2949125100911

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. Department of the Treasury

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

A Employer identification number S4 - 1874 552	For calendar year 2017 or tax year beginning JUI	1, 2017	, and ending	JUN 30, 2018	
To describe the Policy of them, state or province, country, and Ziler of foreign postal code VIRGINIA BRACH. V A 2 3 4 5 1 Check all that apply: If noted the part of regimentation: Additional teturn	Name of foundation			A Employer identification	number
1.6 4.0 TETHER KEEP				54-1874552	
City of two, state or province, country, and ZP or foreign postal code VTRGINIA BRACH, VA 23451 6 Check all that apply: Initial return Amendment return of a former public charry	·	address)	Room/suite		0.55
UTIGINIA BRACH, VA 23451 Check all that spply: Initial teturn Initial return of a former public charity Amended return				1.	
Check all that apply:		postal code		C If exemption application is p	ending, check here
Final return Amended return Amende		Initial return of a f	former public charity	D 1 Foreign organizations	check here
Address change			ormer public charity	1. Torcigit organizations	s, oneck nore
Section 4947(3)(1) nonexample charitable must Other taxable private foundation Fig. Far market value of all assets at end of year J. Accounting method: Cach	Address change	Name change		2. Foreign organizations me check here and attach co	eting the 85% test, mputation
Section 4947(a)(1) nonexempt charitable trust Other taxable private boundation File foundation	H Check type of organization: X Section 501(c)(3) e	xempt private foundation	UY	E If private foundation sta	tus was terminated
Control section 397(b)(1)(B), check here Part I, column (d) must be on cash basis.) (d) Revenue and Expense (d) Re			ation		
Search S	1 -	• —	Accrual	I .	
Part	, , , , , ,		ie)	under section 507(b)(1)	(B), check here
The total of amounts in columns (a) columns (a) (c) and (o) many not obtained (a) (o) and the source of columns (a) (o) and the source of colu	Part Analysis of Revenue and Expenses			(a) Adverted not	(d) Dishursements
Content Cont	(The total of amounts in columns (b), (c), and (d) may not	expenses per books		income	for charnable purposes
Second continued and interest from securities Second continued and interest Second continued and interes		396,440.			
## Dividends and interest from securities ## A Gross rents ## A Her gain of (loses) from sale of assets not on line 10 ## A Her gain of (loses) ## A Her gain on line 10 ## A Her gain on the come of the sale of assets not on line 10 ## A Her gain on the come of sale of assets and sale section. ## A Her gain on the come of the sale of assets and sale section. ## A Her gain on the come of the sale of assets and sale section. ## A Her gain on the come	Interest on savings and temporary	20	W 16 M MM V		CONTRACTOR 1
5a Gross rents b Net rental income or (tons) 6a Not gain or (tons) from sale of assests not on line 10				 	
Day Net rental micromo or (loss) 38 Nat Sun or (loss) 1 1 1 1 1 1 1 1 1		0,000	0,030.		3 5 8 N
Description of the first content of the first con	b Netrental income or (loss)	M M 65 1 1 1 1	CONTRACTOR	N W. N. Y.	
8 Net short-term capital gain 9 Income modifications 10 Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Cempensation of officers, descious, functions, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal tees 15 Pension plans, employee benefits 16a Legal tees 16 Accounting fees 17 Interest 18 Taxes 17 Interest 18 Taxes 17 Interest 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and, meetings 22 Printing and, publications 23 Other propessions of surface, and the site of the		38,131.			
8 Net short-term capital gain 9 Income modifications 10 Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Cempensation of officers, descious, functions, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal tees 15 Pension plans, employee benefits 16a Legal tees 16 Accounting fees 17 Interest 18 Taxes 17 Interest 18 Taxes 17 Interest 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and, meetings 22 Printing and, publications 23 Other propessions of surface, and the site of the	b Gross sales price for all 813,676.				<u> </u>
9 Income modifications 10 and aboverness	~~!	A \ "" \ "" \ ""		<u> </u>	<u> </u>
10a and slovemores	o Net Short-term capital yalli				*
b Less Cost of goods sold e Gross profit or (loss) 11 Other more 12 Total. Add lines 1 through 11 443,249. 46,809. 13 Compensation of officers, directors, guisties, etc 10,000. 2,400. 7,600. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Accounting fees 15 Accounting fees 16 Accounting fees 17 Interest 18 Taxes 18 Taxes 18 Taxes 19 Printing and publication of officers, directors, guisties, etc 10,000. 2,400. 7,600. 1,250. 1,250. 1,250. 1,250. 1,250. 1,250. 1,250. 0 Occupancy 18 Taxes 19 Depreciation and depletion 20 Occupancy 19 Trave, conferences, and, meetings 21 Trave, conferences, and, meetings 22 Printing and publication of the conference of the confer	Gross sales less returns	44 9 44			/ % * ****
e Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 16 Accounting fees 17 Interest 18 Taxes 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and, meetings. 22 Printing and publications 23 Other expenses 24 Total expenses and discursements. 25 Contributions—prints grants and additions—publications 26 Contributions—prints grants and additions—publications 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and discursements. 28 Descriptions—prints grants—publications—publicat				V 22 20 20 20 20 20 20 20 20 20 20 20 20	W WW V 100V W
12 Total Add lines 1 through 11 443,249			(A) (A) (A) (A) (A) (A) (A) (A)	***	N 40 N 10' W
13 Compensation of officers, directors, trustees, etc 10,000. 2,400. 7,600. 14 Other employee salaries and wages 15 Pension plans, employee benefits 15 Pension plans, employee benefits 16 Legal fees b. Accounting fees STMT 3 2,500. 1,250. 1,250. 15 Tother professional fees STMT 4 3,801. 3,586. 215. 17 Interest 18 Taxes STMT 5 119. 25. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 10 10 10 10 10 10 10 1	11 Other income				
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees C Other professional fees STMT 3 2,500. 1,250. 1,2					
15 Pension plans, employee benefits 16a Legal fees b Accounting fees STMT 3 2,500. 1,250. 1,250. c Other professional fees STMT 4 3,801. 3,586. 215. 17 Interest 18 Taxes STMT 5 119. 25. 0. Depreciation and depletion Occupancy 21 Travel_conferences, and_meetings 22 Printing and_publications 23 Other expenses 24 Total operating and_administrative_8 expenses Add lines 13 through 23 Other expenses Add lines 13 through 23 Other expenses Add lines 13 through 23 Other expenses Add lines 24 and 25 25 Contributions_grifts_griats_paid 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0·) 39,548.		10,000.	2,400.		7,600.
16a Legal fees b Accounting fees C Other professional fees STMT 3 2,500. 1,250. 1,250. c Other professional fees STMT 4 3,801. 3,586. 215. 17 Interest 18 Taxes STMT 5 119. 25. 0. 19 Depreciation and depletion C Occupancy 21 Travel_conferences_and_meetings 22 Printing and publications of the professional depletion or expenses Add lines 13 through 23 or expenses Add lines 24 and 25 or total expenses Add lines 25 or total expenses Add li	1	-			
b Accounting fees STMT 3 2,500. 1,250. 1,250. 215. c Other professional fees STMT 4 3,801. 3,586. 215. 17 Interest 18 Taxes STMT 5 119. 25. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publication with the standard administrative sexpenses Add lines 13 through 23 occupancy 23 Other expenses 24 Total operating and administrative sexpenses Add lines 13 through 23 occupancy 25 Contributions, grifts, grants paid 26 92,500. 26 Total expenses And lines 13 through 23 92,500. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) b Net investment income (if negative, enter -0-) 39,548.	ام ا			 	
c Other professional fees STMT 4 3,801. 3,586. 215. 17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel_conferences_and_meetings 22 Printing and_publications		2,500.	1,250.		1,250.
Interest It Taxes It	c Other professional fees STMT 4	3,801.	3,586.		215.
22 Printing and publications 23 Other expenses 24 Total loperating and administrative of expenses: Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.					
22 Printing and publications 23 Other expenses 24 Total loperating and administrative of expenses: Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.	18 Taxes STMT 5	119.	25.		
22 Printing and publications 23 Other expenses 24 Total loperating and administrative of expenses: Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.	19 Depreciation and depletion				
22 Printing and publications 23 Other expenses 24 Total loperating and administrative of expenses: Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.	20 Occupancy				
23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 (7) 25 Contributions, gritis, grants paid. 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.					
24 Total operating and administrative expenses: Add lines 13 through 23 (7) 25 Contributions, gifts, grants paid 92,500. 26 Total expenses and disbursements. Add lines 24 and 25 108,920. 7,261. 92,500. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.					
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 27 Subtract line 26 from line 12: 334,329. 39,548.	= 24 Total operating and administrative o				
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 27 Subtract line 26 from line 12: 334,329. 39,548.	expenses Add lines 13 through 23				
Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.	25 Contiguations yints yints part	92,500.			92,500.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 39,548.		100 020	7 261		101 505
b Net investment income (if negative, enter -0-)					101,363.
b Net investment income (if negative, enter -0-)		and the second s			
			39,548.		
	C Adjusted net income (if negative, enter -0-)				

Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/fund balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		Γ	
	(must agree with end-of-year figure reported on prior year's return)	1	\	285,417.
2	Enter amount from Part I, line 27a	2		334,329.
3	Other increases not included in line 2 (itemize)	3	Π	0.
4	Add lines 1, 2, and 3	4	Π	619,746.
5	Decreases not included in line 2 (itemize)	5	Π	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	\prod	619,746.

285,417.

Form 990-PF (2017)

619,746

Pai	rt IV Capital Gains a	and Losses for Tax on In	vestment	Income					
•		the kind(s) of property sold (for exa arehouse; or common stock, 200 shs		ite,	(b)	How acquir - Purchase - Donation	red (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a E	PUBLICLY TRADE	SECURITIES			Ť	P			
ь Е	UBLICLY TRADE	O SECURITIES				P			
C									
<u>d</u>									
е			·		<u>L</u> ,				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			((h) Gain or (lo (e) plus (f) mini	us (g))
<u>a</u>	294,307.			280,52					13,787.
<u>b</u>	519,369.			495,02	5.				24,344.
_ <u>c</u>					\dashv				
<u>d</u>									
<u>e</u>	romplete only for ecosts observe	and an advance (b) and a second but	L	10/04/05					
	Uniplete unity for assets showin	g gain in column (h) and owned by t					(I) (Gains (Col. (h) g k), but not less t	han -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any				Losses (from co	ıl. (h))
<u>a</u>					_				13,787. 24,344.
<u>b</u>									24,344.
C									
<u>d</u>				····					
е			l		-				
2 Ca	pital gain net income or (net ca	pital loss) { If gain, also enter of the lift (loss), enter of the lif	r in Part I, line - in Part I, line	7 : 7	}	2			38,131.
	et short-term capital gain or (los gain, also enter in Part I, line 8,	es) as defined in sections 1222(5) an	ıd (6):		٦				
lf ((loss), enter -0- in Part I, line 8	• •			別	3		N/	A
Par	t V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net I	nve	stment	Incon	ne	
	ptional use by domestic private tion 4940(d)(2) applies, leave th	foundations subject to the section 4	1940(a) tax on	net investment ind	come.)			
		ion 4942 tax on the distributable am	ount of any ye	ar in the base peri	od?				Yes X No
		y under section 4940(e). Do not com							
1 Er		ach column for each year, see the in	structions bef	ore making any en	itries.				
Cal	(a) Base period years endar year (or tax year beginnir	ng in) Adjusted qualifying dis	tributions	Net value of no	(c) nchari	table-use	assets	Dıs (col. (b)	(d) tribution ratio divided by col. (c))
	2016	5	3,208.			310,	272.		.171488
	2015		7,315.			248,			.190120
	2014		6,800.			314,			.085126
	2013		0,069.			348,	<u>746.</u>		.114895
	2012	2	7,001.			287,	<u> 293.</u>		.093984
	tal of line 1, column (d)							2	.655613
		5-year base period - divide the total o	on line 2 by 5.0), or by the numbe	r of ye	ears			
the	e foundation has been in existen	ice if less than 5 years						3	.131123
4 En	ter the net value of noncharitabl	le-use assets for 2017 from Part X, I	іпе 5	,				4	424,939.
5 Mı	ultiply line 4 by line 3							5	55,719.
• ,,,,	maply mile 1 by mile 0								33,713.
6 En	ter 1% of net investment incom	e (1% of Part I, line 27b)						_6	395 <u>.</u>
7 Ad	d lines 5 and 6							7	56,114.
8 En	ter qualifying distributions from	Part XII, line 4						8	101,565.
	-	line 7, check the box in Part VI, line	1b, and comp	lete that part using	ı a 1%	tax rate.			
	e the Part VI instructions.		,		,				
723521	01-03-18								Form 990-PF (2017)

723531 01-03-18

P	art 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?	1		
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► N/A			
14		481	<u>-09</u>	<u>55</u>
	Located at ► 1640 TETHER KEEP, VIRGINIA BRACH, VA ZIP+4 ►2:	<u> 3451</u>		
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_	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	<u> </u>	-264	*****
PE	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Tc 3		-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1 2	Yes	No
18	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?		;	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		· N	
	a disqualified person?		. *	3
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		» {	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No		` (
	(5) Transfer any income or assets to a disqualified person (or make any of either available		<u>,</u>	
	for the benefit or use of a disqualified person)?		4 .	317
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		X	
	If the foundation agreed to make a grant to or to employ the official for a period after		59°.	
	termination of government service, if terminating within 90 days.) Yes X No		1	100
	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		á	X
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	4	Δ
_	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	Å	.23	X
9	before the first day of the tax year beginning in 2017? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c	8.	
_	defined in section 4942(j)(3) or 4942(j)(5)):		170	
	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			
٠	before 2017?			
	If "Yes," list the years			
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			A.
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b	&X.	~ "%" "
c	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			. * . 1
	▶ <u> </u>	13		
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	3. 3		
	during the year?			
b	of "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			(4)
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b	- Papari Edition and	ATTHE THE SHE
4a	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 jeopardy before the first day of the tax year beginning in 2017?	4b		X
		rm 990	/ DE	

Part VII-B Statements Regarding Activities for which F	-orili 4/20 May be ne	equired (continu	ıed)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s 🗓 No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire			
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	\$?	Ye	s X No	*
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			*
4945(d)(4)(A)? See instructions		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or fo			
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance? See instr	ructions		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	from the tax because it maintai	ned		
expenditure responsibility for the grant?		「/A	s 🔲 No	27 To 18 18 18 18 18 18 18 18 18 18 18 18 18
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	☐ Y€	s X No	
b if "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7 b
Part VIII Information About Officers, Directors, Trust		agers, Highly		<u> </u>
Paid Employees, and Contractors	,			
1 List all officers, directors, trustees, and foundation managers and t	their compensation.		 -	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plar and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
RICHARD GALLIFORD	VICE PRESIDEN	T		
3283 ATLANTIC CIRCLE	7			
NAPLES, FL 34119	4.00	4,000.	0	. 0.
CHRISTINE WILLIAMSON	PRESIDENT			
1640 TETHER KEEP	7			
VA BEACH, VA 23451	2.00	6,000.	0	. 0.
	7			ł
	1			İ
	7	1		
	1		_	
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none, (enter "NONE."		
(-) Name and address of each ampleyed paid mare than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit pla	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
	7]		
				_
	7			1
· · · · · · · · · · · · · · · · · · ·				
	1			
	· 			
	1			
		 		1
	┪		ļ	
Total number of other employees paid over \$50,000		L		1 0
Total manuscrat original combinates hair naci manatan			Fni	m 990-PF (2017)

Form 990-PF (2017) GALLIFORD-MULARD FOUNDATION	54-1874	552 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		_
T-t-Loumber of others recovered over \$50,000 for professional courses	<u> </u>	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information	tion such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	non such as the	Expenses
1 N/A		
2		
3		
		···
4		
Part X-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
1 N/A		
2		
-		
All other program-related investments. See instructions.		
3		
		
Total. Add lines 1 through 3	•	0.
	For	n 990-PF (2017)

Part X Minimum Investment Return (All domestic foundations must complete this	s part Foreign foundations, see	e instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	,	
a Average monthly fair market value of securities	1a ·	401,995.
b Average of monthly cash balances	1b	29,415.
c Fair market value of all other assets	10	
d Total (add lines 1a, b, and c)	1d	431,410.
e Reduction claimed for blockage or other factors reported on lines 1a and	*	
1c (attach detailed explanation)	0.1.1	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	431,410.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,471.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	424,939.
6 Minimum investment return. Enter 5% of line 5	6	21,247.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope	rating foundations and certain	
foreign organizations, check here and do not complete this part.)		01 015
1 Minimum investment return from Part X, line 6		21,247.
2a Tax on investment income for 2017 from Part VI, line 5	395.	
b Income tax for 2017. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	395.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	20,852.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	20,852.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		20,852.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	101,565.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:	3	
a Suitability test (prior IRS approval required)	3a **	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	101,565.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	395.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	101,170.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the foundation qualifies for th	
4940(e) reduction of tax in those years.	,	

Form **990-PF** (2017)

	(8)	(b)	(c)	(d)
	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI, line 7			*	20,852.
2 Undistributed income if any, as of the end of 2017			*	
a Enter amount for 2016 only	* * * * * * * * * * * * * * * * * * * *	<u> </u>	0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 12,636 b From 2013 22,894 c From 2014 11,104 d From 2015 35,242				
e From 2016 37,882				
f Total of lines 3a through e	119,758.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 101,565				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				20,852.
e Remaining amount distributed out of corpus	80,713.			
Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a), the same amount must be shown in column (a). Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	200,471.			
b Prior years' undistributed income. Subtract	200, 111	· · · · · · · · · · · · · · · · · · ·		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see 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.			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7	12,636.			
	12,030.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	187,835.			
D Analysis of line 9:				
a Excess from 2013 22,894.				
b Excess from 2014 11, 104				
c Excess from 2015 35, 242				
d Excess from 2016 37,882				
e Excess from 2017 80,713.				
erxcess nom zorz i con z z z z				

Form 990-PF (2017) GALLIFO	RD-MULARD F	OUNDATION		54-18	74552 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo b Check box to indicate whether the found	•	•	un nantina	7 40.40(1)(2) 22 7 4(140(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig roundation described	Prior 3 years	4942(j)(3) or 49	942(j)(5) I
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for	,-,	(0)	(0)-0-0	(4//-	(4)/144
each year listed	Ì				
b 85% of line 2a			 	 	
c Qualifying distributions from Part XII,			<u> </u>	1	
line 4 for each year listed			/		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			1		
for active conduct of exempt activities.			1		
Subtract line 2d from line 2c			4		
3 Complete 3a, b, or c for the alternative test relied upon:		/			
a "Assets" alternative test - enter:					1
(1) Value of all assets		/- -			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					_
b "Endowment" alternative test - enter	_				
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	/				
(1) Total support other than gross	1		1		
investment income (interest,	/		1	1	
dividends, rents, payments on securities loans (section	/	ļ	1		
512(a)(5)), or royalties)			<u> </u>		
(2) Support from general public and 5 or more exempt	/			1	
organizations as provided in					1
section 4942(j)(3)(B)(III)			 	 	
(3) Largest amount of support from					
an exempt organization (4) Gross investment income	 		 	+	
Part XV Supplementary Info	rmation (Complet	e this part only	if the foundation	had \$5.000 or mor	e in assets
at any time during the				, , , , , , , , , , , , , , , , , , ,	
1 Information Regarding Foundatio	n Managers:				
List any managers of the foundation who year (but only if they have contributed in	o have contributed more t		ributions received by the	foundation before the clos	e of any tax
	1016 (11a11 \$5,000). (566 Si	5011011 307 (d)(Z).)			
SEE STATEMENT 7			/		
 List any managers of the foundation who other entity) of which the foundation has 			or an equally large porti	on of the ownership of a pa	rtnership or
NONE	•				
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	odrams:		
Check here X if the foundation of the foundation makes gifts, grants, etc.,	nly makes contributions t	o preselected charitable	organizations and does	not accept unsolicited reque	ests for funds. If
a The name, address, and telephone numb					
a mo namo, adoroso, and tolephone name	oor or ornain address or ar	c person to whom applic	auono snoula de addres	seu.	
b. The form in which applications about dis	a sub-subtral and rate was		handa araba		
b The form in which applications should b	e submitted and informat	ion and materials they s	noula incluae:		
c Any submission deadlines;					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kınds of institutions, or	other factors:	
723601 01-03-18					Form 990-PF (2017)

Form 990-PF (2017)

r gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exemp
Program service revenue:	code	Amount	code	Amount	Tunction income
			+		
			-		
			+		
	_				
Fees and contracts from government agencies	- -		_		
Membership dues and assessments	+	 			
nterest on savings and temporary cash	<u> </u>				<u> </u>
nvestments			14	28.	
Dividends and interest from securities			14	8,650.	
let rental income or (loss) from real estate:	100 3 3 4 8 1		1/8%		
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
roperty					-
ther investment income		"	_		
ain or (loss) from sales of assets other					
nan inventory			18	38,131.	
et income or (loss) from special events			+		
ross profit or (loss) from sales of inventory					
ther revenue:		 			
	l l	·			
					1
Subtotal. Add columns (b), (d), and (e)	* * * *	0	. 3	46,809.	
otal. Add line 12, columns (b), (d), and (e)					46,8
worksheet in line 13 instructions to verify calculation	s.)			_	
		nolishment of F	xempt	Purposes	
rt XVI-B Relationship of Activitie		iphoninent of E	zompt		
rt XVI-B Relationship of Activitie	- To the Accom				
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of
e No. Explain below how each activity for which	ıncome ıs reported ın				mplishment of

723621 01-03-18

(other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is Yes; complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (4) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement. N/A 12 Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described	Form 990		Information Re	FORD-MULA				ons an	d Relations		–1874552 ncharitable	Pa	ge 13
(5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Sharing of Scienties, equipment, mailing lists, other assets, or paid employees (8) It is 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 goven 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. (a) Name of noncharitable exempt organization (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement, show in section 501(c) (other than section of repaire (other than supplye) is based on all internation of which prepaire has any knowledge after than the section of repaire (other than supplye) is based on all internation of which prepaire has any knowledge after than the section of repaire (other than supplye) is based on all internation of which prepaire has any knowledge after than the section of repaire (other than supplye) is based on all internation of which prepaire has any kno	(ott a Tra (1) (2) b Ott (1) (2) (3)	her than Insfers Cash Other ner tran Sales Purch Renta	ganization directly or indi- n section 501(c)(3) organ from the reporting found: assets sactions: of assets to a noncharita nases of assets from a no il of facilities, equipment,	rectly engage in any inzations) or in sectic ation to a noncharita ble exempt organiza ncharitable exempt o or other assets	on 527, relatini ble exempt or tion	g to poir	tical organ		n described in sec	tion 501(c)	1a(1) 1a(2) 1b(1) 1b(2) 1b(3)		X X X X X
Index penalties of paraux), I declare that I have examined this return, including accompanying schedules and statements, and to the beat of my knowledge scheme the following schedule. Under penalties of paraux, I declare that I have examined this return, including accompanying schedules and statements, and to the beat of my knowledge scheme that I have examined this return, including accompanying schedules and statements, and to the beat of my knowledge scheme that I have examined this return, including accompanying schedules and statements, and to the beat of my knowledge scheme that I have examined this return, including accompanying schedules and statements, and to the beat of my knowledge scheme that the scheme that it is an and believely is stiff, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge scheme that the scheme that is self-employed scheme that the scheme that is self-employed preparer is name THERESA E. MORRIS, THERESA E. MORRIS, 08/23/18 Proparer Print's penalties from the preparer is suggested to the propagation of the propagation of preparer is suggested. Print's penalties from the propagation of preparer is suggested. Print's penalties from the propagation of preparer is suggested. Print's penalties from the propagation of preparer is suggested. Print's penalties from the propagation of preparer is suggested. Print's penalties from the propagation of preparer is suggested. Print's penalties from the print's penalties	(5) (6) c Sha d If the	Loans Perfo aring of the ansv services	s or loan guarantees rmance of services or me facilities, equipment, ma wer to any of the above is s given by the reporting fo) the value of the goods,	embership or fundrai illing lists, other asse "Yes," complete the oundation. If the foul other assets, or serv	ets, or paid em following sche ndation receiv vices received.	nployees edule. Co red less t	olumn (b) than fair m	arket valu	e in any transactio	n or sharing arrang	1b(5) 1b(6) 1c e goods, other ass gement, show in	sets,	X X X
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Why this if it is a secure of the preyor, I declare that I have examined this refurn, including accompanying schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and behingst in the following schedules and statements, and to the beat of my knowledge and statements. Sign If "THERESA E. MORRIS" (SPECRETARY The following schedules and statements, and to the beat of my knowledge and statements. Sign If "The following schedules and statements, and to the beat of my knowledge and statements. Sign If "The following schedules and statements, and to the beat of my knowledge and statements. Sign If "The following schedules and statements, and to the beat of m	(a) Line n	<u> </u>	(b) Amount involved	(c) Name o		e exemp	t organizat	ion	(d) Description	on of transfers, transac	tions, and sharing are	angemer	nts
(a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and beliefet is title, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge SECRETARY SECRETARY Signature of officer or trustee Date Title	ın s	section	501(c) (other than sectio	n 501(c)(3)) or ın se		e or more	e tax-exem	pt organiz	zations described		Yes	[X	No
N/A Sign Here Signature of officer or trustee Print/Type preparer's name THERESA E. MORRIS, CPA THERESA E. MORRIS Preparer Firm's name DIXON HUGHES GOODMAN LLP Title There Signature Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief at its tiple, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge SECRETARY Title Print/Type preparer's name Preparer's signature Date Check If PTIN Self- employed PO1228333 Preparer Firm's name DIXON HUGHES GOODMAN LLP Firm's EIN ▶ 56-0747981	<u>b lf"</u>	Yes," co											
Sign Here Under penalties of perjury, I dectare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and beliefalt is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below? See instruction of officer or trustee Signature of officer or trustee Date Title				janization		<u> </u>	pe of orga	nızatıon		(c) Description of	relationship		
Sign Here and believe to style, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer or trustee Signature Signatu			N/A			+-							
Sign Here and believe to style, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer or trustee Signature Signatu						┼─							
Sign Here and believe to style, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer or trustee Signature Signatu						+-							
Sign Here and believe to style, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer or trustee Signature Signatu						+				·			
THERESA E. MORRIS, CPA CPA THERESA E. MORRIS O8/23/18 Preparer Firm's name ▶ DIXON HUGHES GOODMAN LLP Firm's EIN ▶ 56-0747981		and be	lief pt is true, correct, and corr	plete Declaration of pre		taxpayer)	8/3/		SECRE	has any knowledge	return with the	9 See ins	er
1 N M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1	Prepa	arer	Print/Type preparer's na THERESA E. CPA	MORRIS,	THERES	agnature	MOR	RIS	Date	self- employed	P01228		

723622 01-03-1

Firm's address > 440 MONTICELLO AVE, SUITE 1400 NORFOLK, VA 23510

Phone no. (757) 624-5100 Form **990-PF** (2017)

3 Grants and Contributions Paid During the Y	ear (Continuation)	,		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
APEL CHILDREN & EDUCATION FOUNDATION	NONE	PC	TO HELP MAKE A	
305 EXCHANGE AVENUE			DIFFERENC IN THE LIVES	
IAPLES, FL 34108	ļ <u> </u>		OF CHILDREN	25,00
ECOVERY FOR LIFE	NONE	₽C	SAFE PLACES AND THE	
28 NORTH LYNNHAVEN ROAD #117		Į.	VARIOUS TOOLS NEEDED	
IRGINIA BEACH, VA 23452			FOR RECOVERY FROM	
			ADDICTION, ONE FAMILY AT A TIME.	10,00
	 		11 11 11 11 11 11 11 11 11 11 11 11 11	
]	
			-	
			1	
			1	
			1	
	}		1	
	 		 	
		ļ	1	
		ļ		
	 	 	 	
		j		
		,	1	
	 	 	 	
		<u> </u>		
		}	}	
Total from continuation sheets		·	'	35,00

Part XV Supplementary Information	54-18/4552
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - JFCS OF SOUTHWEST FL	
TO IMPROVE THE QUALITY OF LIFE IN COLLIER COUNTY BY CONNECTIN	G DONORS
TO COMMUNITY NEEDS AND PROVIDING LEADERSHIP ON CRITICAL COMMU	NITY
ISSUES. FOR GOOD. FOREVER.	
	
	

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization **Employer identification number** GALLIFORD-MULARD FOUNDATION 54-1874552 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, 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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2017)		Page
Name of or	ganization		Employer identification number
GALLI	FORD-MULARD FOUNDATION	54-1874552	
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
1	ESTATE OF GENEVIEVE GALLIFORD 1640 TETHER KEEP VIRGINIA BEACH, VA 23454	\$396,4.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) S Type of contribution
 		\$	Person Payroll Occash (Complete Part II for noncash contributions)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
			Person

723452 11-01-17

(Complete Part II for noncash contributions)

Name of organization

Employer identification number

GALLIFORD-MULARD FOUNDATION

54-1874552

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art 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
	VARIOUS STOCK		
_1			
		\$396,440.	02/13/18
(a) No.		(c)	
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I			
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions.)	-
		\$	
(a)	4.	(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
		\ \$	
(a)	<i>n</i>	(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
}			
		_{\$}	

ne of organi	zation			Employer identification number	
LLTFO	RD-MULARD FOUNDATION			54-1874552	
art III	Exclusively religious, charitable, etc., contri	butions to organizations described in	section 501(c)(7), (8), or	(10) that total more than \$1,000 fo	
	the year from any one contributor. Complete c completing Part III, enter the total of exclusively religious,	olumns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or le	ING TIME ENTRY. For organization	ns ₽1 ►\$	
	Use duplicate copies of Part III if additional	space is needed.		·,	
No.	(b) Purpose of gift	(a) He of oit	(d) Dep	cription of how gift is held	
art I	(b) Furpose of gift	(c) Use of gift	(a) Desi		
j					
-					
					
-					
		(e) Transfer of gift			
1	Transferee's name, address, an	d 7IP ± 4	Palationship of tra	nsferor to transferee	
	Transieree 3 hame, address, an	<u> </u>	netationship of tra	ilsteror to d'ansieree	
-					
-					
No. om	(b) Purpose of gift	(a) Has of sitt	(d) Dage	winting of how wift in hold	
art I	(b) Furpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
_					
_			_	 	
-	 [
<u> </u>		(1) 7			
-		(e) Transfer of gift			
	Transferee's name, address, an	d 7IP ± 4	Relationship of transferor to transferee		
		<u> </u>	Troid donoring of the	nordron to duniorarec	
l _					
		<u></u>			
No. om	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
art I					
-					
— I –					
i –			<u> </u>		
		(e) Transfer of gift	······································		
l l		•			
<u> </u>	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee	
l –	 				
-					
-					
No.					
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
•			- 		
-					
_ _					
		(e) Transfer of gift			
\vdash	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee	
_					
_					
l –					
		i			

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CAS	H INVESTMEN	NTS ST	ATEMENT 1
SOURCE		(A REVE PER B	NUE NE'	(B) I INVESTMEI INCOME		(C) ADJUSTED ET INCOME
WELLS FARGO - BROKE WELLS FARGO - CHECK			15. 13.		5. 3.	
TOTAL TO PART I, LI	NE 3		28.	28	8.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM S	ECURITIES	ST	ATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVEN	JE NET II	B) NVEST- INCOME	(C) ADJUSTED NET INCOME
WELLS FARGO - BROKERAGE WELLS FARGO - CHECKING	8,524		_	524. 126.	8,524.	
TO PART I, LINE 4	8,650				8,650.	
						-
FORM 990-PF		ACCOUNTI			- <u>-</u>	ATEMENT 3
				(C T- ADJUS	ST) STED	ATEMENT 3 (D) CHARITABLE PURPOSES
FORM 990-PF	_	ACCOUNTI (A) EXPENSES	NG FEES (B) NET INVEST MENT INCOM	(C T- ADJUS ME NET II	ST) STED	(D) CHARITABLE
FORM 990-PF DESCRIPTION	1, LN 16B	ACCOUNTI (A) EXPENSES PER BOOKS	NG FEES (B) NET INVES: MENT INCO	(C) F- ADJUS ME NET II	ST) STED	(D) CHARITABLE PURPOSES
FORM 990-PF DESCRIPTION ACCOUNTING	-	ACCOUNTI (A) EXPENSES PER BOOKS 2,500.	NG FEES (B) NET INVES: MENT INCOM 1,2:	C (C) F- ADJUS ME NET II	ST) STED NCOME	(D) CHARITABLE PURPOSES 1,250.
FORM 990-PF DESCRIPTION ACCOUNTING TO FORM 990-PF, PG	-	ACCOUNTI (A) EXPENSES PER BOOKS 2,500.	NG FEES (B) NET INVES: MENT INCOM 1,2:	(C) T- ADJUS ME NET II 50. 50.	STED STED	(D) CHARITABLE PURPOSES 1,250.
FORM 990-PF DESCRIPTION ACCOUNTING TO FORM 990-PF, PG FORM 990-PF	-	ACCOUNTI (A) EXPENSES PER BOOKS 2,500. 2,500. THER PROFES (A) EXPENSES	(B) NET INVES: MENT INCOI 1,29 1,29 SIONAL FEE: MENT INVES: MENT INCOI	C ADJUS NET II O C NET II	STED STED	(D) CHARITABLE PURPOSES 1,250. 1,250. ATEMENT 4 (D) CHARITABLE

FORM 990-PF	ТАХ	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT INCOME EXCISE TAX REGISTRATION FEES	94.	0. 25.		0.
TO FORM 990-PF, PG 1, LN 18	119.	25.		0.

FORM 990-PF COR	PORATE STOCK	STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COMMON STOCK	593,748.	603,289.
TOTAL TO FORM 990-PF, PART II, LINE	593,748.	603,289.

		
FORM 990-PF	PART XV - LINE 1A	STATEMENT 7
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

RICHARD GALLIFORD CHRISTINE WILLIAMSON