2949102601308
public. 899 2017

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.

	venue Service	<b>▶</b> Go	to www	irs.gov/Form990PF for ins	tructions and t	he latest inf	ormation.	- 1	Open to Public Inspection
For cale	ndar year 2017 or	tax year beginning	OCI	1, 2017	, and er	ding	SEP 30, 20	18	
Name o	f foundation						A Employer identifica		
		EVELYN STRA	IICH				Employer location	,1101	i iidiiiddi
	NDATION,	INC.	0011				54-14073	0 6	•
		number if mail is not delivere	d to street	addroos\		Room/suite		00	<u> </u>
	,		id to street	aduressy		noom/suite	B Telephone number		
		FARM DRIVE					703-356-	<u>71</u>	.04
City or t	own, state or provi	nce, country, and ZIP or	foreign p	ostal code			C If exemption application	ısp	ending, check here
_MCL	EAN, VA	22101							i
G Check	call that apply:	Initial return		Initial return of a	former public c	harity	D 1 Foreign organizat	tions	s, check here
		Final return		Amended return					
		Address change	<b>:</b>	Name change		,	2 Foreign organization check here and attack	s me	eeting the 85% test,
H Check	type of organizati	on X Section 50	1(c)(3) ex	xempt private foundation		01/			
		onexempt charitable trus		Other taxable private found	dation	€)Ψ	E If private foundation under section 507(b		
				ing method: X Cash	Accru	121	1		
		•			L ACCIT	Jai	F If the foundation is i		
	Part II, col (c), line	16)		ther (specify)			under section 507(b	i)(1)	)(B), check here
\$			t i, colur	nn (d) must be on cash bas	SIS.)				<del></del>
Part I	☐ Analysis of Rev	enue and Expenses ts in columns (b), (c), and (d) i	may not	(a) Revenue and	(b) Net inv		(c) Adjusted net		(d) Disbursements for charitable purposes
	necessarily equal ti	ne amounts in column (a))		expenses per books	inco	me	income		(cash basis only)
)   1	Contributions, gif	ts, grants, etc., received		50,000.					
2	Check Difth	e foundation is not required to attact	Sch 8						
3	Interest on savings a	and temporary		22.		22.	2	$\overline{2}$	STATEMENT 1
4		erest from securities		14,236.		4,236.	14 23	<del></del>	STATEMENT 2
'		Great ir Gill Securities		14,250	<u>'</u>	±,250.		<u>.</u>	DIRIDRENI Z
1 -	Gross rents				-				<del>                                     </del>
0	Net rental income or	(loss)		45 650	- <b>-</b>				<del></del>
<u>ა</u>   6a	Net gain or (loss) from Gross sales price for	n sale of assets not on line 10		45,658.	·		·	F	
ᇎ	assets on line 6a	<sup>all</sup> 127,9	<u>80.</u>		<del> </del>		<u> </u>	╀	RECEIVED
enue 7	Capital gain net inco	me (from Part IV, line 2)			4	<u>5,658.</u>		<u> -</u>	
## 8	Net short-term ca	pital gain					N/A	5	JAN 1 5 2019
1 <sub>4</sub> 9	Income modificat	ions			,			١٣	
10a	Gross sales less retu and allowances	ırns						Г	OGDEN LIT
0 h		blos						<u></u>	
⋖	Gross profit or (Id				·				<del> </del>
	•	155)		<u> </u>			<del> </del>		<del> </del>
Q 11	Other income	4.41		109,916.		9,916.	14 25	_	<del> </del>
<u>III 12</u>	Total Add lines						14,25		+
<b>2</b> 13	•	icers, directors, trustees, etc		0.	•	_0.	<del> </del>	0.	0.
₹ 14		alaries and wages		ļ					<del></del>
<u>Q</u> 15	Pension plans, er	nployee benefits							
් 16a	Legal fees								<u> </u>
- E   E	Accounting fees	STMT	3	2,106.	•	0.		0.	0.
<b>□</b>	Other profession			258.		0.		0.	0.
9 17	Interest		-		<u> </u>				
18 g	Taxes	STMT	5	490.		0.	<del></del>	Ö.	0.
Str.	Depreciation and		,	300	<u> </u>			<u>- •</u>	† <del>-</del>
19	· ·	σελιειισι			<del> </del>		<del> </del>		<del> </del>
E 20	Occupancy	and an in-		2 (02	+		<del>  </del>	_	2 (02
₹ 21	Travel, conference	· ·		3,693.	•	0.	<del> </del>	0.	3,693.
E 22	Printing and publ		_	<u> </u>	<del> </del>		ļ		<del> </del>
වු 23	Other expenses	STMT	6	982.	•	0.		0.	0.
₹ 24	Total operating a	ind administrative							
Operating 52		nes 13 through 23		7,529	•	0.		0.	3,693.
O 25	Contributions, gif			141,860.					141,860.
26		nd disbursements.							
120	Add lines 24 and			149,389.	_	0.		0.	145,553.
				147,303.	<del></del> -		<del> </del>	<u> </u>	<del></del>
l	Subtract line 26 f			.20 472			1		
		ver expenses and disburseme		<39,473.		0 016	<del> </del>	—	<del> </del>
6	Net investment i	ncome (if negative, enter -0-	)		5	<u>9,916.</u>		_	
		ome (if negative, enter -0-)		J	<u> </u>		14,25		
723501 0	1-03-18 LHA FO	r Paperwork Reduction	Act Notic	e, see instructions			000	_	Form <b>990-PF</b> (2017)

	_	Balance Sheets Attached schedules and amounts in the description	Beginning of year		End of year			
L	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
_	1	Cash - non-interest-bearing	96,118.	104,970.	104,970.			
	l	Savings and temporary cash investments	980.	859.	859.			
		Accounts receivable						
	ľ	Less allowance for doubtful accounts ▶						
	4	Pledges receivable ►						
		Less; allowance for doubtful accounts						
	5	Grants receivable	<del></del>	·· <del>···</del>				
	_	Receivables due from officers, directors, trustees, and other		<del></del>				
		disqualified persons		1				
	7	Other notes and loans receivable			1			
	]	Less; allowance for doubtful accounts	5,839.	· 0.	0.			
Ŋ	8	Inventories for sale or use			<u></u>			
Assets	9	Prepaid expenses and deferred charges						
As	_	Investments - U.S. and state government obligations			<del></del>			
		Investments - corporate stock STMT 7	829,375.	789,116.	1,007,134.			
	l	Investments - corporate bonds						
	ŀ	Investments - land, buildings, and equipment basis			,			
		Less accumulated depreciation		į	-			
	12	Investments - mortgage loans						
	13	Investments - other			<del>_</del>			
	14	Land, buildings, and equipment basis ▶	_					
		Less accumulated depreciation			<u>-</u>			
	15	Other assets (describe ►						
	16	Total assets (to be completed by all filers - see the						
_		instructions Also, see page 1, item I)	932,312.	894,945.	1,112,963.			
_	17	Accounts payable and accrued expenses						
	18	Grants payable						
S	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
iab	21	Mortgages and other notes payable						
	22	Other liabilities (describe ► OTHER PAYABLES)	0.	2,106.				
	23	Total liabilities (add lines 17 through 22)	0.	2,106.				
		Foundations that follow SFAS 117, check here			•			
S		and complete lines 24 through 26, and lines 30 and 31.						
1¢e	24	Unrestricted						
alaı	25	Temporarily restricted	<del></del>					
9	26	· — [						
Ę		Foundations that do not follow SFAS 117, check here						
or F		and complete lines 27 through 31	_	0.	İ			
ets	27	Capital stock, trust principal, or current funds	0.	0.				
Net Assets or Fund Balance	28	Paid-in or capital surplus, or land, bldg, and equipment fund	932,312.	892,839.	ı			
et A	29	Retained earnings, accumulated income, endowment, or other funds	932,312.	892,839.				
ž	30	Total net assets or fund balances	332,312.	032,033.				
	24	Total liabilities and net assets/fund balances	932,312.	894,945.				
				024/2434				
LP	art	Analysis of Changes in Net Assets or Fund Ba	alances					
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30					
		st agree with end-of-year figure reported on prior year's return)		1	932,312.			
2	•	r amount from Part I, line 27a		2	<39,473.>			
3	Othe	r increases not included in line 2 (itemize)		3	0.			
4	Add	lines 1, 2, and 3		4	892,839.			
		reases not included in line 2 (itemize)		5	0.			
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		892,839.			
					Form <b>990-PF</b> (2017)			

Part IV Capital Gains and Lo	sses for Tax on Investment Income	24 140	77300 1	AGEI	OF I
(a) List and	describe the kind(s) of property solo		(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr.)	(d) Date sold
<del></del>	rick warehouse; or common stock, 20	JU SNS MLC CO.	D - Donation		(mo , day, yr.)
ta OW ALL CAP COR b OW LARGE CAP S			<del></del>	01/20/15 VARIOUS	$\frac{11/20/17}{11/20/17}$
c OW SMALL & MID				12/22/15	
d OW STRATEGIC O				08/16/12	
e OW FIXED INCOM					$\frac{11/20/17}{11/20/17}$
CLASS ACTION	<u></u>			01/01/75	
g OW REAL RETURN	FUND			01/01/75	
h OW SMALL & MID	CAP STRAT FD			10/03/08	11/20/17
CAPITAL GAINS	DIVIDENDS				
		<u></u>			<u> </u>
<u>k</u>					
<u></u>		· <del></del>	<del></del>	<del> </del>	
<u>m</u>				·	
<u>n</u>					
0	(f) Depreciation allowed	(g) Cost or other basis	(h	) Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		plus (f) minus (g)	
a 28,000.		23,690.			4,310.
b 41,400.		33,227.		<del></del>	8,173.
<u>c</u> <u>5,187.</u>		4,381.		<u>-</u>	806.
d 11,000.		9,776. 6,629.			1,224.
e 6,600.		6,629.			<29.> 1.
1					153.
h 7,813.		4,619.			3,194.
27,826.				· · · · · · · · · · · · · · · · · · ·	27,826.
k		_	<del>-</del> ·	-	
1					
<u>m</u>					
<u>n</u>			<del></del>		
Complete only for accets showing	l ng gain in column (h) and owned by t	the foundation on 12/31/69	(1)   0	ooo (from ool (h))	
Outspiece only for assets shown	(i) Adjusted basis	(k) Excess of col. (I)	Gains (excess	sses (from col. (h)) of col (h) gain over	col. (k),
(i) F.M V. as of 12/31/69	as of 12/31/69	over col. (j), if any		not less than "-0-")	. ,,
a					4,310.
<u>b</u>					8,173.
<u>C</u>					806.
<u>d</u>			**	<del></del>	1,224.
<u>e</u>				<del></del>	<29.>
0			<del></del>	<del></del>	<u> </u>
h	<u> </u>				3,194.
1			<u>.                                      </u>	<del></del>	27,826.
J		-			
k					
m				<u> </u>	
<u>n</u>					
0				<del></del>	
2 Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-0	in Part I, line 7	2		45,658.
3 Net short-term capital gain or (los		,			
If gain, also enter in Part I, line 8,	column (c).	}			22
If (loss), enter "-0-" in Part I, line 8	5		3		<u> </u>

FOUNDATION, INC.

Part IV   Capital Gains and	Losses for Tax on In	vestment	Income					<u> </u>	7300 . ugo 0
	kind(s) of property sold (for examples; or common stock, 200 shs		te,	( <b>b)</b> H	(b) How acquired P - Purchase D - Donation			icquired ay, yr )	(d) Date sold (mo , day, yr.)
1a									
b SEE ATTACHED S	TATEMENT			ļ.,					
<u>c</u>				ļ					
<u>d</u>	- <del></del>								
<u>e</u>	(f) Depreciation allowed	(a) Cos	it or other basis	1			/h) Ga	un or (loss)	
(e) Gross sales price	(or allowable)		xpense of sale					(f) minus (	
a				_					<del></del>
<u>b</u>				$\rightarrow$					
<u>c</u>		<u> </u>							
e 127,980.		-	82,32	2					45,658.
Complete only for assets showing ga	up in column (h) and owned by t	he foundation				//)	Gaine /Cr	ol. (h) gain	
	(j) Adjusted basis		cess of col (ı)				(k), but n	ot less than	1 -0-) <b>or</b>
(i) FMV as of 12/31/69	as of 12/31/69		col (j), if any				Losses (	from col (	h))
<u>a</u>	<del></del>		<del></del>						
<u>b</u>								<del></del>	·
<u>c</u>									
e e				+					45,658.
		- D 11 1 1		$\overline{}$					
2 Capital gain net income or (net capital	loss) { If gain, also enter loss}			<b>)</b>	2				45,658.
3 Net short-term capital gain or (loss) as	s defined in sections 1222(5) an	d (6) <sup>.</sup>		\ \					
If gain, also enter in Part I, line 8, colu	mn (c)			<b> </b>					0.0
Part V Qualification Und	er Section 4940(e) for	Poducod	Tay on Not	100	3 octr	ont Inc			<29.
<del></del>						Territ III.C.			
(For optional use by domestic private fou	ndations subject to the section 4	1940(a) tax on	net investment in	icome	:.)				
If section 4940(d)(2) applies, leave this p	art blank								
Was the foundation liable for the section	AQAQ tay on the distributable am	ount of any ve	ar in the hase nei	rınd2					Yes X No
If "Yes," the foundation doesn't qualify un				1100					
Enter the appropriate amount in each				ntries					
(a)	(b)			(c)				Dietrib	(d) ution ratio
Base periód years Calendar year (or tax year beginning in	Administration analytican also	tributions	Net value of no	nchar	ıtable-	use assets	(		ided by col. (c))
2016	13	3,218.		1	,09	1,144	•		.122090
2015		0,161.		1_		8,242			.065070
2014		9,048.		1_		<u>5,970</u>			.152850
2013		8,882.		_1		4,375			.138837
2012		<u>5,189.</u>		1	<u>,14</u>	<u>3,775</u>	•		188139
									CCC00C
2 Total of line 1, column (d)			S b 46b				2		.666986
3 Average distribution ratio for the 5-year	·	on line 2 by 5.0	J, or by the numb	er or y	years				133397
the foundation has been in existence i	riess than 5 years						3	<del></del>	
4 Enter the net value of noncharitable-u	se assets for 2017 from Part X	line 5					4		1,113,239.
T Enter the net value of nonemarkable a	00 00000 101 2017 11 01111 01117								
5 Multiply line 4 by line 3							5		148,503.
,,,,,,			v						
6 Enter 1% of net investment income (1	% of Part I, line 27b)						6		599.
7 Add lines 5 and 6							7		149,102.
									44
8 Enter qualifying distributions from Par							8	_	145,553.
If line 8 is equal to or greater than line	7, check the box in Part VI, line	1b, and comp	lete that part usin	ng a 19	% tax ı	ate.			
See the Part VI instructions.									000 DE (0047

BARRY S. & EVELYN STRAUCH FORM 990-PF (2017) FOUNDATION, INC.	54.	-1407386	ء د د	Page 4
Part VI Excise Tax Based on Investment Income (Section 4	1940(a), 4940(b), 4940(e), or 4948	- see instr	uction	
1a Exempt operating foundations described in section 4940(d)(2), check here		T		
Date of ruling or determination letter: (attach copy of letter if	, ,			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		-	1,19	98.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enti	er 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only			-	0.
3 Add lines 1 and 2	3		1,1	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	nly; others, enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		1,19	98.
6 Credits/Payments:				
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 560.			
b Exempt foreign organizations - tax withheld at source	6b O.			
c Tax paid with application for extension of time to file (Form 8868)	6c O.			
d Backup withholding erroneously withheld	6d O.			
7 Total credits and payments. Add lines 6a through 6d	7_		5	<u>60.</u>
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is	attached 8	ļ		0.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>▶</b> <u>9</u>		6:	38 <u>.</u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpain	I =			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded ► 11			
Part VII-A Statements Regarding Activities			<del> </del>	
1a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it participate or intervene in		Yes	No
any political campaign?		<u>1a</u>	+-+	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pu		16	1	<u>X</u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	oles of any materials published or			
distributed by the foundation in connection with the activities				37
c Did the foundation file Form 1120-POL for this year?	- 11	1 <u>c</u>	+	<u>X</u> _
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during		ľ		
(1) On the foundation. > \$ 0. (2) On foundation mana				
e Enter the reimbursement (if any) paid by the foundation during the year for political exp managers. $\triangleright$ \$ 0.	benulture tax imposed on touridation			
2 Has the foundation engaged in any activities that have not previously been reported to t	the IRS2	2	-	х
If "Yes," attach a detailed description of the activities	ine mo		+	<u></u>
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ning instrument articles of incorporation or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	-	х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the		4a	1	X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A 4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y		5	1 1	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) satisfi	ed either:	l	1 1	
By language in the governing instrument, or				
By state legislation that effectively amends the governing instrument so that no mand	datory directions that 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," of	complete Part II, col. (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered. See instri	uctions. ►			,
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t	the Attorney General (or designate)	}	1 .	~
of each state as required by General Instruction G? If "No," attach explanation		8b	X	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning				L
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"		9_	4	<u>X</u> _
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a so	chedule listing their names and addresses STM		X	<del></del>
		Form 99	Ю-PF (	2017)

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	<u> </u>	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	ļ	X
13	the second secon	13	X	
	Website address ► N/A	256		
14	The books are in care of ► BARRY & EVELYN STRAUCH  Telephone no ► 703-			4
4.5	Located at ► 1468 EVANS FARM DR, MCLEAN, VA ZIP+4 ►2	<u> 7101</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	3.1	• / ⊅	· 🗀
16	and enter the amount of tax-exempt interest received or accrued during the year  At any time during colorder year 2017, did the foundation baye as interest in or a greature or other authority ever a healt	N	/A Yes	No
10	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	165	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16	L	
	foreign country	ļ		٠,
Pá	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1:	a During the year, did the foundation (either directly or indirectly):		1.00	
•	(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)			,
	a disqualified person?			4
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		,	i.
	(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 )			
ı	of 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	<u>1b</u>		
	Organizations relying on a current notice regarding disaster assistance, check here			
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		-	3,7
_	before the first day of the tax year beginning in 2017?	1c	<del> </del>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
•	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?  Yes X No			· •
	— · · — ·			
ı	If "Yes," list the years \( \bigsim \), ,, ,, ,, b. Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			1
	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		
(	this provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		ĺ	!
	during the year?			
ı	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			·
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		-	
	Form 4720, to determine if the foundation had excess business holdings in 2017 ) N/A	3b	<u> </u>	<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
i	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1 5	1	
_	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X (2047)
	F	orm <b>99</b> 0	ソーピト	(2017)

		<b>tequirea</b> (contin	ueu/			
5a During the year, did the foundation pay or incur any amount to:				Y	s No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗓 No		,	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire		}		Ì	
any voter registration drive?			es 🔀 No	ļ		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Yo	es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1	- } ;	
4945(d)(4)(A)? See instructions Yes X No						
(5) Provide for any purpose other than religious, charitable, scientific, literary						
the prevention of cruelty to children or animals?			es X No		'	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		n Regulations	27./2	<u>:</u>   -	-	
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check		nad			;	
c. If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			[ ]		•	
expenditure responsibility for the grant?	I	[/A	s L No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d)	001 0100011000 00			1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on		es 🗓 No	[	-   ;	
• •	oregnal hanafit contract?	1	8 LAJ NO	-	·-	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b, file Form 8870.	personal benefit contract?		}	6b	<u> Х</u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		es X No	İ	,	
<ul> <li>b If "Yes," did the foundation receive any proceeds or have any net income attribute.</li> </ul>			N/A	7b		
Part VIII Information About Officers, Directors, Trust		nagers Highly		70		
Paid Employees, and Contractors	ccs, i canadion ma	iliagojo, riigili	,			
List all officers, directors, trustees, and foundation managers and t	heir compensation.		•			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other	
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco	unt, other wances	
EVELYN M. STRAUCH	PRESIDENT					
1468 EVANS FARM DR		ļ				
MCLEAN, VA 22101	0.00	0.	0.	•	_ 0.	
BARRY S. STRAUCH, MD	SECRETARY/TR					
1468 EVANS FARM DR						
MCLEAN, VA 22101	0.00	0.	0	•	0.	
				1		
		<del></del>				
			<del></del>			
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(0)	Evnança	
Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deterred	(e) acco	Expense unt, other	
(a) Name and address of each employee paid more than \$50,000			(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) acco allo	Expense unt, other wances	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	(e) acco allo	Expense unt, other wances	

Form **990-PF** (2017)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers Paid Employees, and Contractors (continued)	s, Highly	7300 Tuge 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		-
	ype of service	(c) Compensation
NONE	·	1.2
	·	
		}
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u> </u>
	an the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	i as tile	Expenses
1 N/A		
1 21/22		
2		
3		
4		
Port IV P Common of December Polated Investments		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		ranount
IN/A		
2		
All other program-related investments. See instructions.		
3		
	_	
		0.
Total. Add lines 1 through 3	<u>▶  </u>	

Form 990-PF (2017) FOUNDATION, INC. 54-1407386 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 984,386. a Average monthly fair market value of securities 1a 145,806. b Average of monthly cash balances 1b 10 c Fair market value of all other assets 130,192. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 16,953 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 113,239. 55,662 Minimum investment return. Enter 5% of line 5 Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here 
and do not complete this part ) 55,662. Minimum investment return from Part X, line 6 1,198. Tax on investment income for 2017 from Part VI, line 5 b Income tax for 2017. (This does not include the tax from Part VI.) 2c c Add lines 2a and 2b 3 .464. Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 464 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 145,553. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3ь 4 145,553. 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 5 income, Enter 1% of Part I, line 27b

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

Form **990-PF** (2017)

6

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d)</b> 2017
1 Distributable amount for 2017 from Part XI, line 7				54,464.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:		<u></u>		
a From 2012158,642.				
b From 2013 102, 265.				t
c From 2014 114,703.		į		
d From 2015 16,847.				
e From 2016 79,191.				•
f Total of lines 3a through e	471,648.			<u> </u>
4 Qualifying distributions for 2017 from				,
Part XII, line 4 <sup>-</sup> ► \$ 145,553.				
a Applied to 2016, but not more than line 2a			0.	·
<b>b</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	01 000			54,464.
e Remaining amount distributed out of corpus	91,089.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	562,737.			
<b>b</b> Prior years' undistributed income. Subtract				•
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		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	150 (40			
not applied on line 5 or line 7	158,642.			<del></del>
9 Excess distributions carryover to 2018	404 005		•	
Subtract lines 7 and 8 from line 6a	404,095.	-		
Analysis of line 9:  a Excess from 2013 102, 265.				
b Excess from 2014 114, 703.				1
c Excess from 2015 16,847.				,
d Excess from 2016 79,191.				1
e Excess from 2017 91,089.				
J 2	L			Fare 000 PE (2017)

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

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

c Any submission deadlines:

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

Form 990-PF (2017)

FOUNDATION, INC. Form 990-PF (2017) FOUNDATION, INC.

Part XV | Supplementary Information (continued)

54-1407386 Page 11

	Grants and Contributions Paid During th		Payment		
	Recipient	If recipient is an individual,		D	
	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a	Paid during the year	or obbotantal outside			
-	and carring and year				
SEE	ATTACHED SCHEDULE	NONE		TO FUND ORGANIZATION'S	
		į		PROGRAMS ~	
			<del></del>	UNDESIGNATED GIFTS	141,860.
		1			
	Total			<b>▶</b> 3a	141 860.
b	Approved for future payment		-		-
	NONE				
		1			
				·	
	•				
	Total			<b>▶</b> 3b	0.
				Fo	orm <b>990-PF</b> (2017)

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		d business income		section 512, 513, or 514	(e)
1 Program convene revenue	Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		Tanatan meane
b					
C		··			
d		<del>" </del>			
e					
f					
g Fees and contracts from government agencies		· · <del>-</del>			
2 Membership dues and assessments					····
3 Interest on savings and temporary cash					
investments			01	22.	
4 Dividends and interest from securities		<del></del>	01	14,236.	
5 Net rental income or (loss) from real estate:	-				·
a Debt-financed property			<del> </del>		<del></del>
b Not debt-financed property	-		<del>  -   -  </del>		
6 Net rental income or (loss) from personal property					
7 Other investment income			i		
8 Gain or (loss) from sales of assets other					
than inventory			01	27,826.	17,832
9 Net income or (loss) from special events				•	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		- <del>-</del>			
a	_				
b	_ [				
c	1 1				
d	, ,	<del></del>	<u> </u>		
e	_		ļ		
2 Subtotal Add columns (b), (d), and (e)		0.		42,084.	17,832. 59,916.
13 Total Add line 12, columns (b), (d), and (e)				13	59,916.
See worksheet in line 13 instructions to verify calculations.	)				
Part XVI-B Relationship of Activities	s to the Acco	mplishment of E	xempt Pu	rposes	
Lies No. — Fuelen heleu hou, seeh estudy for which in	nooma in rapartad ir	a column (a) of Part V(I)	A contributed	importantly to the accomp	lichment of
Line No. Explain below how each activity for which in the foundation's exempt purposes (other th			A COMMIDURED	importantly to the accomp	iisiiiiieiit oi
NOT APPLICABLE	an of providing rai				
HOT ATTEICABLE	<del></del>	<del></del> -			

Form **990-PF** (2017)

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Form 990			ATION, IN				<u>54-140</u>			ige 13
Part >	<u>(VII</u>			nsfers to a	nd Transactions a	and Relations	hips With Nonchar	itable	1	
		Exempt Organ	izations					_		
1 Dig	the or	ganization directly or indi	rectly engage in any	of the following	ig with any other organizat	ion described in sect	ion 501(c)	$\top$	Yes	No
(oth	er tha	n section 501(c)(3) organ	nizations) or in secti	on 527, relating	g to political organizations?	?				
		from the reporting found						!		
	Cash	, ,			•			1a(1)		X
		assets						1a(2)		X
		sactions:						10(2)		
		of assets to a noncharita	hle evemnt organize	ation				15/41		v
		ases of assets from a no						1b(1)		X
			•	organization				1b(2)		X
		l of facilities, equipment,						1b(3)		X
		oursement arrangements						1b(4)		<u>X</u>
		or loan guarantees						1b(5)		X
		rmance of services or me	•	•				1b(6)		X
		facilities, equipment, ma						1c		X
							narket value of the goods, o		ets,	
		• • •			ed less than fair market val	lue in any transactior	or sharing arrangement, s	now in		
	<u>-</u>	) the value of the goods,	<del>,</del>			7-70				
(a) Line no	-	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions, and	sharing arr	angeme	nts
				N/A						
		• <u>.</u>		·						
		<u> </u>								
					<u> </u>					
	-	·								
	+									
	-		<del></del>	<del></del>						
2a Is th	he four	ndation directly or indirec	tly affiliated with or	related to one	or more tax-exempt organ	nizations described				
		501(c) (other than section	•	•	or more tax exempt organ	neutrono docombod	Г	Yes	X	□No
				ection 521						טוו ב
<u> </u>	es, cc	omplete the following sch (a) Name of org			(b) Type of organization		(c) Description of relations	ain.		
	_		Janization	<del></del>	(b) Type of organization	<del></del>	(0) Decomplian or relations	p		
		N/A				<del>-</del>				
		<del></del>	<del></del>		<u> </u>	<del></del>				<del></del>
		<del></del>		<del>_</del>	<del></del>	<u> </u>				
<del>-</del> -	11-2		Abot I barra arraminad th		a accompanyon achadular an	d statements, and to the	hast of my knowledge			
Sian.	and be	penantes of perjury, I declare firef, it is true, correct, and cor	mplete Declaration of p	reparer (other tha	ng accompanying schedules and n taxpayer) is based on all infor	mation of which prepare	- han any kaominalan	y the IRS o	discuss (	:his er
Sign Here	<b>.</b>	<b>1</b>	Otral aux	T.T	90 (187 /10)/0	· Trueter	~ / I-L-	wu pelow,	? See in:	str
11010		1 Bary	4 10-0, MB)	- 1 mesos	Dec 4/12/19/10			&∟ Yes	L	J No ∣
	Sign	ature of officer of trustee		10	// Date	Title	Chack T if DTIV			
		Print/Type preparer's na	ame	Preparer's s	ignature	Date /	Check if PTIN			
D-:-		Tous M	MITSUR	1	talle	12/11/218	self- employed			
Paid			<u> </u>	pri		1.1/200		0093		
Prepa		Firm's name ► FRI	TSCHE & T	rhomas,	P.C.	,	Firm's EIN ► 54-18	3209	76	
Use C	חכ				<del></del>		ļ			
		Fırm's address ▶ 39								
		FA_	IRFAX, V	A 22030			Phone no. (703)			
							Fo	orm <b>990</b>	)-PF	(2017)

## 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

BARRY S. & EVELYN STRAUCH

FOUNDATION, INC.

S4-1407386

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-l	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
General R	r 990 EZ	
Sort 990 or 990-EZ		
Special R	ules	
s a	ections 509(a)(1) ai ny one contributor,	nd 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 r, 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,
y.	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  Seneral 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)(v)), 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.,	
y Is p	ear, contributions e checked, enter he urpose Don't com	exclusively for religious, charitable, etc, purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc, inplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively
but it mus	t answer "No" on F	

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)

Name of organization

BARRY S. & EVELYN STRAUCH FOUNDATION, INC.

54-1407386

Employer identification number

	——————————————————————————————————————		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BARRY & EVELYN STRAUCH  1468 EVANS FARM DR  MCLEAN, VA 22101	\$ 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) ∠No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

BARRY S. & EVELYN STRAUCH

FOUNDATION, INC.

54-1407386

Employer identification number

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

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

Name of org				Employer identification number		
	S. & EVELYN STRAUCH ATION, INC.			54-1407386		
Part III	Exclusively religious, charitable, etc., contribute year from any one contributor. Complete co completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	lumns (a) through (e) and the follo charitable, etc , contributions of \$1,000 o	WING line entry. For organization	(10) that total more than \$1,000 for		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
		(e) Transfer of gif	t	•		
	Transferee's name, address, and	I ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
		(e) Transfer of gif	t			
	Transferee's name, address, and	ZIP + 4	Relationship of trai	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
		(e) Transfer of gif	t			
	Transferee's name, address, and		nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
		(e) Transfer of gif	•			
	Transferee's name, address, and		Relationship of transferor to transferee			

	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1	
SOURCE	(A REVE PER B	NUE NET 1	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME -BB&T INTEREST INCOME -BESSEMER		9. 22.		13.	
TRUST				9.	
TOTAL TO PART I, LINE 3				22.	
FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECU	JRITIES	STATEMENT 2	
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	(A) REVENUE S PER BOOKS	(B) NET INVES MENT INCO		
BESSEMER TRUST 42,062	27,82	6. 14,236	14,23	6. 14,236.	
TO PART I, LINE 4 42,062	27,82	14,236	14,23	6. 14,236.	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3	
	<del></del>	<del></del>			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	(D) CHARITABLE	
DESCRIPTION -	EXPENSES	NET INVEST-	ADJUSTED NET INCOM	(D) CHARITABLE	
DESCRIPTION	EXPENSES PER BOOKS 2,106.	NET INVEST-	ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES	
TO FORM 990-PF, PG 1, LN 16B	EXPENSES PER BOOKS 2,106.	NET INVEST-MENT INCOME  0.	ADJUSTED NET INCOM	(D) CHARITABLE PURPOSES 0. 0.	
TO FORM 990-PF, PG 1, LN 16B	EXPENSES PER BOOKS 2,106.	NET INVEST- MENT INCOME  0.  0.  SIONAL FEES  (B) NET INVEST-	ADJUSTED NET INCOM	CHARITABLE PURPOSES  0. 0.  0. 0.  STATEMENT 4  (D) CHARITABLE	
TO FORM 990-PF, PG 1, LN 16B	EXPENSES PER BOOKS  2,106.  2,106.  OTHER PROFES  (A) EXPENSES	NET INVEST- MENT INCOME  0.  0.  SIONAL FEES  (B) NET INVEST-	ADJUSTED NET INCOM  (C) ADJUSTED NET INCOM	CHARITABLE PURPOSES  0. 0.  0. 0.  STATEMENT 4  (D) CHARITABLE	

FORM 990-PF	TAXES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
INCOME TAX	490.	0.		0.	0.
TO FORM 990-PF, PG 1, LN 18	490.	0.		0.	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
BANK FEES FILING FEES OFFICE EXPENSE	95. 25. 862.	0.0	•	0. 0. 0.	0.
TO FORM 990-PF, PG 1, LN 23	982.	0		0.	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION		В	OOK VALUE	FAIR MARKE VALUE	T
<del></del>		<del></del>	789,116.	1,007,1	34
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		789,116.	1,007,1	34

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT PART VII-A, LINE 10 NAME OF CONTRIBUTOR ADDRESS 1468 EVANS FARM DR BARRY & EVELYN STRAUCH MCLEAN, VA 22101

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

NAME OF MANAGER

EVELYN M. STRAUCH BARRY S. STRAUCH, MD