efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491042003609

2017

OMB No 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 07-01-2	017 , aı	nd en	ding 06-30-	2018	
		ndation MILY FOUNDATION INC	A Employer identification number				
C/1	O STAN	LEY MARTIN COMPANIES INC			20-3142787		
		l street (or P O box number if mail is not delivered to street address AZA AMERICA DRIVE NO 1100	) Room/suite		<b>B</b> Telephone nu	mber (see instructior	ns)
City	or town	, state or province, country, and ZIP or foreign postal code			(703) 964-5000	l	
		, state of province, country, and 217 of foreign postal code 201904771			<b>C</b> If exemption	application is pending	g, check here
<b>G</b> Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	,	<b>D 1.</b> Foreign org	ganızatıons, check he	re 🔲
		☐ Final return ☐ Amended return	l			ganizations meeting	
		$\square$ Address change $\square$ Name change			,	k here and attach cor	· -
_	•	pe of organization $lacksquare$ Section 501(c)(3) exempt private				indation status was t n 507(b)(1)(A), chec	
			le private foundation				
of y	year (f.	tet value of all assets at end rom Part II, col (c), \$ 8,344,638	☑ Cash ☐ Accru	lal		ition is in a 60-month n 507(b)(1)(B), chec	
	/-	(Part I, column (d) mus.	t be on cash basis )				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	<b>(b)</b> N	let investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books		income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	496,992	2			(646)1 54515 5111/7
	,	schedule)  Check ▶ ☐ If the foundation is <b>not</b> required to attach					
	2	Sch B					
	3	Interest on savings and temporary cash investments	123	3	123		
	4	Dividends and interest from securities	202,111	1	202,111		
	5a	Gross rents					
a,	b 6a	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	394,395	5			
1	b	- , ,	334,333	1			
Reverue		Gross sales price for all assets on line 6a1,061,428	8				
~	7	Capital gain net income (from Part IV, line 2)			394,395		
	8	Net short-term capital gain					
	9 10a	Income modifications					
	b	Gross sales less returns and allowances Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)	<u></u>				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,093,621	1	596,629	0	
	13	Compensation of officers, directors, trustees, etc	C	0	0	0	0
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
Expenses	ь	Accounting fees (attach schedule)	7,750		3,875	0	3,875
	С	Other professional fees (attach schedule)	23,451	1	23,451	0	0
and Administrative	17	Interest	<b>95-1</b> 27.005	-			
IIST	18	Taxes (attach schedule) (see instructions)	37,025	2	0	0	0
E	19	Depreciation (attach schedule) and depletion					
Act	20 21	Occupancy					
pu	21	Printing and publications					
ig a	23	Other expenses (attach schedule)					
Operatıng	24	Total operating and administrative expenses.					
ber		Add lines 13 through 23	68,226	6	27,326	0	3,875
Ō	25	Contributions, gifts, grants paid	323,308	8			323,308
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	391,534	4	27,326	0	327,183
	27	Subtract line 26 from line 12	391,334	1	21,320		327,103
	а	Excess of revenue over expenses and	702,087	7			
	b	disbursements  Net investment income (if negative, enter -0-)			569,303		
	C	Adjusted net income(if negative, enter -0-)			233,303	0	
Ear		work Reduction Act Notice see instructions			at No. 11280	, ,	

7,780,100

7,780,100

7,780,100

7,780,100

7,894,078

7,894,078

7,894,078 7,894,078

1 2

3

4

5

7,780,100

8,482,187

7,894,078 Form 990-PF (2017)

588,109

702,087

8,290,049

8,344,638

	4	Pleages receivable 2,310			1
		Less allowance for doubtful accounts ▶	200	2,31	וכ
	5	Grants receivable			T
	6	Receivables due from officers, directors, trustees, and other			Т
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			T
		Less allowance for doubtful accounts ▶			
S.	8	Inventories for sale or use			T
Assets	9	Prepaid expenses and deferred charges			Т
As	10a	Investments—U S and state government obligations (attach schedule)			Т
	ь	Investments—corporate stock (attach schedule)	6,744,452	7,839,48	•
	С	Investments—corporate bonds (attach schedule)			T
	11	Investments—land, buildings, and equipment basis ▶			Τ

## Less accumulated depreciation (attach schedule) ▶ Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ Other assets (describe > \_

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Foundations that do not follow SFAS 117, check here 🕨 🗹

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

Retained earnings, accumulated income, endowment, or other funds

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

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

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

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

Analysis of Changes in Net Assets or Fund Balances

instructions Also, see page 1, item I)

Other liabilities (describe -

Unrestricted . . .

Permanently restricted . .

and complete lines 27 through 31.

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

Add lines 1, 2, and 3 . . . . . . .

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . .

Other increases not included in line 2 (itemize)

Temporarily restricted

12

13 14

15 16

17

18

19

20

21

22

23

24

25

28 29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

4

5

Page **3** 

Part IV Capital Gains	and Losses for Tax on Invest	tment Income			
List and describe 2-story brick war	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
<b>1a</b> See Additional Data Tab	le				
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) other basis pense of sale	Gain	( <b>h)</b> or (loss) f) minus (g)
a See Additional Data Tab	e				
b					
С					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(1)
<b>(i)</b> FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		<b>(k)</b> s of col (ı) ıl (ʒ), ıf any	col (k), but not	(h) gain minus t less than -0-) <b>or</b> rom col (h))
a See Additional Data Tab	e				
b					
С					
d					
e					
·	gain or (loss) as defined in sections art I, line 8, column (c) (see instructions)	ons) If (loss), enter -	Part İ, line 7	2	394,395
			ı		
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	t Investment In	come	
(For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on n	et investment incon	ne )	
	ne section 4942 tax on the distributa		· ·	7  \[ \] Y	∕es ☑ No
· · · · · · · · · · · · · · · · · · ·	ot qualify under section 4940(e) Do			_	
(a)	nount in each column for each year, I	see instructions befor	e making any entrie	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharita		Distribution rat (col (b) divided by	col (c))
2016	27,590		4,441,250		0 006212
2015	68,200		1,666,920		0 040914
2014	144,291		1,787,634		0 080716
2013 2012	334,259 101,492		1,828,750 1,358,357		0 182780 0 074717
			<del>'''''</del>	T	
2 Total of line 1, column (	•		2		0 385339
	o for the 5-year base period—divide ndation has been in existence if less		o, or by the3		0 077068
	oncharitable-use assets for 2017 fron		4		8,131,177
<b>5</b> Multiply line 4 by line 3			5		626,654
	ent income (1% of Part I, line 27b)		6		5,693
<b>7</b> Add lines 5 and 6			7		632,347
	nons from Part XII, line 4 ,		8		327,183
If line 8 is equal to or gr	eater than line 7, check the box in Pa			ng a 1% tax rate Se	ee the Part VI
instructions					

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

7b

Total. Add lines 1 through 3

Part VIII
and Contractors

Part VIII

Part VIII

Part VIII

Part VIIII

1 List all officers, directors, truste	es, f	oundation managers an	d their compensation	-	
(a) Name and address	Title, and average hours per week (b) devoted to position		(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	
MARTIN K ALLOY 11710 PLAZA AMERICA DRIVE SUITE 1100 RESTON, VA 20190	PRES 1 00	SIDENT/TREASURER	0		0
STEVEN B ALLOY 11710 PLAZA AMERICA DRIVE SUITE 1100 RESTON, VA 20190	VICE 1 00	PRESIDENT	0		0
MARJORIE P ALLOY 11710 PLAZA AMERICA DRIVE SUITE 1100 RESTON, VA 20190	SECF 1 00	RETARY	0		0
DARIS M CLIFTON  11710 PLAZA AMERICA DRIVE SUITE 1100 RESTON, VA 20190	VICE 1 00	PRESIDENT	0		0
2 Compensation of five highest-pa	aid er	nployees (other than th	ose included on line 1	-see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee p	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		-			
Total number of other employees paid or	ver \$5	50.000			0
3 Five highest-paid independent of					
(a) Name and address of each person			•	e of service	(c) Compensation
NONE					
Total number of others receiving over \$5	0,000	) for professional services.			0
Part IX-A Summary of Direct					
List the foundation's four largest direct charitab				ation such as the number of	Expenses
organizations and other beneficiaries served, co 1 N/A	nferen	ces convened, research papers	produced, etc		0
2					
3					
4					
Part IX-B Summary of Progra	m-R	elated Investments (	(see instructions)		
Describe the two largest program-related in			· · · · · · · · · · · · · · · · · · ·	and 2	Amount
1 N/A 2					0
All other program-related investments	See	ınstructions			

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

4

5

327.183

327,183

Form **990-PF** (2017)

2 3

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

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

4

5

**b** Total for prior years

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

d From 2015. . . . e From 2016. . . . .

a From 2012. . . . .

2

395,173

327,183

67,990

Form **990-PF** (2017)

(d)

2017

-PF (	2017	')	
		-	-

orm 990-PF (20	017)	
Part XIII	Undistributed Income (see instruct	ions

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2017 distributable amount. . . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017

same amount must be shown in column (a) )

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

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9 a Excess from 2013. .

**b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

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

art XIII	Undistributed Income (see Instru	1CI
Distributab	le amount for 2017 from Part XI, line 7	Γ
Undistribut	ed income, if any, as of the end of 2017	Г

a Enter amount for 2016 only. . . . . .

144,812

56 319

76.822 56,319 (a)

Corpus

201.131

67,990

133,141

133,141

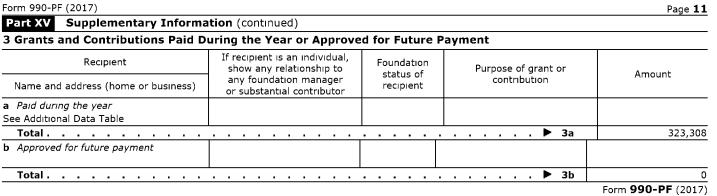
(b)

Years prior to 2016

(c)

2016

NO RESTRICTIONS OR LIMITATIONS ON AWARDS



Enter gross amounts unless otherwise indicated		Unrelated bu	siness income	Excluded by section	(e) Related or exempt	
<b>L</b> Program	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
-	and contracts from government agencies					
	rship dues and assessments.					
	st on savings and temporary cash					
	ments			14	123	
	ds and interest from securities tal income or (loss) from real estate			14	202,111	
	financed property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income	<del>                                     </del>				
	r (loss) from sales of assets other than					
	ory			18	394,395	
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	evenue a					
	al Add columns (b), (d), and (e).		0		596,629	
art XVI ine No. ▼	Explain below how each activities to the the accomplishment of the foundation's expectations.	income is reporte	ed in column (e) of	f Part XVI-A contribu		
	instructions )					

orm 9	90-PF (	2017)									Pa	age <b>13</b>
Part	XVII	Information Re Exempt Organi		ransfe	rs To a	ind Transactio	ns and	l Relatio	nships With None	charitable		
		ganization directly or in Code (other than sectio								n 501	Yes	No
<b>a</b> Tra	nsfers	from the reporting foun	dation to a n	oncharit	table exe	empt organization	of					
(1)	Cash									1a(1		No
(2)	Othe	assets								. 1a(2	)	No
<b>b</b> Oth	er tran	sactions										
(1)	Sales	of assets to a nonchar	ıtable exemp	t organi:	zation.					. 1b(1	)	No
(2)	Purch	ases of assets from a r	noncharitable	exempt	t organiz	ation				. 1b(2	)	No
(3)	Renta	al of facilities, equipmer	nt, or other a	ssets.						. 1b(3	)	No
(4)	Reım	bursement arrangemen	its							1b(4	)	No
(5)	Loans	or loan guarantees.								. 1b(5	)	No
(6)	Perfor	mance of services or m	embership o	r fundra	ısıng solı	icitations				1b(6	)	No
<b>c</b> Sha	ring of	facilities, equipment, n	nailing lists, o	other as	sets, or	paid employees.				. 1c		No
of t in a	he goo ny tran	ver to any of the above ds, other assets, or ser nsaction or sharing arra	vices given b	y the re	porting 1	foundation If the	foundati	on receive	d less than fair marke	et value		
(a) Line	No	(b) Amount involved	(c) Name of	noncharit	table exer	mpt organization	( <b>d</b> ) De	escription of	transfers, transactions, a	and sharing arr	angemer	nts
	_											
des	cribed	ndation directly or indire in section 501(c) of the omplete the following s	Code (other			•				. 🗆 Yes	<b>✓</b>	No
		(a) Name of organization	on		( b	) Type of organizati	on		(c) Description o	f relationship		
	of m	er penalties of perjury, ly knowledge and belief h preparer has any kno	, it is true, co									
Sign Here	-	*****				2019-02-15	\	*****		May the IRS return with the prep		- 1
		Signature of officer or t	rustee	П		Date	, , , , , , , , , , , , , , , , , , ,	Title		below (see instr )?	<b>✓</b> Yes	□ No
		Print/Type preparer's	name	Prepare	er's Sıgn	nature	Date		PT Check if self-	ΓIN		

Paid

P01323037 employed 🕨 🗌 MICHAEL D HARLOW 2018-11-15 **Preparer** Firm's name ▶ COHNREZNICK LLP Firm's EIN ▶22-1478099 **Use Only** Firm's address ► 7501 WISCONSIN AVENUE SUITE 400E Phone no (301) 652-9100 BETHESDA, MD 20814

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Р 2017-07-21 2018-06-11 4,784 69 SHS VNGRD S/TRM INVT GR ADML 135 00 SHS NXP SEMICONDUCTORS N V Ρ 2012-09-18 2017-08-14 4,708 02 SHS GENERAL ELECTRIC COMPANY D 2012-12-20 2017-10-10 2,224 71 SHS NVIDIA CORP D 2015-02-03 2017-10-10 14,346 89 SHS JP MORGAN GVT MMKT FUND Р 2016-11-16 2017-10-10 Ρ 156,038 47 SHS JP MORGAN GVT MMKT FUND 2017-11-16 2018-04-24 Р 15,572 63 SHS VNGRD S/TRM INVT GR ADML 2017-07-21 2017-09-26 Р 11,726 07 SHS VNGRD S/TRM INVT GR ADML 2017-07-21 2017-11-14 99 96 SHS VNGRD S/TRM INVT GR ADML Ρ 2017-08-01 2017-09-26 Р 2017-09-01 2017-09-26 215 25 SHS VNGRD S/TRM INVT GR ADML Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 50.000 51,196 -1,19615,196 3,229 11,967 111,232 146,735 8,957 419,615 202,338 375,140 14,347 14,347 0 156,038 0 156,038 166,627 166,627 0 125,000 125,469 -469 1,070 1,070 0 2,303 2,307 -4 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -1,19611,967 8,957 375,140 0 0 0 -469 0 -4

Form 990PF Part XV Line 1a - 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). MARTIN K ALLOY

STEVEN B ALLOY

MARJORIE P ALLOY

DARIS M CLIFTON

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BOYS AND GIRLS CLUB OF GREATER PC GENERAL SUPPORT 200,504 WASH 4103 BENNING ROAD

WASHINGTON, DC 20019			
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVENUESUITE 350N BETHESDA, MD 20814	PC	GENERAL SUPPORT	5,800
EASTER SEALS1420 SPRING STREET	PC	GENERAL SUPPORT	1,000

BETHESDA, MD 20814			
EASTER SEALS1420 SPRING STREET SILVER SPRING, MD 20910	PC	GENERAL SUPPORT	1,00

Total			222 208
SILVER SPRING, MD 20910			
EASTER SEALS1420 SPRING STREET	l PC	GENERAL SUPPORT	١, ١

Total			323,308
-------	--	--	---------

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

EMERGING SCHOLARS PROGRAM 2009 14TH STREET ARLINGTON, VA 22201	PC	GENERAL SUPPORT	2,500
FLINT HILL SCHOOL	PC	GENERAL SUPPORT	20,000

3320 JERMANTOWN RD OAKTON, VA 221242405			,
FRIENDSHIP CIRCLE	PC	GENERAL SUPPORT	į

FRIENDSHIP CIRCLE	PC	GENERAL SUPPORT	500
11621 SEVEN LOCKS ROAD			
POTOMAC, MD 208543201			

<b>-</b>			222 200
11621 SEVEN LOCKS ROAD POTOMAC, MD 208543201			
FRIENDSHIP CIRCLE	PC	GENERAL SUPPORT	] 500

За

Total	 	 323.308
POTOMAC, MD 208543201		
11621 SEVEN LOCKS ROAD		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GEORGE MASON UNIVERSITY PC **EDUCATION** 11,500 FOUNDATION - DANCE 4400 UNIVERSITY DR MS 3D4 FAIRFAX, VA 22030 าก

JOEY PIZZANO FUND 1019 CAMERON STREET ALEXANDRIA, VA 22314	PC	GENERAL SUPPORT	200
LIGHT THE NIGHT	PC	GENERAL SUPPORT	200

ALLANDRIA, VA 22314			
LIGHT THE NIGHT 3 INTERNATIONAL DRIVE RYE BROOK, NY 10573	PC	GENERAL SUPPORT	200

	LIGHT THE NIGHT	PC	GENERAL SUPPORT	20
	3 INTERNATIONAL DRIVE			
l	RYE BROOK, NY 10573			

323,308

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NORTHERN VIRGINIA FAMILY SERVICES PC GENERAL SUPPORT 30,000 10455 WHITE GRANITE DR 100 OAKTON, VA 22124

NORTHERN VIRGINIA FAMILY SERVICES 10455 WHITE GRANITE DRIVE SUITE 100 CHANTILLY, VA 22124	PC	GENERAL SUPPORT	5,000
NORTHWESTERN UNIVERSITY 10 ROCKEFELLER PLAZA 800 NEW YORK NY 10111	PC	EDUCATION	104

,			
NORTHWESTERN UNIVERSITY 10 ROCKEFELLER PLAZA 800 NEW YORK, NY 10111	PC	EDUCATION	104
Total	 		323,308

За

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RAVEL DANCE COMPANY PC **EDUCATION** 1,000 1488 NORTH POINT VILLAGE CENTER

DECTON VA 20104

RESTON, VA 20194			
SECOND STORYPO BOX 694 DUNN LORING, VA 22027	PC	GENERAL SUPPORT	10,000
SMITHSONIAN INSTITUTE 1300 CONSTITUTION AVENUE NW MRC 619 ROOM 5104	PC	GENERAL SUPPORT	20,000

ROOM 5104 WASHINGTON, DC 20560			
1300 CONSTITUTION AVENUE NW MRC		SEREIGIE SOIT ORT	20,000

	WASHINGTON, DC 20560		
	ROOM 5104		
	619		
Ш	1300 CONSTITUTION AVENUE NW MKC		

323,308

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

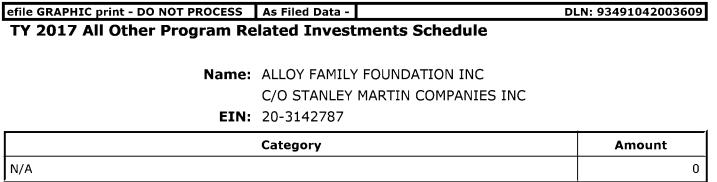
I		20	05115041 01100005	10.000
I	TEMPLE RODEF SHALOM 2100 WESTMORELAND STREET OAKTON, VA 22124	PC	GENERAL SUPPORT	5,000

WOMEN GIVING BACK20 EXPORT DR STERLING, VA 201644421	PC	GENERAL SUPPORT	10,000
STERLING, VA 201644421			

STERLING, VA 201644421		,
Total	 	 323,308

3a

efile GRAPHIC print - DO NOT PRO	CESS	As Filed D	ata -	DL	N: 93491042003609
TY 2017 Accounting Fee:	s Sche	edule			_
N	Name:	ALLOY FA	MILY FOUNDATION	N INC	
C/O STANLEY MARTIN COMPANIES INC					
	EIN:	20-3142	787		
Accounting Fees Schedule					
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES		7,750	3,875	0	3,875



## **TY 2017 Investments Corporate Stock Schedule**

Name: ALLOY FAMILY FOUNDATION INC

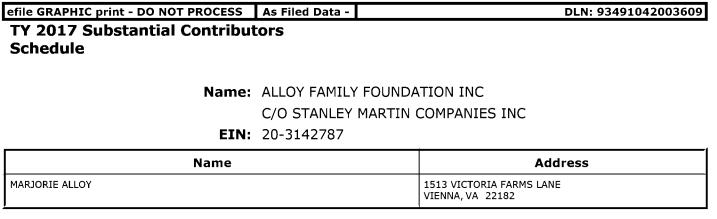
C/O STANLEY MARTIN COMPANIES INC

**EIN:** 20-3142787

Name of Stock	End of Year Book Value	End of Year Fair Market Value
зм со	33,458	37,939
ACCENTURE PLC IRELAND SHARES CLASS A	118,338	163,332
CISCO SYSTEMS INC	188,777	273,024
CUMMINS INC	207,934	199,467
DODGE & COX (DODIX)	335,027	327,628
FEDERATED INSTL TR HIGH YIELD BOND FUND	193,311	187,323
FEDERATED TOTAL RETURN SERS INC ULTRASHORT BD FD	512,138	511,016
I SHARES CORE MSCI - EAFE ETF	142,430	134,837
I SHARES CORE MSCI - EMERGING MARKETS ETF	503,421	544,230
ISHARES RUSSELL 1000 GROWTH FUND (IWF)	1,021,567	1,203,697
JOHNSON & JOHNSON	170,996	183,929
JP MORGAN US GOV MONEY MARKET FUND	157,130	157,130
JPMORGAN CHASE & CO	50,214	62,832
LORD ABBETT INVT TR FLOATING RATE FD	191,000	188,388
LORD ABBETT INVESTMENT TR SHORT DURATION INCOME FD	419,771	407,351
MICROSOFT CORP	241,570	208,529
MONDELEZ INTL INC	30,537	30,330
PEPSICO INCORPORATED	42,729	46,046
PIMCO FDS INCOME FD	482,964	476,935
PIMCO SHORT TERM FD	511,991	515,067
PIONEER SER TR X MULTI-ASSET ULTRASHORT INCOME FUND	513,258	512,233
PGIM SHORT-TERM CORP BOND CL Z	414,125	403,334
RAYTHEON COMPANY	42,839	54,874
UNION PACIFIC CORP	32,870	44,822
UNITEDHEALTH GROUP INC	287,675	442,474
VANGUARD (VFSUX)	993,419	973,282

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491042003609
TY 2017 Other Decreases School	edule		
Name:	ALLOY FAMILY	FOUNDATION INC	
	C/O STANLEY	MARTIN COMPANIES INC	
EIN:	20-3142787		
De	escription		Amount
OTHER DECREASE NOT INCLUDED IN LI	NE 2		588,109

efile GRAPHIC print - DO NOT PRO	CESS As Filed Data	1 -	DLN	N: 93491042003609		
<b>TY 2017 Other Professio</b>	nal Fees Schedu	ıle				
Name: ALLOY FAMILY FOUNDATION INC  C/O STANLEY MARTIN COMPANIES INC  EIN: 20-3142787						
Category Amount Net Investment Adjusted Net Disbursements Income Income Purposes						
INVESTMENT MANAGEMENT FEES	23,451	23,451	0	0		



efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLN	l: 93491042003609	
TY 2017 Taxes Schedule				_	
Name: ALLOY FAMILY FOUNDATION INC					
C/O STANLEY MARTIN COMPANIES INC					
EI	<b>IN:</b> 20-3142787	,			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FEDERAL TAXES	37,025	0	0	0	

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -				DLN: 93491042003609	
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	about Schedule B (F	Form 990, 990-EZ, or 990 Form 990, 990-EZ, or 990-F <u>ww <i>I</i>rs gov/form990</u>		ons is at	2017	
Name of the organization ALLOY FAMILY FOUNDATION	N INC				Employer id	lentification number	
C/O STANLEY MARTIN COM Organization type (check					20-3142787		
	•						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)(	) (enter number) o	organization				
	4947(a)(	1) nonexempt chai	ritable trust <b>not</b> treated a	s a private founda	tion		
	☐ 527 politi	cal organization					
Form 990-PF	<b>✓</b> 501(c)(3)	exempt private fo	undation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3)	501(c)(3) taxable private foundation					
			PF that received, during somplete Parts I and II S				
Special Rules							
For an organization under sections 50 received from any	9(a)(1) and 170(b) one contributor, d	(1)(A)(vi), that che uring the year, total	g Form 990 or 990-EZ th ocked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that	
during the year, to	otal contributions of	f more than \$1,000	or (10) filing Form 990 of the control of the contr	, charitable, scient			
during the year, co If this box is check purpose Don't coi	ontributions <i>exclus</i> ked, enter here the mplete any of the p	eively for religious, total contributions parts unless the <b>G</b>	or (10) filing Form 990 of charitable, etc., purpose is that were received during eneral Rule applies to the or more during the year	s, but no such con ng the year for an ns organization be	tributions tota exclusively re cause it recei	aled more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>	
Caution. An organization 990-EZ, or 990-PF), but it Form 990-EZ or on its For 990-EZ, or 990-PF)	: <b>must</b> answer "No	o" on Part IV, line 2	, of its Form 990, or che	ck the box on line	H of its		
For Paperwork Reduction Ac for Form 990, 990-EZ, or 990-		ructions	Cat No 30613X	Schedu	ıle B (Form 990	, 990-EZ, or 990-PF) (2017)	

Name of organization Employer identification number ALLOY FAMILY FOUNDATION INC 20-3142787 C/O STANLEY MARTIN COMPANIES INC Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (a) (d) (b) Type of contribution No. **Total contributions** Name, address, and ZIP + 4 Person STEVEN B MARJORIE ALLOY **Payroll** 1513 VICTORIA FARMS LANE \$ 496,992 Noncash VIENNA, VA 22182 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (a) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2017)		Page <b>3</b>		
Name of organiz		Employer identification number			
C/O STANLEY MAR	RTIN COMPANIES INC		20-3142787		
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		
1	2,000 SHS ISHARES RUSSELL 1000 GROWTH FUND (IWF)	\$ 249,433	2017-09-21		
(a) (b) No. from Part I Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received		
1	1,132 526 SHS ISHARES RUSSELL 1000 GROWTH FUND (IWF)	\$ 141,243	2017-09-21		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
1	852 474 SHS ISHARES RUSSELL 1000 GROWTH FUND (IWF)	\$ 106,316	2017-09-21		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)		

Schedule B (Form	990, 990-EZ, or 990-PF) (2017)		Page <b>4</b>
Name of organization ALLOY FAMILY FOUNDATION INC C/O STANLEY MARTIN COMPANIES INC			Employer identification number 20-3142787
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) throu of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh <b>(e) and</b> the following line entry. For table, etc., contributions of <b>\$1,000 or less</b> for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
(a)	(h) Durnoso of gift	(c) Use of gift	(d) Description of how gift is hold
No. from Part I	(b) Purpose of gift	(c) ose or girt	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(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		
			Schedule B (Form 990, 990-EZ, or 990-PF) (2017)