) Form 9,90-PF

**Return of Private Foundation** 

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PFfor instructions and the latest information.

Open to Public Inspection

- F	For ca	alendar year 2019 or tax year beginning		, 2019, and end	ling		, 20
		of foundation				A Employer identific	ation number
	NE	PENI FOUNDATION #013027023687	1			31-6	5065583
Ī		er and street (or P.O. box number if mail is not delivered to		Room/su	te I	B Telephone number	
	PO	BOX 1908				877	7-756-8334
7	City or	town, state or province, country, and ZIP or foreign posta	il code				
	<b>0</b> D1	ANDO EL 2000 1000				If exemption application pending, check here.	on is
-		LANDO, FL 32802-1908					
(	G Ch	eck all that apply: Initial return	<b>—</b>	of a former public cha	irity	D 1. Foreign organization	
		Final return	Amended ret			2. Foreign organization 85% test, check her	
		Address change	Name change			computation	
_	H_Ch	eck type of organization: $X$ Section 501(		3.7	4 1	E If private foundation s	tatus was terminated
Ι.	<u>L</u> .	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(b)(	<b>►</b>
ı	Fai	ir market value of all assets at JAcco	unting method: X Ca	ash Accrual	1	F If the foundation is in	a 60-month termination
	en	d of year (from Part II, col. (c), line	ther (specify)				1)(B), check here . >
	16	) ▶ \$ 391,461. (Part I, o	column (d), must be on ca	ash basis.)			
	Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c)	Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
-	1			-			····
	2	Cheek V if the foundation is not required to	<del>-</del> :		<b>1</b>		
	3	Interest on savings and temporary cash investments.			<b></b>		
	4	Dividends and interest from securities	10,007.	10,006			STMT 1
	1		10,007.	10,7000			
	58	!			<del></del>		<del></del>
_		Net rental income or (foss)	2,379.				
9		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 108,810.	2,313.		<del>                                     </del>		
Ş	<u>ة</u>	assets on line 6a		2,379	<u> </u>		, <u>.</u>
á	회 7	Capital gain net income (from Part IV, line 2) .		<u> </u>	<del> </del>		
<u>Ø</u> ō	-  8	Net short-term capital gain	,				
S	10,	Income modifications			<del> </del>		
CANNE		and allowances			<del> </del>		
2	1	Less. Cost of goods sold .			<del>                                     </del>		
3	4	Gross profit or (loss) (attach schedule)			<del> </del>		CONTRACT O
, 1	' '	Other income (attach schedule)					STMT 2
] -	12	Total. Add lines 1 through 11	12,577.	12,385.	+		
	13	Compensation of officers, directors, trustees, etc	NONE				NON!
7 8	14 15 16 16	Other employee salaries and wages Pension plans, employee benefits	7	NONI		NONE	
ר ממאט מאט	5 15	Pension plans, employee benefits $\mathcal{UQ}.U.$	-40	NONE		NONE	
5	16a	Legal fees (attach schedule)					
Ц	,, F	Accounting fees (attach schedule) STMT. 3	2,500.	NONE		NONE	2,500
	<b>≧</b>   ⟨	Other professional fees (attach schools, 4.	465.	233.			233
9	17	Interest					
LUZU   Administrative	2 18	Taxes (attach schedule) (see instructions). 5.	1,052.	274.			
_ =	19	Depreciation (attach schedule) and depletion .					
3 5	20	Occupancy					
7 9 7	21	Travel, conferences, and meetings		NONE		NONE	
7 7	21	Printing and publications		NONE		NONE	-
<u> </u>	23	Other expenses (attach schedule)			T		
7 ‡	24	Total operating and administrative expenses.					<del></del>
-	23 24 25 26 27	Add lines 13 through 23	4,017.	507.		NONE	2,733.
ج ج چ	25	Contributions, gifts, grants paid	18,000.		<u> </u>		18,000.
<b>ዿ</b> ፞፝	26	Total expenses and disbursements. Add lines 24 and 25	22,017.	507.		NONE	20,733.
န္တ -	27	Subtract line 26 from line 12	22,011.		<del>                                     </del>	HONE	20,133.
룡	<b> </b> [	Excess of revenue over expenses and disbursements	-9,440.	,			
룘	:	Net investment income (if negative, enter -0-)	- 5,440.	11,878.			· · · · · · · · · · · · · · · · · · ·
3	1	Adjusted net income (if negative, enter -0-)		11,0/8.			

JSA For Paperwork Reduction Act Notice, see instructions.
9E1410 1000 HLS586 X71G 05/29/2020 13:11:57

P	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
_			amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		ng			
	2	Savings and temporary of	cash investments	4,703.	5,415	5,415
	3	Accounts receivable			A MANY LEMME OF	· ·
		Less. allowance for doub	otful accounts -			
	4	Pledges receivable ▶		and the second control of the second control		
	İ	Less. allowance for doub	otful accounts			
	5	Grants receivable		<u></u>		
	6	Receivables due from	officers, directors, trustees, and other			
		•	ach schedule) (see instructions)	· · · · · · · · · · · · · · · · · · ·		
	7		eceivable (attach schedule)			
			otful accounts  NONE			
Assets	8		e			
SS	9		eferred charges			
⋖			government obligations (attach schedule)			
	b	•	stock (attach schedule)			
	11 <sup>C</sup>	Investments - corporate Investments - land, building:	bonds (attach schedule)	· · · · · ·		
	• •	and equipment, basis		and the second of the second o		
			tion ▶	<del></del>	<del></del>	
	12	Investments - mortgage	loans	220 150	210 160	306 046
	13 14	Investments - other (atta Land, buildings, and	ch schedule) STMT .6	329,158.		i
		equipment basis Less, accumulated deprecia	tion			N 98 8 1 WW V P P
		(attach schedule)		<del></del>		
	15 16		completed by all filers - see the	<del></del>		
	10		age 1, item l)		_324,584.	391,461
_	47			333,001.		3527.102
	17 18		ccrued expenses			
S	19	* *				
≝	20		rs, trustees, and other disqualified persons.			
Liabilities	21		tes payable (attach schedule)			
:::	22		· <b>&gt;</b> )			
		· · · · · · · · · · · · · · · · · · ·				
	23	Total liabilities (add line	s 17 through 22)		NONE	
S		Foundations that follow	FASB ASC 958, check here			
nces		and complete lines 24,	25, 29, and 30.			
la	24	Net assets without dono	r restrictions			1
Ba	25	Net assets with donor re	strictions · · · · · · · · · · · · ·			'
nd	24 25 26	Foundations that do not fo	ollow FASB ASC 958, check here 🕒 🗓			Ì.
교		and complete lines 26 thro	ough 30.			
o	26	Capital stock, trust princi	pal, or current funds	333,861.	324,584.	1
ts	27	Paid⊣n or capital surplus, or	land, bldg., and equipment fund			
SSE	28	Retained earnings, accumula	ated income, endowment, or other funds		201 501	<u>,                                     </u>
Į	29		I balances (see instructions)	333,861.	324,584.	
Ne	27 28 29 30	Total liabilities and		222 261	204 504	
_				333,861.	324,584.	
			ges in Net Assets or Fund Bala		must save with	<del>-</del>
1			palances at beginning of year - Part			222 061
2			1 on prior year's return) line 27a			333,861. -9,440.
			led in line 2 (itemize) ►MF TIMING DIE		3	166.
			ed in line 2 (itemize) - Mr IIming Dir			324,587.
5			line 2 (itemize) ▶ ROUNDING	• • • • • • • • • • • • • • • •	5	3.
-			slances at end of year (line 4 minus li	ne 5) - Part II, column (h		324,584.
	1010	i not assets of fullu ba	nances at end of year time 4 minus n	no o, - i arcii, columni (c	// III 23   <b>0</b>	5 000 PE (0040)

Form	990₽F (2019)					Page <b>3</b>
Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
		scribe the kind(s) of property sold (for ex	· · · · · · · · · · · · · · · · · · ·	(b) How acquired	(c) Date acquired	(d) Date sold
	<u> </u>	rick warehouse; or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )
1 a	PUBLICLY TRADED	SECURITIES		ļ		
b	1					
C	<del></del>					
d	<u> </u>					
е	)					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
а	108,810.		106,431.			2,379.
b						-
C						
d						
e						
	Complete only for assets sh	owing gain in column (h) and owned b	y the foundation on 12/31/69.	(1)	Gains (Col. (h) ga	in minus
	(i) FMV as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)		(k), but not less t	han -0-) <b>or</b>
	(I) 1 IVIV 25 01 12/31/09	as of 12/31/69	over col. (j), if any		Losses (from co	. (h))
а						2,379.
b					·	·
C						
d						
е				, .	·	<del> </del>
2	Capital gain net income	or (not capital loss)   If ga	ain, also enter in Part I, line 7			
~		<b>(</b> 17 (10	oss), enter -0- in Part I, line 7	2		2,379.
3		ain or (loss) as defined in sections				
	<b>-</b>	art I, line 8, column (c). See inst	# I			
				3		
			uced Tax on Net Investment In section 4940(a) tax on net investment			
	ection 4940(d)(2) applies,		utable amount of any year in the b	ase perio	d?	Yes X No
		t qualify under section 4940(e). Do		·		
1	Enter the appropriate an	nount in each column for each year	r; see the instructions before makin	ig any en	tries.	
	(a)	(b)	(c)		(d) Distribution rat	
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col. (b) divided by	
	2018	15,740.	376,397.			0.041818
	2017	19,299.	362,235.			0.053278
	2016	2,453.	319,172.			0.007686
	2015	21,762.	348,036.		_	0.062528
	2014	20,080.	369,075.			0.054406
		<del> </del>				
2	Total of line 1, column (	d)		2		0.219716
3		o for the 5-year base period - divid				
		foundation has been in existence i		3		0.043943
	,		<i>'</i>			
4	Enter the net value of no	oncharitable-use assets for 2019 fro	om Part X, line 5	4		369,085.
5	Multiply line 4 by line 3.			5		16,219.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b) .		6		119.
7				7		16,338.
8	Enter qualifying distribut If line 8 is equal to or q	ions from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete t	8   hat part	using a 1% tax	20,733. rate. See the

Part VI instructions.

Form :	990-PF (2019) 31-6065583			Page 4	
Part	VP Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - see	instruction	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			<del></del>	
	5. (1. (1. (1. (1. (1. (1. (1. (1. (1. (1				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		119.	
	here X and enter 1% of Part I, line 27b				
C				•	
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	]	NONE	
3	Add lines 1 and 2	3		<u>119.</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	]	<u>NONE</u>	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		<u>119.</u>	
6	Credits/Payments:			ı	
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 436.			i	
ь	Exempt foreign organizations - tax withheld at source 6b NONE				
C	Tax paid with application for extension of time to file (Form 8868)6c NONE				
d	Backup withholding erroneously withheld			i	
7	Total credits and payments. Add lines 6a through 6d	7		<u>436.</u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		<u>317.</u>	
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 120. Refunded ▶	11		<u> 197.</u>	
Part	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it	Yes	No	
	participate or intervene in any political campaign?		1a	<u> </u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	? See the		1	
	instructions for the definition		1b	<u> X</u>	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of an	y materials		'	
	published or distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		1c	<u> </u>	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$	_			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	ımposed			
	on foundation managers.    \$		-  -	- <u></u> .	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS7		2	X	
	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 instrume	ent, articles		1 77	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	<u>X</u>	
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?		4b	<del> </del>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X	
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory dire	ctions 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," complete Part II, col. (c), a	nd Part XV	7 X	-	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	DC				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	ey General		. ~	
	(or designate) 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 of section 49	942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV			ļ	
	complete Part XIV		9	X	4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule li	isting their			
	names and addresses	-	10	X	
	····		οοο DE		

Par	t VI-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_		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	v	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	022	4	
14	The books are in care of ► SUNTRUST BANK  Telephone no. ► (877) 756-		4	
	Located at ► P.O. BOX 1908, ORLANDO, FL ZIP+4 ► 32802-1			ТТ
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	• •	•	
4.0	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	16		X
	over a bank, securities, or other financial account in a foreign country?	10_		
	the foreign country	,		
Par	t 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? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			,
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			ŧ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	3	•	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			, 1
	the benefit or use of a disqualified person)?			, 1
	(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.)			•
b	olf 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	1b		<u> X</u>
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	-: 1c		X,
_	were not corrected before the first day of the tax year beginning in 2019?	-10		
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))	_		
	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
-	6d and 6e) for tax year(s) beginning before 2019?			:
	If "Yes," list the years			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ŧ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			<b>~</b>
	all years listed, answer "No" and attach statement - see instructions.}	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
	<b>&gt;</b>			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		.	[
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2019 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		Ì	•
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			. i
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			لمنجنت
_	foundation had excess business holdings in 2019.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		·	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	n DE	X (2010)

	t VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)			
5a	During the year, did the foundation pay or incur any amo	ount to.				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X N	lo		- 1
	(2) Influence the outcome of any specific public ele	ection (see section	4955); or to carry or	η,			
	directly or indirectly, any voter registration drive?			. Yes X N	io		
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	7	. Yes X N	lo		1
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described i				1
	section 4945(d)(4)(A)? See instructions			. Yes X N	lo		
	(5) Provide for any purpose other than religious, ch	narıtable, scientific,	literary, or educationa	,			;
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X N	o		}
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described i	in		,
	Regulations section 53.4945 or in a current notice regar	ding disaster assistan	ce? See instructions.		5ь		
	Organizations relying on a current notice regarding disas	ter assistance, check	here		•		
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t				r
	because it maintained expenditure responsibility for the	grant?		Yes N	0		ı
	If "Yes," attach the statement required by Regulations se						J
6a	Did the foundation, during the year, receive any fur	•					ì
	on a personal benefit contract?					-	· -
b	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contra	ict?	. 6b		<u> X</u>
_	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation a pa				1	·	
b	If "Yes," did the foundation receive any proceeds or have	•		onr	. 7b		<del></del> ,
8	Is the foundation subject to the section 4960 tax on pay			. Yes X N			
Dan	remuneration or excess parachute payment(s) during the VIII Information About Officers, Director	rs. Trustees. Fou	ındation Manage	s. Highly Paid Em	plovees.	IL	
	and Contractors						
_1	List all officers, directors, trustees, and foundation	n managers and to (b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	2000111	nt
	(a) Name and address	hours per week	(If not paid,	employee benefit plans			
		devoted to position	enter -0-)	and deferred compensation	other all	owances	
NANCY	M FOLGER	TRUSTEE	enter -0-}	and deferred compensation	other all	owances	
			enter -0-) - () -	and deferred compensation	other all	owances	-0-
2918	M FOLGER 33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER	TRUSTEE		_	other all	owances	-0-
2918 NEIL	33RD PL, NW, WASHINGTON, DC 20008-3527	TRUSTEE 1		_	other all	owances	-0-
2918 NEIL 6915	33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER	TRUSTEE  1 TRUSTEE	-0-	-0-	other all	owances	-0-
2918 NEIL 6915 NICHO	33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER RANNOCH ROAD, BETHESDA, MD 30817	TRUSTEE  1 TRUSTEE  1	-0-	-0-	other all		-0- -0-
2918 NEIL 6915 NICHO	33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER RANNOCH ROAD, BETHESDA, MD 30817 LAS FOLGER	TRUSTEE  1 TRUSTEE  1 TRUSTEE	-0-	-0-	other all		-0-
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER RANNOCH ROAD, BETHESDA, MD 30817 LAS FOLGER EDER ST, SANTA CRUZ, CA 95060	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1	-0- -0-	- 0 - - 0 - - 0 -			-0- -0- -0-
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1	-0- -0-	- 0 - - 0 - - 0 -			-0- -0- -0-
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER RANNOCH ROAD, BETHESDA, MD 30817 LAS FOLGER EDER ST, SANTA CRUZ, CA 95060	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those	-0- -0-	-0001 - see instructi	ons). If n	one, e	-0- -0- -0-
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-0- -0-	-001 - see instructi (d) Contributionsto employee benefit plans and deferred	ons). If n	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527 FOLGER RANNOCH ROAD, BETHESDA, MD 30817 DLAS FOLGER EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those)	-0- -0- -0- e included on line	-001- see instructi  (d) Contributionsto employee benefit	ons). If n	one, 6	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-0- -0- -0- e included on line	-001 - see instructi (d) Contributionsto employee benefit plans and deferred	(e) Expensother all	one, 6	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHO 352 M	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those hours per week	-000- e included on line (c) Compensation	-000- (d) Contributions to employee benefit plans and deferred compensation	(e) Expensother all	one, e	-0- -0- -0- enter
2918 NEIL 6915 NICHC 352 M 2 (a)	33RD PL, NW, WASHINGTON, DC 20008-3527  FOLGER  RANNOCH ROAD, BETHESDA, MD 30817  LAS FOLGER  EDER ST, SANTA CRUZ, CA 95060  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 TRUSTEE  1 TRUSTEE  1 (other than those the service of	-00000- NONE	-0001- see instructi (d) Contributions to employee benefit plans and deferred compensation  NONE	ons). If n  (e) Expensorer all	one, e	-0- -0- -0- enter

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Form 990°PF (2019)  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo	Page 7
and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
<del></del>	-
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1NONE	
2	
3	,
4	
Part IX-B Summary of Program-Related Investments (see instructions)	A
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1NONE	
2	
All other program-related investments. See instructions.  3 NONE	
Total Add lines 1 through 3	

Part X 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: 1a 359,132. 1b 15,574. NONE 1c 1d 374,706. Reduction claimed for blockage or other factors reported on lines 1a and NONE 2 374,706. 3 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 5,621 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 369,085. 18,454. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here ▶ and do not complete this part.) 18,454. Tax on investment income for 2019 from Part VI, line 5 . . . . . . . 2a Income tax for 2019. (This does not include the tax from Part VI.). . 2b 2c 119. 18,<u>335.</u> 3 3 NONE 4 4 18,335. 5 5 6 NONE 6 Deduction from distributable amount (see instructions)........... 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, 7 18,335. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 20,733. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26........ 1a 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., NONE 2 3 Amounts set aside for specific charitable projects that satisfy the: NONE NONE 3b 20,733. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 119. 20,614. Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

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Pa	t XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				18,335.
2	Undistributed income, if any, as of the end of 2019				
а	Enter amount for 2018 only			NONE	·
b	Total for prior years 20,20,20		NONE		
3	Excess distributions carryover, if any, to 2019.				
a	From 2014 NONE				
b	From 2015				
C	From 2016 NONE				
d	From 2017				•
е	From 2018 NONE				
f	Total of lines 3a through e	2,724.			
4	Qualifying distributions for 2019 from Part XII,				
	line 4: ▶ \$				
а	Applied to 2018, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
d	Applied to 2019 distributable amount				18,335.
	Remaining amount distributed out of corpus	2,398.			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same				
	amount must be shown in column (a).)	NONB			NONE
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	5,122.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
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)		370377		
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable		370377		
	amount - see instructions		NONE		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see			NONE	
	instructions			NONE	
f	Undistributed income for 2019. Subtract lines				
	4d and 5 from line 1. This amount must be				NONE
	distributed in 2020				NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section		İ		
	170(b)(1)(F) or 4942(g)(3) (Election may be	170177			
	required - see instructions)	NONB			
8	Excess distributions carryover from 2014 not	NONT			
	applied on line 5 or line 7 (see instructions)	NONE		·····	<del></del>
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	5,122.			
	Analysis of line 9.				
	Excess from 2015 1,351.			İ	
	Excess from 2016 NONE				
	Excess from 2017 1,373.				
	Excess from 2018 NONE				
е	Excess from 2019 2,398.				

Pai	rt XVV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating	
	foundation, and the ruling	s effective for 2019, en	ter the date of the ruling		▶	
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 4942()	)(3) or 4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years		
	justed net income from Part	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	I or the minimum investment					
	return from Part X for each					
	year listed				· · · · · · · · · · · · · · · · · · ·	
	85% of line 2a					
C	Qualifying distributions from Part XII, line 4, for each year listed .		\			
d	Amounts included in line 2c not		· · · · · · · · · · · · · · · · · · ·			<del></del>
_	used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c				/	
•	alternative test relied upon • •					
а	"Assets" alternative test - enter					
	(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 invest- ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(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					
	(j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income .					
Pai		tary Information (		only if the founda	ition had \$5,000 o	r more in assets at
	<del>-</del>	uring the year - see				<b>b</b>
	Information Regarding			11 00/ £41		ما المستقد الم
а	List any managers of before the close of any	the foundation who f	nave contributed mor	e than 2% of the tota	on contributions receiv	red by the foundation
		tax year (but only if tr	iey nave continuated n	nore than 45,000). (Si	ce section 507(u)(2)./	
	NONE					
b	List any managers of					y large portion of the
	ownership of a partner	snip or other entity) of	which the loungation	i nas a 10% or greater	mieresi.	
	NONE					
_	Information Regarding	Contribution Grant	Gift Loan Scholarshi	n etc Programs:	<u> </u>	
_		,		-		
	Check here ► X if t unsolicited requests for					
	complete items 2a, b,			ints, etc., to intuividua	iis or organizations di	idel other conditions,
				norsen to whom anni	iantiana abauld ba ada	traccad:
а	The name, address, an	a telepnone number o	r email address of the	person to wnom appi	ications should be add	iressea.
b	The form in which app	lications should be sub	omitted and information	on and materials they s	should include:	
	Any submission deadli	nes:				
	•					
				<del></del>	<u> </u>	
d	Any restrictions or li factors	mitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of	institutions, or other

Form 990-PF (2019) Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE STATEMENT 10 18,000. ► 3a 18,000. **b** Approved for future payment

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**▶** 3b

Total

art XVI-A Analysis of Income- ter gross amounts unless otherwise indicate		ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a					(Oct mon don one)
b					_
c					
d					_
e	l l				
f					
g Fees and contracts from government age	encies				·
Membership dues and assessments $\ \cdot \ \cdot$	•••	-			
Interest on savings and temporary cash investr	ments ·		14	10.007	
Dividends and interest from securities .	• • • •		14	10,007.	
Net rental income or (loss) from real estat	[· -				
a Debt-financed property					
<b>b</b> Not debt-financed property			<del> </del>	<del></del>	<del></del>
Net rental income or (loss) from personal pro					
Other investment income		<u> </u>	18	2,379.	
Gain or (loss) from sales of assets other than in			-  10	2,313.	
Net income or (loss) from special events			<del>                                     </del>		
Gross profit or (loss) from sales of inventor Other revenue: a	ory · ·				
b FEDERAL TAX REFUND			1	191.	- <del></del>
C			<del>-</del>		
П					
d			} }		
е				12,577.	<del></del>
eSubtotal. Add columns (b), (d), and (e) .				12,577.	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship	(e) ify calculations.)	ccomplishment of	Exempt Purp	00ses	12,57
Subtotal. Add columns (b), (d), and (e) - Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to veri	(e)	ccomplishment of	Exempt Purp	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of	Exempt Purp	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of	Exempt Purp	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of	Exempt Purp	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of	Exempt Purp	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to vericant XVI-B  Relationship of Actions  Explain below how each	(e)	ccomplishment of	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to verificant XVI-B  Relationship of Actionship.	(e)	ccomplishment of hincome is reported to purposes (other than	Exempt Purp in column (en by providing	ooses  of Part XVI-A contribut	12,57

Part )	KVII	Information Re Organizations	egarding Tra	nsfers to a	and Transact	ions and	l Relationships	s With Nonchar	itable	Exe	mpt
1 D	id the	e organization direct	ly or indirectly	engage in a	ny of the follo	wing with	any other organ	ization described		Yes	No
		ction 501(c) (other									
		zations?			•						
		ers from the reporting	g foundation to	a noncharita	ble exempt or	ganization	of:		1 1		
		sh							1a(1)		X
į,	2) Otl	her assets							1a(2)		X
ьО	ther i	transactions:									
(	1) Sal	les of assets to a non	charitable exer	mpt organizat	tion				16(1)		_X_
		rchases of assets from							1b(2)		X
		ntal of facilities, equip							1b(3)		_X_
(4	1) Re	imbursement arrange	ements						16(4)		X
(5	5) Loa	ans or loan guarantee	as		** ***	· · · · · · ·			1b(5)		X
		rformance of services									X
c S	harin	g of facilities, equipm	ent, mailing lis	sts. other asse	ets, or paid emo	lovees		,	1c		X
d if	the	answer to any of th	e above is "Y	es." complete	the following	schedule	. Column (b) st	nould always show	the f	air m	arket
	alue (	of the goods, other	assets, or serv	ices given b	v the reporting	foundatio	n. If the founda	ition received less	than f	air m	arket
		in any transaction or									
(a) Line	·····	(b) Amount involved			empt organization			rs, transactions, and shar			
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<del></del> ~						
	_	<del></del>			,			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			
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			L								
		foundation directly							٦,,		1
		ped in section 501(c)		ction 501(c)(	3)) or in section	n 5277			Ye	s X	i NO
b If	"Yes,	" complete the follow		ı			·	151-4	<u></u>		
		(a) Name of organization	n .	(b)	Type of organization	<u> </u>	10	) Description of relations	пір		
_							ļ	<del></del>			
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	· · · · · · · · · · · · · · · · · · ·	<u>.</u>		<u> </u>		<del></del>	<u> </u>				
	Under	r panalties of perjury, I decla it, and gomplote Declaration of	re that I have exam proparer (other than	iined this return, i laxpayer) is based o	ncluding accompanyli w to noitemiolal lie no	ng schedules a hich preparer hi	ind statements, and to as any knowledge	the best of my knowledg	a and be	illet, it	is true,
Sign	-	1/ 2/1/11		0 - 1 0	1 000			May the IRS	discuss	this	naturn
Here		1 WWWW	111,50	10 M 41	Mex, John	<u> </u>			parer sh		
uere	Sign	nature of officer or trustee		` Dayle	,	Title		See instruction	, <u>X</u>	Yes	No
,	<u> </u>		·····	U (/							
Daid		Print/Type preparer's nar	me	Preparer's	signature		Date	Cireck [ "	TIN		
Paid		JENNIFER AVE	RETTE	Kronn	ifu HV	evelle	0.105/11/2	020 self-employed	P0028	3188	5
Prepa			ANCH BANK		KUST			Firm's EIN 🕨 56-0	01492	200	
Use C	nly	Firm's address PO	BOX 2907	- TRUST	TAX DEPT						
			LSON, NC			27894-2	907	Phone no 844-38			
•								For	m 990	-PF	2019)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES 

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
	•	•
USGI KEPOKIED AS NONQUALIFIED DIVIDENDS	m (	m (
FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS	2,519. 1.	2,519.
DOMESTIC DIVIDENDS	4,711.	4,711.
OTHER INTEREST	355.	355.
	1,092.	1,092.
	1,235.	1,235.
SECTION 199A DIVIDENDS	91.	91.
TOTAL	10,007.	10,006.

STATEMENT

FORM 990PF, PART I - OTHER INCOME

REVENUE
AND
EXPENSES
PER BOOKS

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DESCRIPTION

FEDERAL TAX REFUND

191.

TOTALS

191.

STATEMENT

ACCOUNTING FEES	
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CHARITABLE PURPOSES		2,500.
ADJUSTED NET INCOME		NONE
NET INVESTMENT INCOME		NONE
REVENUE AND EXPENSES PER BOOKS		2,500.
	(NON-ALLOC	TOTALS
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC	

IL FEES	6 11 11 11 11	REVENUE	AND	מחמונים העים
PROFESSIONAL	H H H H H H H			
- OTHER				
PART I				
1990PF,				
FORM	          			

CHARITABLE PURPOSES	1 1 1 1 1 1 1	233.	233.	
NET INVESTMENT INCOME	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	233.	233.	
REVENUE AND EXPENSES PER BOOKS	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	465.	465.	11 11 11 11 11 11 11 11 11 11 11 11
			TOTALS	
DESCRIPTION	; ; ; ; ; ; ; ; ;	SUNTRUST AGENT FEES		

- TAXES

FORM 990PF, PART I

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STATEMENT

NET INVESTMENT INCOME	1 1 1 1	191.			83.	274.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	191.	342.	436.	83.	1,052.

9

## FORM 990PF, PART II - OTHER INVESTMENTS

NEPENI FOUNDATION #013027023687

DESCRIPTION	C OR F	ENDING BOOK VALUE	ENDING FMV
	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	!!!
6138G508 INVESCO	Ü		
970012JO PFIZER 2	บ		
64287507 ISHARES TR	ט	30,648.	32,108.
97000MJO LEVEL 3 LITIGATION	ט		
6434G822 ISHARES	บ		
6434G103 ISHARES CORE MSCI	บ	35,838.	39,782.
64287242 ISHARES IBOXX	บ		
464287200 ISHARES TR S&P 500 I	บ	130,170.	180,045.
6432F842 ISHARES TR COR	U	50,739.	58,977.
64287168 ISHARES TR DOW	บ		
64288588 ISHARES BARCLA	U	9,981.	9,833.
64287804 ISHARES CORE S	บ	12,291.	11,991.
4288513 ISHARES	บ	7,624.	7,915.
64288620 ISHARE	ט	7,264.	87
434V621 ISHARE	บ	17,071.	19,899.
64288273	บ	17,543.	17,625.
	TOTALS	319,169.	386,046.

RECIPIENT NAME:

HARVARD GRADUATE SCHOOL OF EDUCATION

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

FAMILY PLACE

ADDRESS:

3309 16TH ST NW

Washington, DC 20010

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

1,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

THE FISHING SCHOOL INC

ADDRESS:

4737 MEADE ST NE

Washington, DC 20019

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

1,000. AMOUNT OF GRANT PAID .....

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

INSTITUTE FOR POLICY STUDIES

ADDRESS:

1301 CONNECTICUT AVE

Washington, DC 20036

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

THE LAB SCHOOL OF WASHINGTON

ADDRESS:

4759 RESERVOIR RD NW

Washington, DC 20007

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

NATIONAL WOMEN'S LAW CENTER

ADDRESS:

11 DUPONT CIR NW # 800

Washington, DC 20036

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

8

RECIPIENT NAME:

THE SEED FOUNDATION

ADDRESS:

1730 RHODE ISLAND AVENUE NORTHWEST

Washington, DC 20036

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,500.

RECIPIENT NAME:

AMNESTY INTERNATIONAL

USA HEADQUATERS

ADDRESS:

5 PENN PLAZA, 16TH FLOOR

New York, NY 10001

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

1,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

THE WASHINGTON BALLET

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

1,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:
CHORAL ARTS SOCIETY OF WASHINGTON
RELATIONSHIP:
NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

**EXEMPT** 

RECIPIENT NAME:

CATHEDRAL CHORAL SOCIETY

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

RECIPIENT NAME:

BEAUVOIR, THE NATIONAL CATHEDRAL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

RECIPIENT NAME:

WASHINGTON NATIONAL OPERA

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

TOTAL GRANTS PAID:

18,000.

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