in connection with the activities.]	
c	Did the foundation file Form 1120-POL for this year?	1c	-	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1		
	(1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$ · 0 •		1	Ì
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation .		, ,	1
	managers. ▶ \$ 0 •		·	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.		-	1
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	3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
8	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		
	● By language in the governing instrument, or	1	1	
	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?	8	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	7_	X	
			l ·	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.].		
	<u>MD</u>	1		[
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)			\square
	of each state as required by General Instruction G? If "No," attach explanation	86	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			التها
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9	l v	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 3.	10	N DE	(00.17)
	Fig. 1	.m. 99	U- 17 I	(201/)

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Pa	rt 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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	 		 -
12	168/c- Butterly addressed Consentrations			x
	If "Yes," attach statement. See instructions	12	₩.	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	Щ_
	Website address ► N/A			
14	The books are in care of ► JOSEPH ALFANDRE, SR. Telephone no. ► 301-2		L 5 6 /	
	Located at ▶ 9806 E BEXHILL DR, KENSINGTON, MD ZIP+4 ▶20	895		
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	N	/A	
10	At any timo during calendar year 2017, did the foundation have an interest in or a signature or other authority over a hank,		Yes	No
	securities, or other financial account in a foreign country?	18		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country		`	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
		T	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
Ta	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?	. 1	1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1	,	1 1
	a disqualified person? Yes 🛣 No	1		1 1
	(8) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1	,	1 1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	'		1 . 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?	1		1 1
	(6) Agroo to pay money or property to a government official? (Exception. Check "No"		1	
-	if the foundation agreed to make a grant to or to employ the official for a period after] ' ' '	,	ľ
	,	'		
				1 1
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		اــــا
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		 ,
•	Organizations relying on a current notice regarding disaster assistance, check here	1	1	
Ü	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?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		
	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	1		
	before 2017?	1		İ
	If "Yes," list the years			l 1
h	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 assots) to the year's undistributed income? (If applying section 494?(a)(2) to all years listed, answer "No" and attach			[]
	Address A. Co. State and Co. S	2b	<u> </u>	X
_	, , , , , , , , , , , , , , , , , , , ,			
G	If the provisions of section 1042(a)(2) are being applied to any of the years listed in 2a, list the years here.	1		"
_				
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1		
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 lapso 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.)	3ь		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 jeonardy before the first day of the tay year heginning in 20172	Ab		X

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

Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	101
Five highest-paid independent contractors for professional services. If none, enter	r "NONE "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of Solvice	(o) compondation
NONE		•
	-	i i
,		
	 	
	 	
otal number of others receiving over \$50,000 for professional services		•
Part IX A Summary of Diroct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	ctical information cuch as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod		Expenses
N/A		
•		
	•	,,
		7.44
		-
		-
•		
•		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
N/A		
		_
All other program-related investments. See instructions.		
T V		
		•
		0

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14,172.

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

3b

4

5

Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

Adjusted qualifying distributions. Subtract line 5 from line 4

income. Enter 1% of Part I, line 27b

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

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

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Part XIII Undistributed Income (se	ee instructions)			•
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI,		т ,	ų <i>,</i>	
line 7				9,518.
2 Undistributed income, if any, as of the end of 2017				i
a Enter amount for 2016 only			0.	, ,
b Total for prior years:				
a Excess distributions carryover, if any, to 2017:		0.	v .	od - 2° - 5 s
a From 2012			-	
b From 2013				
c From 2014				
d From 2015			•	
e From 2016	ļ			i
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ▶\$ 14,172.				i
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior			·	1
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				'
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				9,518.
e Remaining amount distributed out of corpus	4,654.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	1400b A 4 45 6 15	•	0.
6 Enter the net total of each column as				,
indicated below;				
& Corpus. Add lines 3f, 4c, and 4e Subtract line 5	4,654.			
b Prior years' undistributed income. Subtract	•		7 .	
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 tho coction 4042(a) tax hac boon proviously			a de la companya de l	- بىر خاند
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				1 , , ,
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
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)	0.	п		
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	4,654.	Ï		
10 Analysis of line 9:	, 			
a Excess from 2013				

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b Excess from 2014 c Excess from 2015 d Excess from 2016

e Excess from 2017

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4,654.

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	· · · · · · · · · · · · · · · · · · ·		A, question 9)	N/A	•
1 a If the foundation has received a ruling of			.		
foundation, and the ruling is effective fo			▶ └		
b Check box to indicate whether the foun		ig foundation described in		4942(J)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2016	Prior 3 years	14, 2014	/o\ Tetal
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Totai
investment return from Part X for		i			
each year listed					
b 85% of line 2a		,		<u> </u>	
c Qualifying distributions from Part XII,		ļ			
line 4 for each year listed				 	
d Amounts included in line 2c not			li .	-	
used directly for active conduct of					
exempt activities		[
e Qualifying distributions made directly					
for active conduct of exempt activities.	1	<u>'</u>			
Subtract line 2d from line 2c 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:				<u> </u>	
(1) Total support other than gross					
investment income (interest,	Ì		,		
dividends, rents, payments on	1	'			
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt				i	
organizations as provided in section 4942(j)(3)(B)(III)			'		
(3) Largest amount of support from				· · · · · · · · · · · · · · · · · · ·	
an exempt organization	ľ		1		
(4) Gross investment income					
Part XV Supplementary Info	rmation (Complet	te this part only i	the foundation	had \$5,000 or mo	re in assets
at any time during t				·	JV 9
1 Information Regarding Foundation	n Managers:		•		
a List any managers of the foundation wh	-	than 2% of the total contr	ibutions received by the	foundation before the clo	se of any tax
year (but only if they have contributed r			•		
NONE					
b List any managers of the foundation wh	o own 10% or more of the	stock of a corporation (or an equally large portio	n of the ownership of a p	artnership or
other entity) of which the foundation ha				•	
NONE	- •			· · · · · · · · · · · · · · · · · · ·	· ·
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
	only makes contributions t			ot accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.	, to individuals or organiza	tons under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone num	ber or email address of th	e person to whom applic	ations should be address	ed;	
JOE L. ALFANDRE, JR.					
9806 B BEXHILL DR.,	KENSINGTON,	MD 20895			<u> </u>
b The form in which applications should TO BE DETERMINED.	oe submitted and informat	on and materials they sh	iould include;		
c Any submission deadlines;					
TO BE DETERMINED.					
d Any restrictions or limitations on award	s, such as by geographica	il areas, charitable fields,	kınds of institutions, or o	other factors;	
TO BE DETERMINED.	•	- •			
			,,,		- 000 DE (

THE ALFANDRE FAMILY FOUNDATION 82-2473788 Form 990-PF (2017) Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution Amount status of Name and address (home or business) recipient a Paid during the year NONE 0. ▶ 3a Total b Approved for future payment NONE ▶ 3b Total Form 990-PF (2017)

Form 990-PF (2017) THE ALFANDRE FA	MILY FOU	NDATION, I	NC	82-	-2473788 Page 12
Part XVI-A Analysis of Income-Produc	ing Activitie	\$	1		-,
Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income	Exclu	ded by section 512, 513, or 514	(e)
5 5	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue;	Business code	Amount	sion	Amount	function income
	COUB		-		
a	 		-	<u> </u>	ļ
b '			ļ		
C	—		ļ		
d					ļ
•					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash		,			
Investments	1			·	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	 	· · · · · · · · · · · · · · · · · · ·	 		
• •	 				
a Debt-financed property			-		
b Not debt-financed property	<u></u>		\vdash		
8 Net rental income or (loss) from personal	1_	•	'		
property			L		<u> </u>
7 Other investment income					
8 Gain or (loss) from sales of assets other	1			*	
than inventory	1	•			-
9 Net income or (loss) from special events		·			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
		-	-		}· -
	 		-		
b	 				
C			-		
d	.				
θ	ļ	<u>.</u>			
12 Subtotal. Add columns (b), (d), and (e)		0.	i	0.	
13 Total. Add line 12, columns (b), (d), and (e)				. 18_	0.
(See worksheet in line 13 instructions to verify calculations.)				, _	
Part XVI-B Relationship of Activities to	the Accom	plishment of Exc	empt	Purposes	
Line No. Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part XVI-A	contrib	uted importantly to the accor	nplishment of
▼ the foundation's exempt purposes (other than b	y providing funds	for such purposes).		· · · · · · · · · · · · · · · · · · ·	
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723621 01-03-18

Form 990-PF (FOUNDATION,			
Part XVII			sfers to a	nd Transactions	and Relations	hips With Nonchari	table
1 Did the o	organization directly or indi		of the follower	a with any other organiz	ation described in se	ection 501/o\	Yes No
	an soction 501(c)(3) organ					etion so i(c)	Tes ite
	s from the roporting found					-	
(1) Casi	· •			,	• ,		1a(1) X
(2) Othe							1a(2) X
b Other tra	nsactions:	_					
(1)_Sale	s of assets to a noncharita	ble exempt organizat	on ,				1b(1) X
(2) Puro	chases of assets from a no	ncharitable exempt o	rganization				1b(2) X
	tal of facilities, equipment,						1b(3) X
(4) Rein	nbursement arrangements						1b(4) X
• •	ns or loan guarantees .						1b(5) X
	ormanco of sorvicos or mo						1b(6) X
	of facilities, equipment, ma						te X
		· ·	-	• •		r market value of the goods,	•
	•			d loss than fair market v	alue in any transacti	on or sharing arrangement, s	µōM ib
a) Line no	(b) Amount involved			exempt organization	(d) Domes	tion of transfers, transactions, and	
u) cine no	(b) Amount involved	(c) Hairie or	N/A	oxempt organization	(u) Descrip	uon oi transiers, transactions, and	Silaring arrangements
	 		11/13				
	 						•
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		<u> </u>		·			
	indation directly or indirec				anızations described		
ın sectioi	n 501(c) (other than sectio	n 501(c)(3)) or in se	ction 527?		• •••	[Yes X No
b If "Yes," o	complete the following sch						
	(a) Name of org	ganization		(b) Type of organization	en	(c) Description of relations	ship
	<u> </u>			- 			
	 						<u>-</u>
	· · · · · · · · · · · · · · · · · · ·						
						<u> </u>	·
Linds	er penalties of perjury, I declare t	that I have avaraged this	roture unalization	coccessor and produles on	d obstaments, and to the	host of my knowledge	
	pellef, it is true, correct, and corr					Mi	ay the IRS discuss this
Here	Luc als	andri -		112.5.1	9 DIREC	sh com	turn with the preparer own below? See instr
· · Z	nature of officer or trustee				Title	TOR	X Yes No
	Print/Type preparer's na		Prenarer's si	Date	Date	Check if PTIN	
	Littin taha hiahatat 2 mg	aniv				self- employed	-
Paid	MTCHART, CA	MICHAEL SALES			12/5/2019	' · ·	1770943
Preparer	Firm's name ERN		י זו כ	T.T.D	- 1 .2,0,2010	Firm's EIN ► 34-6	
Use Only		PI C IOOM	J. U.D.	THE	- • •	Film Sein - 34-0	JUJJJU
	Firm's address ▶ 99	WOOD AVE	NIIR SOI	ITH .			
	l .	-	08830	_	-	Phone no. 732-5	16-4200
	1		2000				orm 990-PF (201
	-	-	•			- · '	
			-		•	•	

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

Employer identification number

2017

	THE ALFANDRE FAMILY FOUNDATION, INC	82- <u>247378</u> 8
Organization type (chec	sk one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	•
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
• .	527 political organization	•
Form 990-PF	X 501(c)(3) exempt private foundation	-
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	٠
property) from s	any one contributor. Complete Parts I and II See instructions for determining a contributor's	s total contributions ,
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support in (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, butor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount-EZ, line 1. Complete Parts I and II	or 16b, and that received from
year, total cont	ntion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educ of cruelty to children or animals. Complete Parts I, II, and III	
year, contributi is checked, ent purpose Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from a consexclusively for religious, chantable, etc., purposes, but no such contributions totaled makes here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it table, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, chantable, etc ,
purpose Don't religious, chant Caution: An organizatio	complete any of the parts unless the General Rule applies to this organization because it	received nonexclusiv \$ orm 990, 990-EZ, or 9

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 ALFANDRE FAMILY FOUNDATION, INC 82-2473788 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 1 KENTLANDS INITIATIVE, INC. Person **Payroll** 1444 S EL REY ST 727,000. Noncash (Complete Part II for SALT LAKE CITY, UT 84108 noncash contributions) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) ' (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE ALFANDRE FAMILY FOUNDATION INC.

82-2473788

IUE W	DEANDER FAMILIE FOUNDATION, INC	1 02	-24/3/00
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	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
-		\$	-

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

THE ALFANDRE FAMILY FOUNDATION, INC

FORM 990-PF.	OTHER PROFESSIONAL FEES		STATEMENT, 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	9,172.	0.	0	9,172.,
TO FORM 990-PF, PG_1, LN 16	5C9,172.	0.	0.	9,172.

FORM 990-PF	OTHER EXPENSES Lit 'C		STATEMENT 2		
DESCRIPTION	EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TRANSFER FEES OTHER EXPENSES	15.	15.	0.	32. 7 0.	
TO FORM 990-PF, PG-1; LN	23 = - 265.		0.	0.	

THE ALFANDRE FAMILY FOUNDATION, INC

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT 3

NAME OF CONTRIBUTOR

ADDRESS

KENTLANDS INITIATIVE, INC.

1444 S EL REY ST SALT LAKE CITY, UT 04108

NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
JOSEPH ALFANDRE, SR. 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0.
SUE ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0.
ALISON ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0.
DANIEL F. ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0.
STEPHEN H. ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	, 0.	0.	0.
JAMES L. ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0.
JOSEPH L. ALFANDRE, JR. 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0 .
ELIZABETH ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0 .
MICHAEL W. ALFANDRE 9806 E BEXHILL DR KENSINGTON, MD 20895	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0 .

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The Alfandre Family Foundation, Inc. EIN: 82-2473788
December 31, 2017

Form 990PF

Amended Return

Explanation for filing Amended Return.

The Alfandre Family Foundation, Inc. is filing an amended 2017 Form 990PF in order to accurately represent the distributable amount and undistributed income going forward. The amended Form 990PF also trues up the balance sheet on Part II and Part III, as well as, updating multiple questions in Part VII-A and Part VII-B.

The Alfandre Family Foundation, Inc. FEIN: 82-2473788 Amended 2017 Form 990-PF

The attached 2017 Form 990-PF is amended for the following items:

- 1 Updated: Part I, Line 1 to reflect total contributions received in 2017.
- 2. Updated: Part I, Line 16c to reflect total professional fees in 2017.
- 3 Updated: Part I, Line 21, column d to reflect total travel expenses in 2017 related to charitable purposes.
- 4. Updated: Part I, Line 23 to reflect total other expenses in 2017.
- Modified: Part VII-A, Line 4b to indicate that a Form 990-T is not applicable since the Foundation did not generate unrelated business income
- 6 Updated: Part VII-A, Line 8a to reflect Maryland as the state in which the Foundation was incorporated.
- 7 Updated: Part VII-A, Line 8b to reflect that a copy of the Form 990-PF has been furnished to the Attorney General of Maryland.
- 8. Modified: Part VII-A, Line 13 to indicate that the Foundation has complied with public inspection requirements for its annual returns and exemption application
- 9 Modified: Part VII-B, Line 5c to indicate question is not applicable since question 5(a)(4) was answered as "no".
- 10. Modified: Part VII-B, Line 6b to indicate question is "no" as the Foundation did not pay premiums on a personal benefit contract
- 11 Modified: Part VII-B, Line 7b to indicate question is not applicable since question 7a was answered as "no".
- 12. Updated: Part X, Line 1b to include average monthly cash calculation for purposes of calculating the minimum investment return, resulting in a minimum investment return of \$9,518 for initial short tax period.
- 13. Updated: Part XI to include the distributable amount calculated for 2017
- 14. Updated. Part XII to include qualifying distributions used to accomplish the charitable purposes of the Foundation.
- 15 Updated. Part XIII, Line 1 to include the distributable amount of the Foundation for 2017, as calculated in Part XI.

- 16 Updated: Part XIII, Line 4 to include the qualifying distributions of the Foundation for 2017, as calculated in Part XII, Line 4.
- 17 Updated: Part XIII, Line 10 to include excess distribution carryovers credited to the 2018 tax year.
- 18. Updated: Schedule B, Part I to reflect contributions made to the Foundation in 2017