# Form 990-PF

#### **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

2018
Deen to Public Inspection

Internal Revenue Service	ırs gov/Form990PF for ınstı	ructions and the latest info	ormation	Open to Public Inspection
For calendar year 2018 or tax year beginning		, and ending		
Name of foundation		,	A Employer identification	n number
THE MCMUNN FAMILY FOUNDATI	ON		- Emproyor roomout.o	
C/O DAVID MCMUNN			27-100833	1
Number and street (or P O box number if mail is not delivered to street ;	addraes)	Room/suite	<del> </del>	<u> </u>
•	•	Additisate	B Telephone number	100
40936 SPECTACULAR BID PLAC			703-481-61	100
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
LEESBURG, VA 20176		<u></u>	_	
G Check all that apply Initial return	Initial return of a f	ormer public charity	D 1 Foreign organization	ns, check here
Final return	Amended return			
Address change	Name change		2 Foreign organizations m check here and attach of	computation
H Check type of organization X Section 501(c)(3) e.	kempt private foundation	$\mathcal{M}_{-}$	E If private foundation st	atus was terminated
	Other taxable private founda	ation	under section 507(b)(1	
I Fair market value of all assets at end of year   J   Account		Accrual	1	
· 1 —	ther (specify)		F If the foundation is in a under section 507(b)(1	
\$ 1,846,325. (Part I, colur		s)	011001 30011011 307(0)(	THE PLANTS
Part   Analysis of Revenue and Expenses			(a) Adv4-3	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
necessarily equal the amounts in column (a) )	5p5000 p01 000113	***************************************		(cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check ► X if the foundation is not required to attach Sch. B Interest on savings and temporary	2 242	2 24 2		
3 cash investments	3,812.	3,812.		STATEMENT 1
4 Dividends and interest from securities	41,378.	41,378.	ļ	STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				1
6a Net gain or (loss) from sale of assets not on line 10	75,612.			
B Gross sales price for all 941,563.				
b assets on line 6a 94.1,563.  7 Capital gain net income (from Part IV, line 2)		75,612.		
8 Net short-term capital gain				i
8 Net short-term capital gain 9 Income modifications ECEIVED				<del>                                     </del>
10a Gross sales less returns				
b Less Cost of gazes sold MAY 1. 6 2010				
b Less Cost of Ses soleMAY 1. 6 2019 C				
1 1 1				+
The Other Income	120,802.	100 000	-	<u> </u>
12 Total. Add tines 1 the GDEN, UT	· -	120,802.		<u> </u>
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				-
15 Pension plans, employee benefits				<del> </del>
16a Legal fees				
ម្លី b Accounting fees STMT 3	8,233.	4,000.		4,233.
c Other professional fees STMT 4	3,322.	3,322.		0.
b Accounting fees STMT 3  c Other professional fees STMT 4  17 Interest 18 Taxes STMT 5  19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6  Total operating and administrative expenses Add lines 13 through 23  25 Contributions, gifts, grants paid  Total expenses and disbursements				
18 Taxes STMT 5	2,581.	2,581.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 6	16.	0.	-	16.
23 Other expenses STMT 6	10.		<del> </del>	10.
24 Total operating and administrative	14 150	0 002		4 240
expenses Add lines 13 through 23	14,152.	9,903.		4,249.
25 Contributions, gifts, grants paid	100,023.			100,023.
		_		
Add lines 24 and 25	114,175.	9,903.		104,272.
27 Subtract line 26 from line 12		· · · · · · · · · · · · · · · · · · ·		
Excess of revenue over expenses and disbursements	6,627.			
b Net investment income (if negative, enter -0-)		110,899.		
c Adjusted net income (if negative, enter -0-)		·	N/A	

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

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	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	324,141.	280,791.	280,791.
	3	Accounts receivable ►	***************************************		
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			-
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	İ _	disqualified persons			
	7	Other notes and loans receivable			
	_	Less allowance for doubtful accounts		-	
ssets	8	Inventories for sale or use			
ASS	9	Prepaid expenses and deferred charges	_	<u> </u>	
_		Investments - U.S. and state government obligations Investments - corporate stock STMT 7	840,705.	793,620.	811,868.
	l	G TO CO	713,587.	506,999.	475,666.
	l	_	713,307.	300,333.	4/3,000.
	11	Investments land, buildings, and equipment basis		ечин пиниминиванирово поливова Виневи	A
	10	Less accumulated depreciation			
	12 13	Investments - mortgage loans Investments - other STMT 9	0.	266,333.	278,000.
	14	Land, buildings, and equipment basis		200,333.	1,0,000
	'"	Less accumulated depreciation			
	15	Other assets (describe			
	l	Total assets (to be completed by all filers - see the			
	'"	instructions. Also, see page 1, item I)	1,878,433.	1,847,743.	1,846,325.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			1
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
듛	21	Mortgages and other notes payable	-		
ت	22	Other liabilities (describe )			
					1
	23	Total habilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			İ
ances	24	Unrestricted			
		Temporarily restricted			
or Fund Ba	26	Permanently restricted		<del></del>	
'n		Foundations that do not follow SFAS 117, check here			
ΥF		and complete lines 27 through 31.	0	0.	
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	1,878,433.	1,847,743.	<del>-</del>
ž.	29	Retained earnings, accumulated income, endowment, or other funds	1,878,433.	1,847,743.	
ž	30	Total net assets or fund balances	1,070,433.	1,041,143.	
	31	Total liabilities and net assets/fund balances	1,878,433.	1,847,743.	
Ξ				2/02///201	·
<u>P</u>	art	Analysis of Changes in Net Assets or Fund Ba	nances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	1,878,433.
	•	amount from Part I, line 27a		2	6,627.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	1,885,060.
		eases not included in line 2 (itemize)   BOOK INVESTMEN!	rs adjustments	5	37,317.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,847,743.
		<del></del>			Form <b>990-PF</b> (2018)

		ID MCMUNN sses for Tax on Inve	etmont	Incomo	O.D.	3 7 7 7 7	TTED.	27-100	· ·
						E ATTAC		STATEM	1
		s) of property sold (for examp or common stock, 200 shs N		iie,	1, F.	How acquired - Purchase - Donation	(c) E	Date acquired o , day, yr.)	(d) Date sold (mo., day, yr)
1a			,		+ -	- Donation	<del>  `</del>		
b					1				
C			-		<b>†</b>				-
d									
e									
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				h) Gain or (los: plus (f) minus	
a									
b	ļ								
С	ļ								
d									
e 941,563.				865,95	1.		,		75,612
Complete only for assets show	ng gain in	column (h) and owned by the						is (Col. (h) gair but not less tha	
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		col (j), if any				ses (from col.	
<u>a</u>	<u> </u>								
<u>b</u>	-								
<u>c</u>	1			•					
_d									75,612
<u>e</u>	ļ				╗				75,612
2 Capital gain net income or (net c	apıtal loss	If gain, also enter in $ \begin{cases} & \text{If (loss), enter -0-in} \end{cases} $	n Part I, line n Part I, line	7 : 7	}	2			75,612
3 Net short-term capital gain or (lo	ss) as def	ined in sections 1222(5) and	(6)		٦				
If gain, also enter in Part I, line 8		c).			١			37/3	
If (loss), enter -0- in Part I, line 8	 	ection 4940(e) for R		Toy on Not	ال	3		N/A	•
							come		
(For optional use by domestic privat	e foundati	ons subject to the section 494	10(a) tax on	net investment in	come.	)			
If section 4940(d)(2) applies, leave t	his part bl	ank							
NATIONAL AND AND AND AND AND AND AND AND AND AND		Associated the death of the below as a second							Yes X N
Was the foundation liable for the sec If "Yes," the foundation doesn't quali					100 /				L Yes A
1 Enter the appropriate amount in					ntries.				
(a)	1	(b)		land making any or	(c)				(d) bution ratio
Base periód years Calendar year (or tax year beginni	ına ın)	Adjusted qualifying distrib	butions	Net value of no		ıtable-use asse	ts		bútión ratio vided by col. (c))
2017	g/	98	,205.		2	,144,74	7.	(001 (0) 01	.04578
2016	İ		,790.			,199,77			.04263
2015		109	,587.			,997,60			.05485
2014			,000.			,437,65			.05045
2013			,000.			,458,91		-	.05734
2 Total of line 1, column (d)								2	.25108
3 Average distribution ratio for the	5-year bas	se period - divide the total on	line 2 by 5 (	O, or by the numb	er of y	ears			
the foundation has been in existe	nce if less	than 5 years	•	•	•			3	.05021
		•							
4 Enter the net value of noncharital	ole-use as:	sets for 2018 from Part X, line	e 5				1	4	2,019,416
		,							
5 Multiply line 4 by line 3								5	101,409
6 Enter 1% of net investment incon	ne (1% of	Part I, line 27b)						6	1,109
	•								
7 Add lines 5 and 6								7	102,518
8 Enter qualifying distributions from	n Part XII,	line 4						8	104,272
If line 8 is equal to or greater that	n line 7, ch	neck the box in Part VI, line 1t	o, and comp	lete that part usin	g a 19	6 tax rate.			
See the Part VI instructions	-	· 							
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Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs. MLC Co (mo , day, yr ) (mo., day, yr) 1a RAYMOND JAMES #7985 P 01/01/18|12/31/18 01/01/1712/31/18 b RAYMOND JAMES #7985 c RAYMOND JAMES #9991 01/01/18|12/31/18 d RAYMOND JAMES #9991 01/01/17[12/31/18 e AMERICAN ENTERPRISE #8462 01/01/18|12/31/18 01/01/17|12/31/18 f AMERICAN ENTERPRISE #8462 g AMERICAN ENTERPRISE #9174 01/01/1812/31/18 #9174 h AMERICAN ENTERPRISE 01/01/1712/31/18 01/01/1812/31/18 | AMERICAN ENTERPRISE #3805 , AMERICAN ENTERPRISE 01/01/17|12/31/18 #3805 #8268 01/01/18|12/31/18 k AMERICAN ENTERPRISE 01/01/1712/31/18 | AMERICAN ENTERPRISE #8268 m CAPITAL GAINS DIVIDENDS n 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale  $<1,09\overline{3.}>$ 30,522. 31,615. 2,925. 117,065. 114,140. b <5,322.> 203,801. 209,123. C 137,845. 115,369. 22,476. d 12,984. 12,984. 0. 146. 43,709. 43,563. 27,<u>272.</u> 1,058. 28,330. g 15,163. 60,986. 45,823. h 14,400. 19,120. <4,720.> 121,676. 88,537. 33,139. <571.> 12,213. 12,784. k 146,120. 145,621. 499. 11,912. 11,912. <u>m</u> n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col (i) but not less than "-0-") (i) F M V. as of 12/31/69 as of 12/31/69 over col (j), if any <1,093.> 2,925. b <5,322.> C 22,476. ď 0. е 146. f .058. 15,163. h <4,720.> 33,139. <571.> 499. 1 11,912. m n 0  $\{\begin{array}{l} \mbox{If gain, also enter in Part I, line 7} \\ \mbox{If (loss), enter "-0-" in Part I, line 7} \end{array}\}$ 75,612. 2 Capital gain net income or (net capital loss) 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8 N/A

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or  1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter (attach copy of letter if necessary-see instructions)  b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	4948 - see	instruc	ction	s}
Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				<u> </u>
				1
h Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1%				i
B Someone reactions that most the section 15 to(e) requirements in 1 art v, enough note	1		1,1	<u>09.</u>
of Part I, line 27b				
f c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) $m J$				]
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			0.
3 Add lines 1 and 2	3		<u>1,1</u>	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-	5		1,1	<u>09.</u>
6 Credits/Payments				i
a 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 1,120				
	<u>-</u>			
Tan pale than approached to state to the (15th 5555)	<u>-</u>			
	<u></u>		1 1	<del></del>
7 Total credits and payments Add lines 6a through 6d	7		1,1	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			0.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>9</b>			11
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			11.
11 Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 11. Refunded ▶  Part VII-A   Statements Regarding Activities	<u>  11                                  </u>		-	0.
		$\overline{}$	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interventions.	ine in		163	X
any political campaign?	£	1a	-	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the de	minition	1b		<del>  ^</del> _
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
distributed by the foundation in connection with the activities.				
c Did the foundation file Form 1120-POL for this year?		10	-	<del>  ^</del> -
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	•			
	•			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 •				
		2	ļ	X
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			<del> </del>	<u> </u>
If "Yes," attach a detailed description of the activities  3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	or			1 1
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, 01	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		<del></del>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<del>                                     </del>	X
If "Yes," attach the statement required by General Instruction T				<del>                                     </del>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
By language in the governing instrument, or				
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st</li> </ul>	ate law			
remain in the governing instrument?		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	Х	
8a Enter the states to which the foundation reports or with which it is registered. See instructions		-	İ	
VA		-		] [
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	.l	8b	X	<del></del>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for co	aienoar			X
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		9		$\frac{\Lambda}{X}$
10 Did any persons become substantial contributors during the tax year? If Yes attach a schedule listing their names and addresses		<u>  10  </u> Form <b>99</b> 0	n_PF	

Part 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?	<del>- '  </del>		<del></del>
If "Yes," attach statement. See instructions	12		Х
·	13	Х	
Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
Website address ► N/A  14 The books are in care of ► THE FOUNDATION  Telephone no ► 703-48	1 61	00	
		100	
Located at ► 40936 SPECTACULAR BID PLACE, LEESBURG, VA ZIP+4 ► 20	1/6		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	27	,¬►	Ш
and enter the amount of tax-exempt interest received or accrued during the year	N,	_	<del></del>
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,	$\longrightarrow$	Yes	No
securities, or other financial account in a foreign country?	16		<u>X</u>
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
foreign country			
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year, did the foundation (either directly or indirectly)			1
(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)			1
a disqualified person?	1		- 1
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		ŀ	1
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		- [	l
(5) Transfer any income or assets to a disqualified person (or make any of either available	1 1		- 1
for the benefit or use of a disqualified person)?	l i		ł
(6) Agree to pay money or property to a government official? (Exception Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)  Yes X No			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
Organizations relying on a current notice regarding disaster assistance, check here	<del>'''  </del>		_
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			
before the first day of the tax year beginning in 2018?	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<del>  "  </del>		<del></del> -
defined in section 4942(j)(3) or 4942(j)(5)).			
		l	1
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?  Yes X No			
<del></del>			1
If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			- 1
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			ŀ
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		
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>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1
during the year?			1
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			l
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
Form 4720, to determine if the foundation had excess business holdings in 2018 ) N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 <u>a</u>		<u>X</u>
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	-		ــــــــــــــــــــــــــــــــــــــ
had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X
Foi	m <b>990</b>	-PF (	2018)

Form	990-PF	(2018)

Λ

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

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Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, 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		
	7	
	7	
	7	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	ical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	ines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
· · · · · · · · · · · · · · · · · · ·		
<b>7</b> 1 Add 4 4 1 0		
Total. Add lines 1 through 3	<u> </u>	0.
		Form <b>990-PF</b> (2018)

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`P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	1,739,159.
b	Average of monthly cash balances	1b	1,739,159. 311,010.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,050,169.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,050,169.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	30,753.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,019,416.
6	Minimum investment return Enter 5% of line 5	6	100,971.
Р	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	d certain	
	foreign organizations, check here 🕨 🔃 and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	100,971.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,109.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	99,862.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	99,862.
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.	7	99,862.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		104 000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	104,272.
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		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	104 070
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	104,272.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_ [	1 100
	Income. Enter 1% of Part I, line 27b	5	1,109. 103,163.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	uaiities to	or the section
	4940(e) reduction of tax in those years		

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# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				99,862.
2 Undistributed income, if any, as of the end of 2018				<u> </u>
a Enter amount for 2017 only			0.	
<b>b</b> Total for prior years		0.		
3 Excess distributions carryover, if any, to 2018		0.		
a From 2013				
b From 2014				
c From 2015 4,861.				
d From 2016				
e From 2017				
f Total of lines 3a through e	4,861.			
4 Qualifying distributions for 2018 from	·			
Part XII, line 4 ►\$ 104,272.				
a Applied to 2017, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				ı
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	Ů.			
d Applied to 2018 distributable amount				99,862.
e Remaining amount distributed out of corpus	4,410.			ŀ
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount muct be chown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				,
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,271.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		1
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		0.		
amount - see instructions		0.		
e Undistributed income for 2017 Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2018 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				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 2013				
not applied on line 5 or line 7	0.		_	
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	9,271.			
O Analysis of line 9	$\neg$	$\Box$	<del></del>	<u></u>
a Excess from 2014		1		ł
b Excess from 2015 4,861.				,
c Excess from 2016				ı
d Excess from 2017				
e Excess from 2018 4,410.				
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	ID MCMUNN			27-10	008331 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2018, enter the date of t	the ruling	▶		
<b>b</b> Check box to indicate whether the foun		ig foundation described i		4942(j)(3)_or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	U . 0045	Prior 3 years	1 (0.0046	
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed	_				1
<b>b</b> 85% of line 2a				/	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				1	
e Qualifying distributions made directly			1	9	
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon  a "Assets" alternative test - enter			<b>I</b>		
(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					<del></del>
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)	/				
(2) Support from general public			-		
and 5 or more exempt					
organizations as provided in 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	te this part only it	the foundation I	nad \$5,000 or mo	re in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	•	than 2% of the total contr	ibutions received by the	foundation before the clos	se of any tax
year (but only if they have contributed i			•		•
SEE STATEMENT 10					
b List any managers of the foundation wh	o own 10% or more of the	e stock of a corporation (	or an equally large portio	n of the ownership of a pa	artnership or
other entity) of which the foundation ha					
NONE					
2 Information Regarding Contribut	ion, Grant, Gıft, Loan,	Scholarship, etc., Pro	ograms:		
Check here ► X If the foundation				ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	to individuals or organiza	tions under other conditi	ons, complete items 2a, t	o, c, and d.	
a The name, address, and telephone num	ber or email address of th	e person to whom applica	ations should be address	ed	
<b>b</b> The form in which applications should be	pe submitted and informat	ion and materials they sh	ould include		
c Any submission deadlines				<del> </del>	
		<del></del>			
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or o	ther factors	

3 Grants and Contributions Paid During the		Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		<del> </del>
a Paid during the year				
N. G. G. G. G. G. G. G. G. G. G. G. G. G.				
ALZHEIMERS ASSOCIATION		PC	GENERAL OPERATING SUPPORT	
WASHINGTON, DC				1,00
AMERICAN UNIVERSITY IN CAIRO		₽C	GENERAL OPERATING	
MELL VORV. NV			SUPPORT	1 02
NEW YORK, NY		-		1,03
AMERICARES		₽C	GENERAL OPERATING	
THE CANAD			SUPPORT	
STAMFORD, CT				5,00
BLUE RIDGE AREA FOOD BANK		₽C	GENERAL OPERATING	
VERONA, VA			SUPPORT	1,00
BOULDER CREST RETREAT FOR MILITARY AND VETERAN WELLNESS		₽C	GENERAL OPERATING SUPPORT	
BLUEMONT, VA	 NTINUATION SHEE	T ( C )	<b>.</b>	1,25
Total SEE CO  b Approved for future payment	NIINOAIION SHEE	1 (8)	<b>▶</b> 3a	100,02
, , , , , , , , , , , , , , , , , , , ,				
NONE				
NONE				
<del></del>			+	
Total		L	▶ 3b	
			For	m <b>990-PF</b> (20

Part XV   Supplementary Information  Grants and Contributions Paid During the Y			<u> </u>	<u> </u>
Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	Toopport		
CANINE COMPANIONS FOR INDEPENDENCE		₽C	GENERAL OPERATING SUPPORT	
MEDFORD, NY				2,000
CENTRAL CATHOLIC HIGH SCHOOL		₽C	GENERAL OPERATING SUPPORT	
PITTSBURGH, PA			-	1,000
CHARITY NAVIGATOR		₽C	GENERAL OPERATING	
GLEN ROCK, NJ				500
DOCTORS WITHOUT BORDERS		PC	GENERAL OPERATING SUPPORT	
NEW YORK, NY			!	2,500
ENVIRONMENTAL DEFENSE FUND		PC	GENERAL OPERATING SUPPORT	
WASHINGTON, DC				5,000
EUGENE BELL FOUNDATION		₽C	GENERAL OPERATING SUPPORT	
WASHINGTON, DC				1,000
FERTILE GROUND		PC	GENERAL OPERATING SUPPORT	
PORTLAND, OR				3,500
FLORIDA STATE UNIVERSITY FOUNDATION		PC	GENERAL OPERATING SUPPORT	
TALLAHASSEE, FL				1,000
FRATERNAL ORDER OF POLICE LODGE		РC	GENERAL OPERATING SUPPORT	1,750
GEORGE C. MARSHALL INTERNATIONAL		PC	GENERAL OPERATING SUPPORT	
LEESBURG, VA		]		1,000
Total from continuation sheets				90,735

C/O DAVID MCMUNN 27-1008331 Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor GENERAL OPERATING GEORGE MASON UNIVERSITY РC SUPPORT FAIRFAX, VA 1,000. GEORGETOWN UNIVERSITY ÞС GENERAL OPERATING SUPPORT WASHINGTON, DC 1,000. GENERAL OPERATING GEORGIA FOUNDATION FOR PUBLIC ₽c SUPPORT EDUCATION 2,000. ATLANTA, GA GENERAL OPERATING GUIDING EYES FOR THE BLIND ÞС SUPPORT YORKTOWN HEIGHTS NY 4,000. INOVA HEALTH LOUDOUN HOSPITAL GENERAL OPERATING ÞС FOUNDATION SUPPORT LEESBURG, VA 10,000. LOUDOUN HUNGER RELIEF GENERAL OPERATING ÞС SUPPORT 2,000. LEESBURG, VA LOUDOUN THERAPEUTIC RIDING GENERAL OPERATING SUPPORT 8,966. LEESBURG, VA MORVEN PARK FOUNDATION GENERAL OPERATING ÞС SUPPORT LEESBURG, VA 1,000. NATIONAL GEOGRAPHIC SOCIETY GENERAL OPERATING ÞС SUPPORT WASHINGTON, DC 3,000. NATURE CONSERVATORY GENERAL OPERATING ÞС

ARLINGTON, VA

5,000.

SUPPORT

Total from continuation sheets

Part XV   Supplementary Information				т
3 Grants and Contributions Paid During the Ye	·	T	<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Maine and address (nome or business)	or substantial contributor	recipient		
NAVAL INTELLIGENCE FOUNDATION		₽C	GENERAL OPERATING SUPPORT	
WASHINGTON, DC				1,000.
NAVAL INTELLIGENCE PROFESSIONALS		₽C	GENERAL OPERATING SUPPORT	
BURKE, VA				1,000.
NAVY MARINE CORPS RELIEF SOCIETY		PC	GENERAL OPERATING SUPPORT	
BETHESDA, MD				1,000.
NAVY SEAL FOUNDATION	,	₽C	GENERAL OPERATING SUPPORT	
VIRGINIA BEACH, VA				1,000.
OATLANDS	:	PC	GENERAL OPERATING	6,500.
LEESBURG, VA				0,300.
PUPPIES BEHIND BARS		РC	GENERAL OPERATING SUPPORT	
NEW YORK, NY				2,000.
SAINT VINCENT COLLEGE		₽C	GENERAL OPERATING SUPPORT	
LATROBE, PA				1,000.
SALVATION ARMY		PC	GENERAL OPERATING	
LEESBURG, VA				1,000.
SMILE TRAIN		PC	GENERAL OPERATING	
NEW YORK, NY				500.
US NAVY MEMORIAL		₽C	GENERAL OPERATING SUPPORT	
WASHINGTON, DC  Total from continuation sheets				1,000.

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
JSO		₽C	GENERAL OPERATING	
WASHINGTON, DC			SUPPORT	2,50
				· · · · · · ·
VIETNAM VETERANS MEMORIAL FUND		₽C	GENERAL OPERATING	
			SUPPORT	
VASHINGTON, DC				1,000
/ETA		₽C	GENERAL OPERATING SUPPORT	
WASHINGTON, DC			SUPPORT	5,000
OLFTRAP FOUNDATION		₽C	GENERAL OPERATING	
			SUPPORT	
VIENNA, VA				5,000
EUKEMIA AND LYMPHOMA SOCIETY O G ST NE STE 501		PC	GENERAL OPERATING SUPPORT	
ASHINGTON, DC 20002				1,000
AGE TURNERS MAKE GREAT LEARNERS		PC	GENERAL OPERATING	
O BOX 7723 TLANTA, GA 30357			SUPPORT	1,500
·				
PECIAL OLYMPICS		PC	GENERAL OPERATING	
133 19TH ST NW			SUPPORT	
ASHINGTON, DC 20036				519
OAA FOUNDATION 01 N WASHINGTON ST		PC	GENERAL OPERATING SUPPORT	
LEXANDRIA, VA 22314				1,000
			,	

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

Enter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)	
gross uniosities construction	(a)	(b)	Exclu-	(d)	Related or exempt	
1 Program service revenue.	Business   code	Amount	sion	Amount	function income	
a	3332					
b						
					· · · · · ·	
c	1 1		1			
e					1000	
f		· ·	1			
g Fees and contracts from government agencies						
2 Membership dues and assessments		· · · ·				
3 Interest on savings and temporary cash						
investments			14	3,812.		
4 Dividends and interest from securities			14	3,812. 41,378.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income			14			
8 Gain or (loss) from sales of assets other						
than inventory			18	75,612.		
9 Net income or (loss) from special events		-				
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
C						
d	_					
e						
12 Subtotal Add columns (b), (d), and (e)		0	•	120,802.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	120,802.	
(See worksheet in line 13 instructions to verify calculations)	)					

#### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
<u> </u>	
- +	
<del></del>	
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Exempt Organizations    Doth the organization described perapse in any of the following with any other organization described in section 501(c) (rober than section 501(c)) (rober than section 501(c)) organizations or in section 522, relating to political organizations?    Transfers from the reporting foundation to a rencharitable exempt organization of.   Other sesses   1a(1)	Part XVII	Information Re		and Transactions an	nd Relationships With No	ncharitable	Pi	age 13
to their than section \$01(c)(3) or ganizations) or in section \$27, relating to political organizations?  1 Transfers from the reporting foundation to a noncharidable exempt organization of.  2 (2) Other assets  1 (3) Sales of assets from a noncharidable exempt organization  (1) Sales of assets from a noncharidable exempt organization  (2) Purchased of assets from a noncharidable exempt organization  (3) Purchased of assets from a noncharidable exempt organization  (4) Purchased of assets from a noncharidable exempt organization  (5) Loans or loan guarantees  (6) Performance of survivors or imembership or fundrasing solicitations  (6) Performance of survivors or imembership or fundrasing solicitations  (7) Sales of assets to any of the above is Yes, Tomplete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or an advantage of a survivors of the above is Yes, Tomplete the following received less than fair market value in any fundaction or sharing arrangement, show in column (7) the value of the goods, other assets, or services received in a scalino 501(c) (other than section 501(c)) of the poots, other assets, or services received in a scalino 501(c) (other than section 501(c)) of the poots, other assets, or services received in a scalino 501(c) (other than section 501(c)) of the poots, other assets, or services received in the poots, other assets, or services received in a scalino 501(c) (other than section 501(c)) of the poots, other assets, or services received in the poots, other assets, or services previous of the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots, other assets, or services previous or the poots,						<del>-</del> -	1.7	
a Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash (2) Other assacles  (2) Other assacles (3) Sales of assets to a noncharitable exempt organization (3) Perubuses of assets from a noncharitable exempt organization (3) Perubuses of assets from a noncharitable exempt organization (3) Perubuses of assets from a noncharitable exempt organization (4) Rembursament arrangements (5) Clears or Cash any parameter (6) Performance of services process or membership or fund assets, or paid employees (6) Performance of services process or membership or fund assets, or paid employees (6) Life asset or any or the above is "Yes," complete the following schedule. Column (a) the services or any or the above is "Yes, Complete the following schedule (a) Life is a services process by the reporting floatations received less than fair market value in any transaction or alraining arrangement, show in column (a) the value of the goods, other assets, or services received (a) Levine (b) Amount microbard (c) Italians of noncharitable exempt organization (d) Description of relationship.  2a Is the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organization described in section 501(c) (other than section 501(c)) or in section 527?  b If Yes, Complete the following schedule (a) Name of forganization (b) Type of organization (c) Description of relationship.  N/A  Sign in Wester Schedule (a) Name of forganization (b) Type of organization (c) Description of relationship.  N/A  Sign in Wester Schedule (a) Name of forganization (b) Type of organization (c) Description of relationship.  N/A  Sign in Wester Schedule (a) Name of forganization of prepare follows that transport in the transport is the second prepared to the prepared to the second prepared to the second prepared to the second prepared to the second prepared to the second prepared to the second prepared to the second prepared to the second prepared to the second prepared to the second prepared to the seco					on described in section 501(c)		Yes	No
(1) Cash (2) Other assets (3) States of assets from a nonchariable exempt organization (1) States of assets from a nonchariable exempt organization (2) Purchase of assets from a nonchariable exempt organization (3) Renal of tachines, equipment, or other assets (4) Remburscenter arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Example of acidities, equipment, making false, other assets, or part employees (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (1) It me answer to any of the above is "vest," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services green by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in continuous and the goods, other assets, or services green by the reporting foundation if the foundation received less than fair market value on any transactions or sharing arrangement, show in continuous and programment, show in any transaction or sharing arrangement, show in any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions, and any transactions are any transactions, and any transactions are any transactions, and any transactions are any transactions, and any transactions are any transactions, and any transactions are any transactions.	•		•	• •				
13/2		· =	lation to a noncharitable exempt o	rganization of.				_ v
b Other transactions  (1) Sales of assets to an anocharitable exempt organization  (2) Peur Chases of assets from a noncharitable exempt organization  (3) Rental of tachilles, equipment, or other assets  (4) Reimburgemental rangements  (5) Loans or loan quarantees  (6) Petromane of services or membership or fundraising solicitations  (7) Salary of tachilles, equipment, making lists, other assets, or paid employees  (8) Petromane of services or membership or fundraising solicitations  (9) Petromane of services or membership or fundraising solicitations  (15) X 19(5) X  (16) Example of a colinities, requipment, making lists, other assets, or and employees  (17) A 19(6) I His answer to any of the above is "Yes," complete the following schedule  (18) Amount involved  (19) Amount invol								_
(1) Sales of assets to an anocharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of Tacillates, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guisantees (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, analized is a services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services premise the assets, or paid employees (15) Loans or claims, equipment, analized is a services or membership or fundrasing solicitations (16) In an accordance of the above is "Yes," complete the following schedule. Column (8) 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 (9) the value of the goods, other assets, or services received (1) In a no (1) Amount involved (1) Name of noncharriable exempt organization (4) Desergement or sharing arrangements. Nin A (1) Name of noncharriable exempt organization (4) Desergement of sharing arrangements. Nin A (1) Nin A (2) Name of noncharriable exempt organization (4) Desergement of sharing arrangements. Nin A (2) Name of organization (4) Desergement of sharing arrangements. Nin Nin A (2) Name of organization (4) Desergement of sharing arrangements. Nin Nin Nin Nin Nin Nin Nin Nin Nin Nin						1a(2)		<u> </u>
23   Purchases of assets from a noncharitable exempt organization   15(2)   X   15(3)   X   15(3)   X   15(3)   X   15(3)   X   15(4)   X   15(4)   X   15(5)   X   15(5)   X   15(5)   X   15(6)			ahla ayamnt organization			15/13		v
33   Renatol of facilities, equipment, or other assets   1943								_
(4) Permbursement arrangements (5) Loans to Irang usarrates (6) Performance of services or membership or fundrassing solicitations  c. Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d. If the answer to any of the above is "Fest, complicit 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 fransaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received.  (a) Amount involved  (b) Amount involved  (c) Name of nonchartable exempt organization  (d) Casserption of relationship.  7 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  1 Yes ▼ No  2 No Performance of payary 1 declars that I have examined the rature, including accompanying schedules and lastements, and to the best of my knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any knowledge or short in the payary is based on all information of which proper has any kno								<del></del>
(5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) It is a Sharing of Indiana. The fundation contend the solicity 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 received dest 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) \text{\text{No}} (b) Amount involved (c) Name of noncharitable exempt organization (d) Occomption of transform, irransactions, and sharing arrangements  N / A  10 A	` '						<u> </u>	-
(a) Performance of services or membership or fundassings solicitations  c Sharing of facilities, equipment, making lists, other assets, or paid employees  d if the answer to any of the above is "Vis", complete the following schedulic. Column (b) should always show the fair market value of the goods, other assets, or services gover 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) I have value of the goods, other assets, or services received.  (a) I have value of the goods, other assets, or services received.  (a) I have 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 relationship.  2a Is the foundation directly or indexetly 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.  N/A  Sign in section 501(c) (other than section 501(c)(3)) or in section 501(c)(3) or in section 501(c)	٠.		•				<u> </u>	
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "es;" 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 created 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) I.me no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of sharifers, wanasctons, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization described in section 501(c) (other than section 501(c) (other than section 501(c) (d)) or in section 52??  b. If "Yes," complete the following schedule  (a) Name of organization (b) Type of organization (e) Description of relationship  N/A  Sign affiliated with, or related to the property foundation diversity or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (other than section 501(c) (d)) or in section 52??  b. If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization (e) Description of relationship  N/A  Sign affiliated with, or related to the property of packed and administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the best of my knowledge and packed administry of the b	• •	=	embership or fundraising solicitati	ions				_
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 green 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) Lines no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of handlers, transactions, and sharing arrangements  N / A  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 organizations (c) Description of relationship  N / A			•					-
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(a) Description of transform, and shall may arrangements  N/A  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)) (other than section 50	or servici	es given by the reporting f	foundation. If the foundation recei	ved less than fair market value	e in any transaction or sharing arrang	gement, show in		
N/A  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  N/A  Sign   Under appoilties of person, I declare that I have examined this relation, including accompanying schedules and distancements, and to the best of my knowledge in the second property of the third interpretation of prepare (other than topopyer) is bead on all information of which preparer has any knowledge shown below? Sea may showledge the second property of the second of th	column (	d) the value of the goods,	other assets, or services received	1				
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  N/A  Sign Here    Linete peculine of partyr. I declars that have examined this valuer, including accompanying schedules and distinguished or mall information of which programe has any knowledge and information of which programe has any knowledge and information of which programe has any knowledge and information of which programe has any knowledge and information of which programe has any knowledge and all information of which programe has any knowledge and all information of which programe has any knowledge and all information of which programe has any knowledge and all information of which programe has any knowledge and all information of which programe has any knowledge and all information of which programe has any knowledge and all information of which programe has any knowledge. The program and any knowledge and all information of which programe has any knowledge. The program and any knowledge and all information of which programe has any knowledge. The program and any knowledge and all information of which program has any knowledge. The program and any knowledge and all information of which program has any knowledge. The program and any knowledge and all information of which program has any knowledge. The program and any knowledge and all information of which program has any knowledge. The program and any knowledge and all information of which program has any knowledge. The program and any knowledge and all information of which program has any knowledge. The program and any knowledge and all information of which program has any knowledge.  Print you for the program and any knowledge and all information of which program has any knowledge.  Print you for the program and any knowledge and all	(a) Line no	(b) Amount involved	<del>+ '</del>	le exempt organization	(d) Description of transfers, transaction	ctions, and sharing air	angemer	ıts
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			N/A					
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes							· · · · · · · · ·	
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes								
In section 501(c) (other than section 501(c)(3)) or in section 527?								
In section 501(c) (other than section 501(c)(3)) or in section 527?	-							
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In section 501(c) (other than section 501(c)(3)) or in section 527?				<del></del> .				
Sign   Under panalties of per jury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and per jury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and per jury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and per jury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and per jury in the preparer shown below? See in this return with the preparer shown below? See in shown	2a Is the fou	indation directly or indirec	tly affiliated with, or related to, on	ie or more tax-exempt organiz	zations described			
(a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A    N/A   N/A	ın section	n 501(c) (other than sectio	on 501(c)(3)) or in section 527?			Yes	X	] No
N/A  Sign Here  Print/Type preparer's name ANGELA M. CHANEY, CPA  Firm's address ▶ 805 KING FARM BLVD, 3RD FLOOR ROCKVILLE, MD 20850  Phone no 301-231-6200	b If "Yes," c	<u>-</u>		1				
Sign Here    Sign Here		<u>`</u>	ganization	(b) Type of organization	(c) Description of	relationship		
Sign   Here   Signature of officer or frustee   Signature   Sig		N/A						
Sign   Here   Signature of officer or frustee   Signature   Sig			-					
Sign   Here   Signature of officer or frustee   Signature   Sig								
Sign   Here   Signature of officer or frustee   Signature   Sig				1				
Here    Sign and delies it is true, correct and complete declaration of preparer (other finant taxpayer) is based on all information of which preparer shown below? See instruction with the preparer shown below? See instruction with the preparer shown below? See instruction with the preparer shown below? See instruction with the preparer shown below? See instruction with the preparer shown below? See instruction in preparer in prepare	Under	penalties of perjury, I declare t	that I have examined this return, includin	g accompanying schedules and sta	atements, and to the best of my knowledge	M the 100		_
Paid Preparer Use Only  Prim's address ▶ 805 KING FARM BLVD, 3RD FLOOR ROCKVILLE, MD 20850    Print   Signature	Sign and b	elief, it is true, correct and com	nplete Declaration of preparer (other that	n taxpayer) is based on all informati	ion of which preparer has any knowledge	return with thi	prepare	er te
Paid Preparer Use Only  Pirm's address ▶ 805 KING FARM BLVD, 3RD FLOOR ROCKVILLE, MD 20850  Paid Print/Type/preparer's name ANGELA M. CHANEY, Preparer's signature S/3/1/9  Print/Type/preparer's name Date Check if Self- employed Self- employed P1N self- employ	Here	Acrel [1]	Muses	15/13/201	9 PRETIDENT	77	96 1115	7
Paid Preparer Use Only  ANGELA M. CHANEY, CPA Firm's name ► ARONSON LLC Firm's address ► 805 KING FARM BLVD, 3RD FLOOR ROCKVILLE, MD 20850  Pol 353189 Firm's EIN ► 37-1611326  Phone no 301-231-6200	Sigi	nature of office or trustee	· · · · · · · · · · · · · · · · · · ·	Date /	Title			
Paid Preparer Use Only         CPA         WWW 2/10/		Print/Type preparer's na	ame Preparer's	signature	Date Check if	PTIN		
Preparer Use Only  Firm's name ► ARONSON LLC  Firm's address ► 805 KING FARM BLVD, 3RD FLOOR  ROCKVILLE, MD 20850  Phone no 301-231-6200		ANGELA M.	CHANEY,   )	M MChanul	5/12/1/4 self- employed			
Use Only  Firm's address ▶ 805 KING FARM BLVD, 3RD FLOOR  ROCKVILLE, MD 20850  Phone no 301-231-6200				Yu The way	2/(//()			
Firm's address ► 805 KING FARM BLVD, 3RD FLOOR ROCKVILLE, MD 20850 Phone no 301-231-6200	•	Firm's name ARO	NSON LLC	' '	Fırm's EIN ►	37-16113	26	
ROCKVILLE, MD 20850 Phone no 301-231-6200	Use Unly			` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `				
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		I RO	CKVILLE, MD 208	150	Phone no 3			100:5

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY	CASH INVESTMENTS	STATEMENT 1
SOURCE	(A)	(B)	(C)
	REVENUE	NET INVESTMENT	ADJUSTED
	PER BOOKS	INCOME	NET INCOME
AMERICAN ENTERPRISE #8462	2,463.	2,463.	,
NAVY FEDERAL CREDIT UNION	257.	257.	
RAYMOND JAMES #7985	1,092.	1,092.	
TOTAL TO PART I, LINE 3	3,812.	3,812.	

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES ST	ATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
AMERICAN					
ENTERPRISE 3805-DIVIDENDS AMERICAN	10,702.	208.	10,494.	10,494.	
ENTERPRISE 3805-INTEREST AMERICAN	10.	0.	10.	10.	
ENTERPRISE 8268-DIVIDENDS AMERICAN ENTERPRISE	6,373.	0.	6,373.	6,373.	
8268-INTEREST AMERICAN ENTERPRISE	10.	0.	10.	10.	
8462-INTEREST AMERICAN ENTERPRISE	3,453.	0.	3,453.	3,453.	
9174-DIVIDENDS AMERICAN	3,944.	20.	3,924.	3,924.	
ENTERPRISE 9174-INTEREST AMERIPRISE ACCOUNT	6.	0.	6.	6.	
#5755 - INTEREST AMERIPRISE ACCOUNT	2,446.	0.	2,446.	2,446.	
#9863 - INTEREST BROOKFIELD INFRAST PARTNER	954.	0.	954.	954.	
K-1-DIVIDEND BROOKFIELD INFRAST PARTNER	891.	0.	891.	891.	
K-1-INTEREST ENTERPRISE PRODUCTS PARTNERS	16.	0.	16.	16.	
K-1-INTEREST RAYMOND JAMES	<826.>	0.	<826.>	<826.>	
7985-DIVIDENDS RAYMOND JAMES	581.	0.	581.	581.	
7985-INTEREST RAYMOND JAMES	272.	0.	272.	272.	
9991-DIVIDENDS RAYMOND JAMES	24,399.	11,684.	12,715.	12,715.	
9991-INTEREST	59.	0.	59.	59.	
TO PART I, LINE 4	53,290.	11,912.	41,378.	41,378.	

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 3
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
TAX PREPARATION AND ACCOUNTING FEES	8,233.	4,000.		4,233.
TO FORM 990-PF, PG 1, LN 16B	8,233.	4,000.		4,233.
FORM 990-PF (	THER PROFES	SIONAL FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	3,322.	3,322.		0.
TO FORM 990-PF, PG 1, LN 16C	3,322.	3,322.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE PURPOSES
FOREIGN TAX - RAYMOND JAMES 9991 FOREIGN TAX - AMERICAN	233.	233.		0.
ENTERPRISE 9174	50.	50.		0.
FOREIGN TAX - AMERICAN ENTERPRISE 3805 TAXES	84. 2,214.			0.
TO FORM 990-PF, PG 1, LN 18	2,581.	2,581.		0.
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FORM 990-PF	OTHER EXPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
SUPPLIES AND POSTAGE	16.	0.		16.	
TO FORM 990-PF, PG 1, LN 23	16.	0.		16.	

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
AMERIPRISE 9174		161,356.	170,801.
RAYMOND JAMES 9991		193,427.	216,151.
AMERIPRISE 8268		120,102.	103,702.
AMERIPRISE 3805		318,735.	321,214.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	793,620.	811,868.
FORM 990-PF	CORPORATE BONDS		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
RAYMOND JAMES - 7985		50,000.	50,000.
AMERIPRISE 8462		259,967.	256,384.
RAYMOND JAMES - 9991		197,032.	169,282.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	506,999.	475,666.

FORM 990-PF	OTHER INVESTMENT	S	STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LOST RHINO ENTERPRISE PRODUCT PARTNERS	COST COST	250,000. 7,785.	250,000. 15,271.
BROOKFIELD PROPERTY PARTNERS	COST	8,548.	12,729.
TOTAL TO FORM 990-PF, PART II,	LINE 13	266,333.	278,000.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 10

NAME OF MANAGER

DAVID J MCMUNN SUSAN F. MCMUNN