0427584919-LTR4588C

2949134112312 Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2018 or tay year heginning 1/1/2018 1/31/2018

Open to Public Inspection

			1/2010		LA Complement	14		
	ne of fou				A Employer	identification number		
<u> vin</u>	cent J	and Dorothy E. Ciarlante Foundation I street (or P O box number if mail is not delivered to street address)		Room/suite	1	92 2047257		
			1	Noom/suite	B Telephone	83-2947257 e number (see instruction	ne)	
		n Tam Court , state or province, country, and ZIP or foreign postal code			i elepnone	and the see that the struction	113)	
	esburg	, state of province, country, and 21P of foreign postar code VA	20176	3		703-779-002	2	
		ntry name Foreign province/state/county	Foreign	postal code	C if exempt	on application is pendin		• ▶ □
	_	·			,		•	_
G	Check	all that apply X Initial return I Initial return	of a former put	olic charity	D 1. Foreig	n organizations, check h	ere	▶ 🗆
		☐ Final return ☐ Amended ret			2. Foreigi	n organizations meeting	the 85% test.	
		Address change Name chang	e	,		here and attach comput		▶ 🗀
\overline{H}	Check	type of organization X Section 501(c)(3) exempt pri		n 15		foundation status was te	minated unde	er
		on 4947(a)(1) nonexempt charitable trust			section 50	07(b)(1)(A), check here		▶ □
-		narket value of all assets at J Accounting method			1			
•		f year (from Part II, col. (c), Other (specify)	ے		F If the four	idation is in a 60-month tion 507(b)(1)(B), check	termination here	►□
		6) \$ 300,000 (Part I, column (d) must be	e on cash basis)	4,,00, 500			<u> </u>
P:	art I						(d) Disburse	ements
7	211	amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue a expenses pe	, (D) NE	et investment	(c) Adjusted net	for chanta	able
/		equal the amounts in column (a) (see instructions).)	books	` '	ncome	ıncome	purpose (cash basis	
\neg	1	Contributions, gifts, grants, etc., received (attach schedule)	301,	500			,	,,
	2	Check ► X if the foundation is not required to attach Sch. B	551,				 	
	3	Interest on savings and temporary cash investments					i	
	4	Dividends and interest from securities		 }				
	5a	Gross rents					<u> </u>	
	ь	Net rental income or (loss)						
a	6a	Net gain or (loss) from sale of assets not on line 10		REC	-IVFD			· · · · · · ·
Revenue	b	Gross sales price for all assets on line 6a				.0		
ve	7	Capital gain net income (from Part IV, line 2)	88	 	<u> </u>	1		
Re	8	Net short-term capital gain	8	NOV (2	2 			
	9	Income modifications				J:≟		
	10a	Gross sales less returns and allowances		dani	EN. UT			
	b	Less. Cost of goods sold	<u> </u>		-,1 4, 0			
	c	Gross profit or (loss) (attach schedule)				· · · · · · · · · · · · · · · · · · ·		-
	11	Other income (attach schedule)				· · · · ·		····
	12	Total. Add lines 1 through 11	301	500	0	0		
60	13	Compensation of officers, directors, trustees, etc						
penses	14	Other employee salaries and wages						
e	15	Pension plans, employee benefits			-			
	16a	Legal fees (attach schedule)	1,	500		-1,500		
Ш	b	Accounting fees (attach schedule)						
<u>≥</u>	C	Other professional fees (attach schedule)						
ī	17	Interest						
<u>s</u>	18	Taxes (attach schedule) (see instructions)						
<u>=</u>	19	Depreciation (attach schedule) and depletion						-
Ę	20	Occupancy						
Ă	21	Kavel, conferences, and meetings						
B	22	Printing and publications						
Operating and Administrative Ex	23	Other expenses (attach schedule)						
ī	24	Total operating and administrative expenses.						
ati		Add lines 13 through 23	1	500	0	-1,500		0
Je!	25	Contributions, gifts, grants paid						
ō	26	Total expenses and disbursements. Add lines 24 and 25	1	500	0	-1,500	I	0
_	27	Subtract line 26 from line 12	1			,		
	- a	Excess of revenue over expenses and disbursements	300	000		l		
	ь	Net investment income (if negative, enter -0-)			0			
	C	Adjusted net income (if negative, enter -0-)				1,500		
		work Reduction Act Notice, see instructions.	 				m 990-PF	(2018)

Page 2

Da	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	į	End of	i year
ĘĒ		should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	٦	Cash—non-interest-bearing	300,000	300	,000	
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
ļ	•	Less: allowance for doubtful accounts			- 1	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other			\Box	
	•	disqualified persons (attach schedule) (see instructions)			ŀ	
}	7	Other notes and loans receivable (attach schedule)			\neg	
	•	Less allowance for doubtful accounts			- 1	
S	8	Inventories for sale or use			\neg	
Assets	9	Prepaid expenses and deferred charges		· . ·	\neg	
š	10a	Investments—U.S. and state government obligations (attach schedule)				
`	b	Investments—corporate stock (attach schedule)				
		Investments—corporate stock (attach schedule)				
- 1	C	Investments—and, buildings, and equipment basis				
	11	Less: accumulated depreciation (attach schedule)				
	40				\dashv	
	12	Investments—mortgage loans	+		-+	
	13	Investments—other (attach schedule)			\dashv	
	14	Land, buildings, and equipment basis				
	4.5	Less: accumulated depreciation (attach schedule)	-			
H	15	Other assets (describe				
	16	Total assets (to be completed by all filers—see the	000 000	200		Y o
		instructions Also, see page 1, item I)	300,000	300	,000	<u>XU</u>
	17	Accounts payable and accrued expenses			\rightarrow	
Se	18	Grants payable			\longrightarrow	
Liabilities	19	Deferred revenue			\dashv	
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			\longrightarrow	
E.	21	Mortgages and other notes payable (attach schedule)				· · · · · · · · · · · · · · · · · · ·
	22	Other liabilities (describe)				· · · · · · · · ·
_	23	Total liabilities (add lines 17 through 22)	300,000	300	,000	
S		Foundations that follow SFAS 117, check here				
alances		and complete lines 24 through 26, and lines 30 and 31.				
au	24	Unrestricted			 -∤	
	25	Temporarily restricted			─	
ᇹ	26	Permanently restricted				
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here]	
느		and complete lines 27 through 31.				
0	27	Capital stock, trust principal, or current funds	<u> </u>			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			\longrightarrow	
SS	29	Retained earnings, accumulated income, endowment, or other funds				
¥	30	Total net assets or fund balances (see instructions)	300,000	300	,000	
Ne	31	Total liabilities and net assets/fund balances (see			l	
		ınstructions)	300,000	300	,000	
	rt III	Analysis of Changes in Net Assets or Fund Balances	····			
1		net assets or fund balances at beginning of year-Part II, column (a)				
		of-year figure reported on prior year's return)			1	
2		amount from Part I, line 27a			2	300,000
3	Other	r increases not included in line 2 (itemize)		[3	
4		ines 1, 2, and 3			4	300,000
-	D	and matural and and an time 2 (steman)			5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part	t II, column (b), line 30		6	300,000

Part	V Capital Gains and	Losses for Tax on Investm	ent income				
		d(s) of property sold (for example, real esta se, or common stock, 200 shs MLC Co)	te,	(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a							
<u>b</u>							<u> </u>
<u>c</u>					-		
<u>d</u>					 		
e				<u> </u>	\vdash		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale	1		n or (loss) f) minus (g))
a							
b					†		···
C							
d			-				
<u> </u>							
	Complete only for assets sho	owing gain in column (h) and owned	by the foundati	on on 12/31/69	ļ		(h) gain minus
	(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) col (j), if any			t less than -0-) or rom col (h))
a					ļ	,	
<u> </u>					ļ		
<u>c</u>					├		
d					 		
е	l,		also enter in P	art Lline 7	 		
2	Capital gain net income or	(net canital loss)	enter -0- in P	>	2		0
3	Net short-term capital gain	or (loss) as defined in sections 12					
	If gain, also enter in Part I,	line 8, column (c). See instruction	s If (loss), en	ter -0- in }			
	Part I, line 8	<u> </u>		J	3		0
Part		er Section 4940(e) for Redu					
(For d	optional use by domestic privi	ate foundations subject to the sec	tion 4940(a) t	ax on net investme	ent inc	ome)	
If sec	tion 4940(d)(2) applies, leave	e this part blank.					
Wasi	he foundation liable for the s	ection 4942 tax on the distributab	le amount of a	any vear in the bas	e pend	od?	☐ Yes ☒ No
		alify under section 4940(e). Do no					
1	Enter the appropriate amou	unt in each column for each year;	see the instru	ctions before maki	ng any	entries	
	(a)	(b)		(c)		Die	(d) tribution ratio
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net valu	e of nonchantable-use a	ssets		divided by col (c))
	2017		0		0		0.000000
	2016		0		0		0.000000
	2015		0		0		0.000000
	2014		0		0		0.000000
	2013		0		0	<u> </u>	0 000000
2	Total of line 1 column (d)					2	0 000000
3		or the 5-year base period—divide			• •		0 000000
•	_	undation has been in existence if I				3	0.000000
	,		,				
4	Enter the net value of nonc	haritable-use assets for 2018 from	n Part X, line	5		4	
5	Multiply line 4 by line 3					5	
e	Enter 1% of not investment	t income (1% of Part I, line 27b)				6	0
6	Enter 170 OF Het INVESTINENT	LINCOME (170 OF FAILT, IINE 270)			•		
7	Add lines 5 and 6					7	0
•					-		
8		s from Part XII, line 4				8	0
	•	er than line 7, check the box in Pa	ırt VI, line 1b,	and complete that	part u	sing a 1% tax	rate. See the
	Part \/Linetructions	,	, 1	•	•	•	

Part \		;)		
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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			ı
_	Part I, line 12, col. (b).			ı
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2		0	
3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	
5 6	Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ► Refunded ► 11		0	
Part \	/II-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			i
	instructions for the definition	1b	lacksquare	<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			ı
	published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation. > \$ (2) On foundation managers. > \$	- l !		l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			l.
•	on foundation managers \$	2		х
2	If "Yes," attach a detailed description of the activities.	-4-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			ı
J	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
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			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			l
	By language in the governing instrument, or			ı
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			ı
	conflict with the state law remain in the governing instrument?	6	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	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. VA			
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 General Instruction G? If "No," attach explanation	8b	Х	
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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If			
	"Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1
	names and addresses	. 10		Х

Page 5

Part	VII-A Statements Regarding Activities (continued)			
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	Yes	No 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	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address			
14	The books are in care of ▶ Vincent J Ciarlante Telephone no. ▶ 703-779-	0022		
	Located at ► 40561 Tim Tam Ct. Leesburg VA ZIP+4 ► 20176			
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 15	٠	. (▶ □
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	$\overline{}$
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
	name of the foreign country			L
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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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 X 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	1b	N/A	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		х
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))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?			
	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			
	atl years listed, answer "No" and attach statement—see instructions.)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•	► 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2018 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 2018.)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	,,,,,	Х
ъ В	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 2018?	4b		Х

Part	VII-B	Statements Regarding Activities	for W	<u>hich Form</u>	4720 N	<i>l</i> lay Be Re	equire	d (contin	ued)			
5a ,		he year, did the foundation pay or incur any y on propaganda, or otherwise attempt to ii			section	4945(e))?		Yes	X No		Yes	No
	(2) Influ	ence the outcome of any specific public electly or indirectly, any voter registration drive	ection (s		955), or	to carry on		Yes	X No			
		ride a grant to an individual for travel, study		• •		• • •		=	X No			
	(4) Prov	ride a grant to an organization other than a ion 4945(d)(4)(A)? See instructions	charita		nızatıo		ın 	☐ Yes	_			
		ride for any purpose other than religious, chooses, or for the prevention of cruelty to chil						Yes	X No			
b		nswer is "Yes" to 5a(1)–(5), did any of the ti							d ın			
	•	ions section 53.4945 or in a current notice i	-	-			truction	s		5b	N/A	
С	If the an	ations relying on a current notice regarding swer is "Yes" to question 5a(4), does the fo e it maintained expenditure responsibility fo	oundati	on claım exer	nption 1	rom the tax		Yes	▶ ∐ No			
6a	Did the	attach the statement required by Regulation foundation, during the year, receive any fur sonal benefit contract?	nds, dır			pay premiui	ms	☐ Yes	X No			
b	Did the	foundation, during the year, pay premiums, to 6b, file Form 8870	directi	y or indirectly	on a p	ersonal ber	nefit cor	_		6b		
7a		ne during the tax year, was the foundation a pa	rty to a	prohibited tax :	shelter t	ransaction?		☐ Yes	X No			
b		did the foundation receive any proceeds of		•				action?	_	7b	N/A	
8	Is the for	undation subject to the section 4960 tax on ration or excess parachute payment(s) duri	n paymong the	ent(s) of more year?...	than \$	1,000,000 i	n	☐ Yes	⊠ No			
Part	VIII	Information About Officers, Directo						lighly P	aid Em	ploye	es,	
	1 1-4 -11	and Contractors					- 0					
1	List all	officers, directors, trustees, and foundat (a) Name and address	(b) Titl hou	e, and average irs per week ted to position	(c) Co (lf i	mpensation not paid, iter -0-)	(d) emplo	Contribution byee benefit ferred compe	s to plans	(e) Expe	nse acc	
Vincer	nt J. Cıarl	ante	Truste									
		n Ct. Leesburg, VA 20176		1 00		0					_	
	y E. Cıaı		Truste			0			ļ			
40561	11m 1an	n Ct. Leesburg, VA 20176		1.00		0					_	
2	Compe "NONE.	nsation of five highest-paid employees (other t	han those in	cluded	on line 1—	see ins	structions	s). If nor	ie, ent	er	
	(a) Name	and address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	/eek	(c) Comper	sation	(d) Contrib employee plans and compens	benefit deferred	(e) Expe	nse acc sllowan	
NONE												
			·	_								
							-					
Total	number c	f other employees paid over \$50,000 .				<u> </u>		·				0
									Fo	m 990	-PF	(2018)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	iployees,
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	
Day IV A Common of Direct Charitable Activities	
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of	Expenses
organizations and other beneficianes served, conferences convened, research papers produced, etc	
1 None, foundation was formed on December 31 2018 and operated for only one day in 2018	
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 None	
	· · · · · · · · · · · · · · · · · · ·
2	
All other program-related investments. See instructions	
3	
Total Add lines 1 through 3	
Total. Add lines 1 through 3	

Form **990-PF** (2018)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundation	S,
	see instructions.)		
1 .	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	1.1	
а	Average monthly fair market value of securities	1a	0
þ	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5 MIR Prorated - Short Year	6	0
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ons	
	and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2018 from Part VI, line 5	4	
b	Income tax for 2018 (This does not include the tax from Part VI.)	_ `	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
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	0
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
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.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	1 1	
	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when	ether the found	ation
	qualifies for the section 4940(e) reduction of tax in those years.		

Form **990-PF** (2018)

Part	XIII Undistributed Income (see instructions)				
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years pnor to 2017	(c) 2017	(d) 2018
	line 7				
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only			0	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2018			i	
а	From 2013				
b	From 2014				
C	From 2014				
d	From 2016				
е	From 2017	ļ			
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ⁻ ▶ \$	ļ			•
	Applied to 2017, but not more than line 2a			<u>.</u>	
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 2018 distributable amount				
е	Remaining amount distributed out of corpus .				
5	Excess distributions carryover applied to 2018	J			
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			,
b	Prior years' undistributed income. Subtract		•		
	line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				i
	income for which a notice of deficiency has				II
	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				
е	Undistributed income for 2017. Subtract line				
	4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2018 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2019				(
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 2013 not				
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a				· · · · · · · · ·
10	Analysis of line 9				
а	Excess from 2014				
b	Excess from 2014				
C	Excess from 2016				
d	Excess from 2017	ļ			
_	Excess from 2018	ī			

Part	XIV Private Operating Foundati	ions (see instruc	tions and Part V	II-A, question 9)		N/A
1a	If the foundation has received a ruling o	r determination lett	er that it is a privat	e operating		
	foundation, and the ruling is effective for	2018, enter the da	ate of the ruling .	.	<u> </u>	
b	Check box to indicate whether the foundation	n is a private operati	ing foundation descr	ibed in section	4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed					0
b	85% of line 2a					0
c	Qualifying distributions from Part XII,					
•	line 4 for each year listed					0
d	Amounts included in line 2c not used directly					
•	for active conduct of exempt activities					o
_	Qualifying distributions made directly					
·	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the					
3	alternative test relied upon					
а	"Assets" alternative test—enter					
•	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		!			0
b	"Endowment" alternative test-enter 2/3		*****			
	of minimum investment return shown in Part X, line 6 for each year listed.					0
^	"Support" alternative test—enter	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
С	(1) Total support other than gross			}		
	investment income (interest,				Į.	
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)			1	1	0
	(2) Support from general public					
	and 5 or more exempt			l		
	ofganizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization			}	}	0
	(4) Gross investment income					0
Part		n (Complete this	s part only if the	e foundation ha	id \$5,000 or mo	re in assets at
-	any time during the year-					
1	Information Regarding Foundation M	anagers:				
а	List any managers of the foundation wh					foundation
	before the close of any tax year (but on	ly if they have cont	nbuted more than	\$5,000). (See sect	ion 507(d)(2).)	
	nt J. Ciarlante Dorothy E.					· · ·
b	List any managers of the foundation wh					n of the
	ownership of a partnership or other enti-	ty) of which the fou	indation has a 10%	or greater interes	t.	
2	Information Regarding Contribution,					
	Check here ► X if the foundation on					
	unsolicited requests for funds. If the fou	-	_	idividuals or organ	izations under othe	r
	conditions, complete items 2a, b, c, and					
а	The name, address, and telephone num	nber or email addre	ess of the person to	whom application	is should be addres	ssed

b	The form in which applications should be	e submitted and in	formation and mate	enals they should	include.	
						
С	Any submission deadlines					
	Annual statement of the		conhical areas st-	ritable fields lands	of inclinations of	
a	Any restrictions or limitations on awards	such as by geogr	apriicai areas, cha	inable lielus, Kifiūs	ง บา เการแนนเบกรี, OF C	ou iei
	factors					

Page 11

	XV Supplementary Information (continuous Grants and Contributions Paid During to	ued)	ad for Eur	turo Daymont		
		If recipient is an individual,	}	1	1	
	Recipient	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution		Amount
	Name and address (home or business)	or substantial contributor	recipient			·····
а	Paid during the year				-	
					- 1	
					İ	
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					ł	
					- 1	
					1	
		}				
					İ	
			ļ	}		
			ļ			
	Total		· · · · ·		3a	C
b	Approved for future payment		ļ			
			İ		1	
					ŀ	
			ŀ			
			}			
]				
					\perp	-
	Total			· · · · · · · · · · · · · · · · · · ·	3b	C

Pai	τλν	FA Analysis of Income-Producing Ac	แงเนอง				
		ss amounts unless otherwise indicated		Isiness income	Excluded by sect	ion 512, 513, or 514	(e) Related or exempt
1	Proc	gram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
•	a	grant service revenue			-		
					-		
			 				
	ď						
							
	f						
	g f	Fees and contracts from government agencies					***
2		nbership dues and assessments					
3		est on savings and temporary cash investments .					
4		dends and interest from securities				····	
5		rental income or (loss) from real estate					
		Debt-financed property					-
		Not debt-financed property					
6		rental income or (loss) from personal property					***
7		er investment income					
8		or (loss) from sales of assets other than inventory				·	
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11		er revenue a					
	_						
	e ¯						
12	Subi	total. Add columns (b), (d), and (e)		0		0	C
13	Tota	al. Add line 12, columns (b), (d), and (e)				13	C
(See	WOR	sheet in line 13 instructions to verify calculations)				
		Relationship of Activities to the A		ent of Exemp	t Purposes		
Pa Lin		I-B Relationship of Activities to the A	ccomplishm	olumn (e) of Part)	(VI-A contributed	I importantly to the ses). (See instruction	ons.)
Pa Lin	t XV e No.	Relationship of Activities to the A Explain below how each activity for which incom	ccomplishm	olumn (e) of Part)	(VI-A contributed	I importantly to the les). (See instruction	ons.)
Pa Lin	t XV e No.	Relationship of Activities to the A Explain below how each activity for which incom	ccomplishm	olumn (e) of Part)	(VI-A contributed	I importantly to the ses). (See instruction	ons.)
Pa Lin	t XV e No.	Relationship of Activities to the A Explain below how each activity for which incom	ccomplishm	olumn (e) of Part)	(VI-A contributed	I importantly to the ses). (See instruction	ons.)
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Pa Lin	t XV e No.	Relationship of Activities to the A Explain below how each activity for which incom	ccomplishm	olumn (e) of Part)	(VI-A contributed	I importantly to the ses). (See instruction	ons.)

83-2947257 Vincent J and Dorothy E. Ciarlante Foundation Form 990-PF (2018) Page 13 Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** · Did the organization directly or indirectly engage in any of the following with any other organization described No Yes in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) Χ 1a(2) (2) Other assets **b** Other transactions 1b(1) (1) Sales of assets to a noncharitable exempt organization . (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements . 1b(4) (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations . 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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. (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations ☐ Yes 🗓 No described in section 501(c) (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of penury, 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 faxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return

Date

Preparer's signature

Here

Paid

Preparer

Use Only

Signature of officer or trustee

Firm's name

Firm's address

Print/Type preparer's name

Yes No

with the preparer shown below?

See instructions

Check I if

self-employed

Firm's EIN

Phone no

Date

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Vincent J and Dorothy E. Ciarlante Foundation

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

2018

Employer identification number

83-2947257

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	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
Check 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 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 (entering "N/A" in column (b) instead of the contributor name and address), 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.				
-	sn'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
Vincent J and Dorothy E Ciarlante Foundation

Employer identification number
83-2947257

Part İ	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	Vincent J. Ciarlante 40561 Tim Tam Ct. Leesburg VA 20176 Foreign State or Province Foreign Country.	\$ <u>150,000</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	Dorothy E. Ciarlante 40561 Tim Tam Ct. Leesburg VA 20176 Foreign State or Province Foreign Country	\$150,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Foreign State or Province: Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions.)	