EXTENDED TO NOVEMBER 16,

Return of Private Foundation Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

<u>nternal Re</u>	venue Service	► Go to	www.	irs.gov/Form990PF for inst	tructions and	the latest inf	ormation.	Open to Public Inspection
For cale	ndar year 2019 or tax year	beginning			, and e	nding		
Name o	f foundation	,					A Employer identificatio	n number
THE	NORA ROBERT	S FAMILY	FC	OUNDATION, IN	IC		46-4402908	3
	and street (or P O box number if				-	Room/suite	B Telephone number	
<u>700</u>	3 GLENN DALE	ROAD				622	1 301-717-07	704
-	own, state or province, coul	ntry, and ZIP or fo	reign p	postal code			C If exemption application is p	pending, check here
		Initial return		Initial return of a f	ormer public o	:harity	D 1. Foreign organization	s, check here
. 011001		Final return		Amended return	ormor public c	u.rty	1. Torongh organization	o, ondok noro
	==	Address change		Name change			Foreign organizations m check here and attach c	eeting the 85% test,
Check	k type of organization:	X Section 501(c	c)(3) ex	xempt private foundation	S	5	E If private foundation sta	ર્ચું
[Se	ection 4947(a)(1) nonexemp	t charitable trust		Other taxable private found	ation (<u>/</u>	under section 507(b)(1	
Fair ma	arket value of all assets at er	nd of year 🔰 🗛	count	ing method: X Cash	Accr	ual	F If the foundation is in a	60-month termination
(from l	Part II, col. (c), line 16)	[o	ther (specify)			under section 507(b)(1	
▶ \$_				nn (d), must be on cash bas	sis.)		,	,
Pärt`l	Analysis of Revenue and (The total of amounts in columnecessarily equal the amounts	Expenses ins (b), (c), and (d) ma s in column (a))	y not	(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants	s, etc., received		5,312.			N/A	
2	Check X if the foundation		ch B					
) 3	Interest on savings and tempor cash investments	ary						
4	Dividends and interest from	n securities	•	132,350.	13	<u>2,350.</u>	 	
5 a	Gross rents			Deliver and Market Secretary and Applications and Applica	SANDOGN TB., PARSON HAS	656. NO. (St.) NOS. (9	3N 2-766-7286.	50% (PM) (PM) (PM)
þ	Net rental income or (loss)				Life may at larger			
ლ 6a	Net gain or (loss) from sale of as Gross sales price for all		^	105,065.	32.56			
[e] _b	assets on line 6a	<u>1,039,36</u>	<u>0.</u>		1.0			日外日の数数の数数
Revenue 2	Capital gain net income (from P				LU	<u>5,065.</u>	90	STATE OF STATE
8	Net short-term capital gain			Control of the Contro	ALL MARKET CAN		S JUL	4 2 2020 C
100	Income modifications Gross sales less returns							STANDARD TO SEE
	and allowances Less Cost of goods sold						OSE TOSE	ENECTION OF
f	Gross profit or (loss)			一个人。 1. 10 10 10 10 10 10 10 10 10 10 10 10 10			and Construction of the Co	
1 11	Other income				P JOS ROLLING OF DOOR	Annast Sprangers Coopere	-	
12	Total. Add lines 1 through	11		242,727.	23	7,415.		
13	Compensation of officers, direc	tors, trustees, etc		0.		0.		0
14	Other employee salaries an	nd wages						
رم 15 س	Pension plans, employee b	enefits -		,				
စ္တို 16a	Legal fées				ļ. <u></u> .	<u> </u>	ļ	
<u> </u>	Accounting fees		1	4,850.		4,850.		0
ŭ c	Other professional fees	STMT	2	41,409.	3	7,268.		4,141
§ 17	Interest	~~·	2	0.455		0 400	4	<u> </u>
18	Taxes	STMT	3	2,477.	-	2,477.	# · · · · · · · · · · · · · · · · · · ·	0
19	Depreciation and depletion			-			 ' 	2.40.40.40.40.40.40.40.40.40.40.40.40.40.
문 20 본 21	Occupancy Travel, conferences, and m	antinoc	•					
21	Printing and publications	iceunys		t	-			
Operating and Administrative 12	Other expenses	STMT	4	41,486.		583.	· .	40,903
24	Total operating and admir		-	=1,=00.			/	=0,,000
Ser.	expenses Add lines 13 thr			90,222.	4	5,178.	_ /	45,044
ට් ₂₅	Contributions, gifts, grants	-		160,000.				160,000
26	Total expenses and disbut					<u> </u>	A STATE OF THE STA	``
	Add lines 24 and 25			250,222.	4	5,178.		205,044
27	Subtract line 26 from line 1	12:						
	Excess of revenue over expense		5	-7,495.				
26 27 27 28	Net investment income (if	negative, enter -0-)			19	2,237.		

c Adjusted net income (if negative, enter -0-) 923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

ì

		00-PF (2019) THE NORA ROBERTS FAMILY			-4402908 Page 2
ÿ C)art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	15.		
	2	Savings and temporary cash investments	47,191.	48,768.	48,768.
	3	Accounts receivable >			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶	-		4
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
sts	8	Inventories for sale or use		28,350.	28,350.
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations STMT 6	163,268.	151,056.	163,818.
	b	Investments - corporate stock STMT 7	2,240,489.	2,298,026.	3,124,261.
	C	Investments - corporate bonds STMT 8	771,305.	767,491.	803,526.
	11	Investments - land, buildings, and equipment, basis			
		Less accumulated depreciation			<u>"-</u>
	12	Investments - mortgage loans	755 637	660 000	622 446
	13	Investments - other STMT 9	755,637.	669,923.	622,446.
	14	Land, buildings, and equipment basis			
	4.5	Less accumulated depreciation			
	1	Other assets (describe >) Total assets (to be completed by all filers - see the			
	10	Instructions. Also, see page 1, item I)	3,977,905.	3,964,011.	4,791,566.
_	17	Accounts payable and accrued expenses	3,311,303.	3,304,011.	
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
Ξ	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30			
and	24	Net assets without donor restrictions			VENEZULEN STERNINGEN SER
Ba	-25	Net assets-with-donor restrictions			
пd		Foundations that do not follow FASB ASC 958, check here			
Ę		and complete lines 26 through 30	0	0.	
ō	1	Capital stock, trust principal, or current funds	0.	0.	
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund	3,977,905.	3,964,011.	
Net Assets or Fund Balances	28 29	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	3,977,905.	3,964,011.	
Š	23	Total liet assets of fully valatices	3,311,3031	3,304,011,	
	30	Total liabilities and net assets/fund balances	3,977,905.	3,964,011.	
E F	art			,	
712	art	Mis Analysis of Changes in Not Assets of Fund B			
		net assets or fund balances at beginning of year - Part II, column (a), line $% \left\{ 1,2,\ldots ,n\right\}$	29		
	-	st agree with end-of-year figure reported on prior year's return)		1	3,977,905.
		amount from Part I, line 27a		2	-7,495.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	0 m m m m	ATEMENT 5 5	3,970,410. 6,399.
		eases not included in line 2 (itemize)		ATEMENT 5 5	3,964,011.
<u> </u>		Thet assets of fullo balances at end of year (line 4 fillings line 3) - Part II, of	DidHili_{D}, line 25		Form 990-PF (2019)
			**		, ,

Form 990-PF (2019) THE	NORA	ROBERTS FAMILY	FOUNDATIO	<u>, NC</u>	IN	<u>C</u>	4	<u>6-440</u>	<u> 2908 </u>	Page 3
Part IV Capital Gains	and Lo	sses for Tax on Investm	ent Income	14.51				····		
) of property sold (for example, real or common stock, 200 shs. MLC Co		` P	How ac - Purcl - Dona	hase '	c) Date a (mo., da	acquired ay, yr.)	(d) Dat (mo., da	
1a										
b SEE ATTACHED	STAI	EMENT							-	
<u> </u>										
<u>d</u>		<u> </u>		 -						
е							41.0			
(e) Gross sales price	(f) L		Cost or other basis lus expense of sale					in or (loss) (f) minus (
<u>a</u>										
<u>b</u>				-				•		
<u>C</u>										
e 1,039,360.			934,29	3.5					105	,065.
	no oain in c	olumn (h) and owned by the found		,,,		(1) (Saine (C	ol. (h) gaın		,003.
Complete only for assets shown			() Excess of col. (I)			col. (k), but n	ot less than	1-0-) or	
(i) FMV as of 12/31/69			over col. (j), if any				Lösses ((from col. (I)) `	
a										
b								•		
<u>C</u>										
_d		16166.7							105	065
_e									105	<u>,065.</u>
2 Capital gain net income or (net ca	pital loss)	$\left\{\begin{array}{l} \text{If gain, also enter in Part I,} \\ \text{If (loss), enter -0- in Part I,} \end{array}\right.$		}	2				105	,065.
3 Net short-term capital gain or (los	ss) as defir	red in sections 1222(5) and (6):		١, ١						
If gain, also enter in Part I, line 8,	column (c).		 				/ -		
If (loss), enter -0- in Part I, line 8	I C	+: 4040(-) for Dodge	and Towner Mad		3	ant Inco		N/A		
		ection 4940(e) for Reduc				ient inco	me			
(For optional use by domestic private	e foundatio	ns subject to the section 4940(a) ta	x on not investment ii	ncome	3)					
If section 4940(d)(2) applies, leave the	his part bla	nk								
* * * * * * * * * * * * * * * * * * * *									<u></u> ,	X No
Was the foundation liable for the sec			• •	riody					Yes	LÆ∟ NO
If "Yes," the foundation doesn't qualit Enter the appropriate amount in		on for each year; see the instruction		antriac	,					
(a)	each coluit		S Defore making any t						(d)	
Base neriód vears	>	(b) Adjusted qualifying distributions	Net value of no	(c) onchai		use assets	Ι,	Dıstrıb col. (b) dıvı	ritión ratio	(o))
Calendar year (or tax year beginni	ng m)	211,87				5,276.		COL (D) GIVI		48759
2018		216,29		4		8,254.	 	_		49972
2017		219,52		- 4		$\frac{8,234}{2,640}$	 			53378
2016		167,99		<u>4</u>		2,640. 9,574.	 			39440
2015			0.			7,726.				00000
2014		····	<u>U • I</u>		, , , ,	1,120.	1		• •	0000
2 Total of line 1, column (d)							2		1	91549
3 Average distribution ratio for the	5-voor bac	a pariod - divide the total on line 2 h	w 5.0. or by the numb	ner of	veare				• +	<u> </u>
the foundation has been in existe	-		y J.O, OI by the hame	יט וטנ	y cai 3		3		- 0	38310
the foundation has been in existe	1108 11 1622	man 5 years							. 0	30310
4 Enter the net value of noncharitat	ole-use ass	ets for 2019 from Part X, line 5					4		4,410	<u>,596.</u>
5 Multiply line 4 by line 3							5		168	<u>,9</u> 70.
	no (10/ of 1	Part I line 27h)					6			,922.
6 Enter 1% of net investment incon	170 Of I	- aili, iiile <i>210)</i>					0			_
7 Add lines 5 and 6							7		170	<u>,892.</u>
8 Enter qualifying distributions from	n Part XII.	line 4					8		205	,044.
		eck the box in Part VI, line 1b, and c	omplete-that part usin	ng a 1º	% tax r	ate.				
See the Part VI instructions.										
								F	orm 990-	PF (2019)

OF

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. 01/01/19|12/31/19 1a SHORT TERM SEE ATTACHED P 01/01/19|12/31/19 b WASH SALE ADJUSTMENT c ACCRUED MARKET DISCOUNT ADJUSTMENT P 01/01/19|12/31/19 P **VARIOUS** VARIOUS d LONG TERM SEE ATTACHED P VARIOUS VARIOUS e WASH SALE ADJUSTMENT P VARIOUS VARIOUS f ACCRUED MARKET DISCOUNT ADJUSTMENT CAPITAL GAINS DIVIDENDS h ı m n 0 (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 161,692. -1,209.160,483 а 568. b 568. 47. -47. C 103,065. 875,556. 772,491 þ 2,182. 2,182 е -6<u>5.</u> 65 f 571. 571. g h m п 0 (I) Losses (from col. (h)) Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 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 over col. (j), if any as of 12/31/69 -1,209. a 568. b -47. C 103,065. d 2,182. е -65. 571. g h m п 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 105,065. Capital gain net income or (net capital loss) 2 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

THE NORA ROBERTS FAMILY FOUNDATION,

	n 990-PF		THE Tax Ba	NORA sed on I	ROBE	ERTS	FAMILY	FOUNDA	TIO	N, IN	C // 4940(e), or	<u>46-</u> 4948	4402 - see	2908 instru		Page <u>4</u> 1 S)	
,	النتي –							▶ ☐ and er)						:
	•	ruling or det						y of letter if nec			tions)						
ŧ	Domest	tic foundation	ns that meet					check here				1_			1,9	22.	
		l, line 27b															
C	: All othe	r domestic fo	oundations 6	enter 2% of	line 27b. l	Exempt fo	oreign organiz	ations, enter 4%	of Part	I, line 12, c	col. (b)						
2	Tax und	der section 5	11 (domesti	c section 49	947(a)(1)	trusts an	d taxable foun	idations only, ot	hers, en	ter -0-)		2				0.	
3	Add line	es 1 and 2										_3_			<u>1,9</u>	<u>22.</u>	
4	Subtitle	A (income)	tax (domest	ic section 4	947(a)(1)	trusts an	ıd taxable four	ndations only; of	thers, en	ter -0-)		4				0.	
5	Tax bas	ed on inves	tment incon	ne. Subtrac	t line 4 fro	om line 3.	. If zero or less	s, enter -0-				5	africante forte -	Oct Stories to A	1,9	<u>22.</u>	
6	Credits/	Payments:													W.		
		stimated tax					to 2019		6a		2,320	5.10					
		foreign orga							6b		0						
		d with applica			ne to file ((Form 88	68)		6c		0		A COM				
		withholding							6d		0		5.00				
7		edits and pay	•		•		<u></u>					7	<u> </u>		2,3		
8								orm 2220 is atta	ched		_	8				<u>13.</u>	
9							amount owed				P	9				<u> </u>	
		•				•	enter the amo	unt overpaid		205		10	<u> </u>			<u>85.</u>	
		e amount of A Stat								383	. Refunded ▶	11	<u> </u>			0.	
	_ -							te, or local legis	lation or	did it partic	unate or intervel			1889	Yes	No	
10		tical campai		ualiun allen	npi to min	uence an	y Halionai, Sia	te, or local legis	iation of	ulu il partic	ipate of litterver	16 111		1a		X	
h			-	inn the vea	r (either d	lirectly or	indirectly) for	political purpos	es? See	the instruc	tions for the det	inition		1b		X	
Ī							-	ies and copies o						2.5	建设		
		ted by the fo				•		ioo and copies o	,	pub							
c		foundation f												1c	-632696336	X	
							on 4955) imp	osed during the	vear:								
		the foundati						ation managers.			0	•					
е								political expendi	-	mposed on		_					
		rs. ➤ \$		_).	_		•		•							
2	Has the	foundation 6	engaged in a	ny activities	 that have	e not prev	nously been re	eported to the IF	RS?					2		X	
	If "Yes,"	attach a deta	ailed descrip	tion of the a	activities.											\$100 K	
3	Has the	foundation r	made any ch	anges, not j	previously	, reported	d to the IRS, in	ı its göverning ii	nstrume	nt, articles o	of incorporation	or					
	bylaws,	or other sim	ılar instrume	ents? If "Yes	s," attach a	a conforn	ned copy of th	e changes						3		<u> </u>	
4a	Did the	foundation h	ave unrelate	d business	gross inc	ome of \$	1,000 or more	e during the year	?					4a		<u> </u>	
b	If "Yes,"	has it filed a	tax return o	n Form 9 90)- T for this	s year?						N	/A	4b			
5								during the year?						5	-x.+3**.	X ·	-
	•	attach-the:st		-													
6						ctions 49	41 through 49	945) satisfied ei	ther:								
		iguage in the	-							*							
	-			•	s the gove	erning ins	trument so th	at no mandatory	direction	ons that con	iflict with the sta	te law					
_		n the govern	-					0.1686	I-1- B1	11 1 (-)	40- 430/			6	X		
′	Dia the i	toundation n	lave at least	\$5,000 in as	ssets at ar	ny time a	uring the year	? If "Yes," comp	ете Рап	11, COL. (C),	ano Part XV			7	X	78880±8	
0.	Enter th		ماه احداد			Abb.ab		. Coo atat									
φä	MD	e states to W	inch the fou	поацоп гер	UI IS OF WI	ui waica	ii is registered	l. See instruction	15. –								
k		ICMAL IC "VOC	"to line 7 hr	e the four	dation fur-	nichad a r	conv of Earm (990-PF to the At	torney C	Sanaral (or s	decinnota)						
U							ittach explana		COLLIED C	יטויטומו (טו (ucolyridit)			8b	X	7888888A	1
g		-	-			•		meaning of sec	tion 404	12(1)(3) or 4	1942(1)/5) for ca	lendar		3332		C	1
•						-		IV. If "Yes," com			יסייב (יו) (יין וטוי טמי			9	essiusei	X	\mathcal{A}
10			-	-				," attach a schedul			nd addresses			10		X	V/
		- 3. 55.1.5 500		<u></u>					_ nothing to	on number di	200103303		Fo	rm 990	-PF	(2019)	
																. ,	

923531 12-17-19

•	1 *			
	m 990-PF (2019) THE NORA ROBERTS FAMILY FOUNDATION, INC 46-440	2908		Page 5
į Is	art VII-A Statements Regarding Activities (continued)	Tv2092065.	12.5	
		XXXX	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ľ		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	 	X
12	Pid 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	L	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION Telephone no. ► 301-7			
	Located at ► 7003 GLENN DALE ROAD, NO. 622, GLENN DALE, MD ZIP+4 ►2	0769		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		· •	•
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	_
	securities, or other financial account in a foreign country?	16	ducios: 15	X Hubbank 8
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
-	foreign country	1888年	1	10 m
, H.,	art VII By Statements Regarding Activities for Which Form 4720 May Be Required	Iss wastas.		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	98023.00	Yes	No
1	a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			***
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
1	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		***	Line
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	3:3886Cr	2008/2016/15
	Organizations relying on a current notice regarding disaster assistance, check here			
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	\$23.2°		建筑企
	before the first day of the tax year beginning in 2019?	10 30 30 30 30 0	ere ere	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
č	a 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? Yes			
	M MAC S Locality and the second secon			
	If "Yes;" list-the-years >= ,			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	3588888	XXXX	1279X
	statement - see instructions.) N/A	2b	3884500	2000
t	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
0.	Del the foundation held may then a COV device and device the second seco			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
0	b If "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 Commissioner under section 4943(c)(7)) to dispose of holdings against by cutture because of the 10. 15-, or 20 year first phase holding period? (Use Form 4720)			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	35 S	\$-8800£	
4-	Schedule C, to determine if the foundation had excess business holdings in 2019.) a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		Х
70	ש שום נהס וסטווספונסוו ווויפסג סטווווק נהס יסמו מווין מווסטווג ווו מ ווומוווק: נוומג שטטוט ווויסטונעד וגס כוומווגטוצ שטוויסטונע וווס יסמו מווין מוויסטווג ווו מ ווומוווק: נוומג שטטוט ווויסטונעד ווויסטווג וויסטווג ווויסטווג וווי	4d	. !	ι Δ

Form **990-PF** (2019)

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?

2	Compensation of five highest-paid employees (other than those in	cluded on line 1). If none	, enter "NONE."	•	
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, othe allowances
_	NONE				
				-	-
_			-		
_	-		 	<u> </u>	
_		-	<u> </u>	!	
_		- , *	,		
To	otal number of other employees paid over \$50,000	•		D	

Form **990-PF** (2019)

3		
3		
4		
4		
Port IV P. C		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2	Amount
1 N/A	is Tand 2.	Amount
1 N/A		
2		
- All other-program-related investments. See-instructions.		
3		

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	4.429.576.
b		1b	4,429,576. 48,186.
	Fair market value of all other assets	1c	
d		1d	4,477,762.
_	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	4,477,762.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	67,166.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,410,596.
6	Minimum investment return Enter 5% of line 5	6	220,530.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ □ and do not complete this part.)	d certaii	n
1	Minimum investment return from Part X, line 6	1	220,530.
	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,922.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	218,608.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	218,608.
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	218,608.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		005 044
а		1a	205,044.
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	205 044
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	205,044.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	1 000
	income. Enter 1% of Part I, line 27b	5	1,922. 203,122.
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 of	jualities	tor the:section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7				218,608.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			198,549.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2019:		0.		
1 ' ' '				
a From 2014				
b From 2015				
c From 2016				
d From 2017				!
e From 2018	0			
f Total of lines 3a through e	0.	<u>-</u>		
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 205,044.			100 540	
a Applied to 2018, but not more than line 2a			198,549.	
b Applied to undistributed income of prior	İ	0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	·		C 40F
d Applied to 2019 distributable amount	0			6,495.
e Remaining amount distributed out of corpus	0.		***************************************	
Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.		· · · · · ·	0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable			· · · · · · · · · · · · · · · · · · ·	
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.	_		0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				212,113.
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 2014				
not applied on line 5 or line 7	0.		<u> </u>	
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018			1	• •
e Excess from 2019				

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Form **990-PF** (2019)

Form 990-PF (2019) THE NOT Part XIV Private Operating	RA ROBERTS E	FAMILY FOUNI	DATION, INC	46-44	02908 Page 10
			I-A, question 9)	N/A	-
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f	•	=	.a.aaataan ►	14042(1)(2) or []40	40(n)(E)
b Check box to indicate whether the four2 a Enter the lesser of the adjusted net	Tax year	ing toundation described	Prior 3 years	4942(j)(3) or49	42(j)(5)
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	(a) 2010	(8) 2010	(0) 25 11	(0,2010	(0) 10141
investment return from Part X for			1		
each year listed 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					
e Qualifying distributions made directly	·	 			
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: (1) Value of all assets 					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					J1-
2/3 of minimum investment return					
shown in Part X, line 6, for each year listed		L			
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 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			if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see inst	ructions.)			
1 Information-Regarding-Foundati	_				
a List any managers of the foundation w			ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed	more than \$5,000). (See s	section 507(a)(2).)			
NONE					
b List any managers of the foundation w			(or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	as a 10% of greater intere	SI.			
NONE					
2 Information Regarding Contribut		•	_		
Check here X if the foundation					ests for funds. If
the foundation makes gifts, grants, etc.			_ _		<u> </u>
a The name, address, and telephone nun	nber or email address of the	he person to whom applic	cations should be addres	sed:	
b The form in which applications should	be submitted and informa	tion and materials they s	nould include:		
					-
c Any submission deadlines;					
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields,	kınds of institutions, or o	other factors:	
7 - 2, -		•		•	
923801 12-17-10					Form 990-PF (2019)
U23801 12-17-10					FORM SISTEMPT (20110)

Form 990-PF (2019) THE NORA ROBERTS FA

3 Grants and Contributions Paid During the Yo				
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	**	
a Paid during the year				
AMERICAN HUMANE ASSOCIATION		₽C	ENSURING THE SAFETY,	
1400 16TH STREET NW SUITE 360			WELFARE AND WELL-BEING	
WASHINGTON, DC 20036			OF ANIMALS	5,00
CHILDREN'S TREEHOUSE		PC	TO PROMOTE NATURE	
698 CONSERVATION WAY			BASED EARLY CHILDHOOD	6 00
SHEPERDSTOWN, WV 25443			EDUCATION	6,00
CROSSROADS COMMUNITY FOOD NETWORK		PC	TO PROVIDE FUNDING FOR	
6930 CARROLL AVE, STE. 426		PC	AN ESSTINAL FOOD	
TAKOMA PARK, MD 20912			RESOURCE FOR THE	
IAROM IARK, ID 2012			COMMUNITY	5,00
FAHRNEY-KEEDY MEMORIAL HOME INC		PC	ENHANCING THE LIVES OF	
8507 MAPLEVILLE ROAD		10	SENIORS THROUGH CARING	
BOONSBORO MD 21713			QUALITY SERVICE	10,000
FIRST HOSE COMPANY OF BOONSBORO INC		PC	PROVIDE FIRE	
5 SAINT PAUL STREET			PROTECTION SERVICE	
BOONSBORO MD 21713				5 00
Total SEE CON	TINUATION SHEE	ET(S)	▶ 3a	160 00
h Approved for future payment				
NONE				
NONE				

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual,	Foundation	Durnoce of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
FREDERICK RESCUE MISSION INC	or outstand commission	PC	PROVIDE A LONG TERM	
PO BOX 3389			RESIDENTIAL RECOVERY	
FREDERICK, MD 21705			PROGRAM TO THE	
1112211111, 112 21,111			CHEMICALLY ADDICTED,	
			FOOD TO THE HUNGREY	2,000
FRISCO FIRE PREVENTION ASSOCIATION		PC	PROVIDE FIRE	
INC			SUPPRESSION AND	
PO BOX 9			PREVENTION, LIFE	
FRISCO, NC 27936			SAFETY AND RESCUE	
- TAIDEO, NO 27550			SUPPORT TO CITIZENS OF	3,000
GLENN DALE FIRE ASSOCIATION INC		PC	PROVIDE FIRE, RESCUE,	
PO BOX 249			AND EMERGENCY MEDICAL	
GLENN DALE, MD 20769			SERVICES	5,000
HAGERSTOWN AREA RELIGIOUS COUNCIL		PC	FOSTER A COMMUNITY	
PO BOX 1158			-WIDE CITALITY THAT	
HAGERSTOWN, MD 21741			LIFTS PEOPLE OUT OF	
			POVERTY AND IMPROVES	
			THE QUALITY OF LIFE	10,000
HAGERSTOWN UNION RESCUE MISSION		PC	ON-PROFIT, FAITH-BASED	
125 N PROSPECT ST			RELIEF AND	
HAGERSTOWN, MD 21740			REHABILITATION	
			ORGANIZATION THAT	
			SERVES THE GREATER	2,000
HATTERAS ISLAND OCEAN CENTER		PC	FACILITATING USE OF	
PO BOX 276			CAPE HATTERAS NATIONAL	
HATTERAS, NC 27943			SEASHORE REC AREA FOR	
			RECREATION, ENJOYMENT	
			AND EDUCATION.	10,000
MARYLAND FOOD BANK INC		₽C	LEAD THE MOVEMENT AND	
2200 HALETHORPE FARMS ROAD SW	•		NURTURE THE BELIEF	
BALTIMORE, MD 21227			THAT TOGETHER WE CAN	
			IMPROVE THE LIVES BY	
			ENDING HUNGER	10-000
MISSION OF MERCY		PC	TO RESTORE DIGNITY,	
22 SOUTH MARKET STREET, STE. 6D			"HEALING THROUGH LOVE"	
FREDERICK, MD 21701			BY PROVIDING FREE	
, 			HEALTHCARE	5,000
ONLY MAKE BELIEVE INC		PC	CREATES AND PERFORMS	<u> </u>
121 WEST 27TH STREET SUITE 1002		1	INTERACTIVE THEATRE	
NEW YORK, NY 10001		1	FOR CHILDREN IN	
			HOSPITALS, CARE	
			FACILITIES AND SPECIAL	6,000
OPERATION WARM, INC		PC	PROVIDES RESOURCES FOR	
6 DICKINSON DRIVE			INDIGENT CHILDREN	
CHADDS FORD PA 19317	I	1	1	10,000

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
	of Substantial Gold (Substantial Co.			
PAW WARRIORS, INC.		PC	PROVIDE FUNDING FOR	
355 SPRING TIME STREET SPRING HILL FL 34608			ANIMALS IN NEED	2,500
SALVATION ARMY		PC	TO PREACH THE GOSPEL	
1424 NE EXPRESS WAY			OF JESUS CHRIST AND TO	
ATLANTA, GA 30329			MEET HUMAN NEEDS IN	
,			HIS NAME WITHOUT	
			DISCRIMINATION.	7,500
SAN MAR CHILDREN'S HOME INC		PC	PROVIDE APPROPRIATE	
8504 MAPLEVILLE ROAD		'	STRUCTURE, HEALTHY	
BOONSBORO, MD 21713			NURTURE, AND ABUNDANT	
			OPPURTUNITIES TO	
			CHILDREN	3,000
SHARPSBURG AREA EMERGENCY MEDICAL		PC	VOLUNTEER	
SERVICE INC			AMBULANCE/RESCUE	
РО ВОХ 307			SERVICE	25 22
SHARPSBURG, MD 21782		<u></u>		25,000
SHARPSBURG FIRE DEPARTMENT		PC	VOLUNTEER FIRE	
110 W CHAPLINE ST.			DEPARTMENT	
SHARPSBURG MD 21782				5,000
SMITHSONIAN INSTITUTION FBO DISCOVERY		PC	ADVANCES THE	•
THEATER			INSTITUTION'S MISSION	
PO BOX 23293			TO "INCREASE AND	
WASHINGTON, DC 20026			DIFFUSE KNOWLEDGE"	
			THROUGH LIFE-ENRICHING	5,000
TABITHA'S TABLE		PC	FUNDING FOR COMMUNITY	
17 S MAIN ST			FOOD PANTRY	
SMITHSBURG, MD 21783		_ -		3,000
THE CARTER CENTER		PC	FUNDING FOR A	
453 JOHN LEWIS FREEDOM PKWY NE			COMMITMENT TO HUMAN	
ATLANTA, GA 30307			RIGHTS AND THE	
			ALLEVIATION OF HUMAN	
	-		SUFFERING	2,000
WASHINGTON COUNTY FREE LIBRARY		PC	FUNDING FOR PUBLIC	
100 S POTOMAC ST			LIBRARY	
HAGERSTOWN, MD 21740			-	5,000
			EIRIDING FOR WARRE ON	
WILDWOOD SUMMER THEATRE		PC	FUNDING FOR HANDS-ON	
P.O. BOX 30022			LEARNING THEATRE FOR	
BETHESDA, MD 20824			LOAL TEENS AND YOUNG	0 000
Total from continuation sheets	<u></u> .	<u> </u>	PROFESSIONALS	8,000

	NAME OF RECIPIENT	- FREDERICK RESCUE MISSION INC
NAME OF RECIPIENT - FRISCO FIRE PREVENTION ASSOCIATION INC PROVIDE FIRE SUPPRESSION AND PREVENTION, LIFE SAFETY AND RESCUE SUPPORT TO CITIZENS OF FRISCO AND SURROUNDING COMMUNITIES NAME OF RECIPIENT - HAGERSTOWN AREA RELIGIOUS COUNCIL POSTER A COMMUNITY -WIDE CITALITY THAT LIFTS PEOPLE OUT OF POVERTY AND EMPROVES THE QUALITY OF LIFE FOR ALL NAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION ON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC PRESERVES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, PARTITUDE OF CHARGE TO EVERY SITE, PARTITUDE OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	PROVIDE A LONG TE	RM RESIDENTIAL RECOVERY PROGRAM TO THE CHEMICALLY
PROVIDE FIRE SUPPRESSION AND PREVENTION, LIFE SAFETY AND RESCUE SUPPORT TO CITIZENS OF FRISCO AND SURROUNDING COMMUNITIES NAME OF RECIPIENT - HAGERSTOWN AREA RELIGIOUS COUNCIL POSTER A COMMUNITY -WIDE CITALITY THAT LIFTS PEOPLE OUT OF POVERTY AND EMPROVES THE QUALITY OF LIFE FOR ALL NAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION NON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC PRECATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, PARAMETER FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK NAME WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PARAMILY, AND CHILD.	ADDICTED, FOOD TO	THE HUNGREY, CLOTHING AND FURNITURE TO THE NEEDY
NAME OF RECIPIENT - HAGERSTOWN AREA RELIGIOUS COUNCIL POSTER A COMMUNITY -WIDE CITALITY THAT LIFTS PEOPLE OUT OF POVERTY AND EMPROVES THE QUALITY OF LIFE FOR ALL NAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION ON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. HAME OF RECIPIENT - ONLY MAKE BELIEVE INC RECREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PAMILY, AND CHILD.	NAME OF RECIPIENT	- FRISCO FIRE PREVENTION ASSOCIATION INC
NAME OF RECIPIENT - HAGERSTOWN AREA RELIGIOUS COUNCIL POSTER A COMMUNITY -WIDE CITALITY THAT LIFTS PEOPLE OUT OF POVERTY AND EMPROVES THE QUALITY OF LIFE FOR ALL NAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION ON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION HAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. HAME OF RECIPIENT - ONLY MAKE BELIEVE INC PRECREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, PARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD.	PROVIDE FIRE SUPP	RESSION AND PREVENTION, LIFE SAFETY AND RESCUE SUPPORT
POSTER A COMMUNITY -WIDE CITALITY THAT LIFTS PEOPLE OUT OF POVERTY AND EMPROVES THE QUALITY OF LIFE FOR ALL NAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION ON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, CAMILY, AND CHILD.	TO CITIZENS OF FR	ISCO AND SURROUNDING COMMUNITIES
MAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION ON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PAMILY, AND CHILD.	NAME OF RECIPIENT	- HAGERSTOWN AREA RELIGIOUS COUNCIL
NAME OF RECIPIENT - HAGERSTOWN UNION RESCUE MISSION ON-PROFIT, FAITH-BASED RELIEF AND REHABILITATION ORGANIZATION THAT SERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PAMILY, AND CHILD.	FOSTER A COMMUNIT	Y -WIDE CITALITY THAT LIFTS PEOPLE OUT OF POVERTY AND
ERVES THE GREATER HAGERSTOWN REGION NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PAMILY, AND CHILD.	IMPROVES THE QUAL	ITY OF LIFE FOR ALL
NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PAMILY, AND CHILD. NAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	NAME OF RECIPIENT	- HAGERSTOWN UNION RESCUE MISSION
NAME OF RECIPIENT - HATTERAS ISLAND OCEAN CENTER PACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC RECREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, PAMILY, AND CHILD.	ON-PROFIT, FAITH-	BASED RELIEF AND REHABILITATION ORGANIZATION THAT
FACILITATING USE OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC REATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD.	SERVES THE GREATE	R HAGERSTOWN REGION
RECREATION, ENJOYMENT AND EDUCATION. NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD. NAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	NAME OF RECIPIENT	- HATTERAS ISLAND OCEAN CENTER
NAME OF RECIPIENT - ONLY MAKE BELIEVE INC CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD. NAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	FACILITATING USE	OF CAPE HATTERAS NATIONAL SEASHORE REC AREA FOR
CREATES AND PERFORMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS, CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD. WAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	RECREATION, ENJOY	MENT AND EDUCATION.
CARE FACILITIES AND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD. WAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	NAME OF RECIPIENT	- ONLY MAKE BELIEVE INC
AND WASHINGTON DC METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE, FAMILY, AND CHILD. NAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	CREATES AND PERFO	RMS INTERACTIVE THEATRE FOR CHILDREN IN HOSPITALS,
FAMILY, AND CHILD. NAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	CARE FACILITIES A	ND SPECIAL EDUCATION PROGRAMS THROUGHOUT THE NEW YORK
NAME OF RECIPIENT - SMITHSONIAN INSTITUTION FBO DISCOVERY THEATER	AND WASHINGTON DC	METROPOLITAN AREAS, FREE OF CHARGE TO EVERY SITE,
	FAMILY, AND CHILD	·
17 70707 755903 13534-130 2019.04000 THE NORA ROBERTS FAMILY FOU 13534-	NAME OF PECTUTENM	_ CMITTICONIAN INCUTTUITION FRO DISCOVERY THEATER

THE NORA ROBERTS FAMILY FOUNDATION, INC 46-4402908 Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
Va Granto and Contributions Fand Burning the Fear Continuation of Fandacies Contribution
ADVANCES THE INSTITUTION'S MISSION TO "INCREASE AND DIFFUSE KNOWLEDGE"
THROUGH LIFE-ENRICHING EDUCATIONAL AND CULTURAL EXPERIENCES INSPIRED BY
THE SMITHSONIAN'S RESEARCH AND COLLECTIONS FOR DC-REGION STUDENTS,
FAMILIES, AND ADULTS, AND FOR LEARNING COMMUNITIES NATIONWIDE

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.				y section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	runction income
a					
b	ļ		\rightarrow		
C			\rightarrow		
d					
e	ļ				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1				
investments			 _ _ _ 	400 050	
4 Dividends and interest from securities			14	132,350.	
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	1				
property					
7 Other investment income			18		
8 Gain or (loss) from sales of assets other					
than inventory			18	105,065.	
9 Net income or (loss) from special events	<u> </u>				
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c		_			
d					
e					
2 Subtotal. Add columns (b), (d), and (e)			0.	237,415.	0,
3 Total. Add line 12, columns (b), (d), and (e)				13	237,415.
See worksheet in line 13 instructions to verify calculations.)		·			
Part XVI-B Relationship of Activities to	the Accor	nplishment of	Exempt Pu	ırposes	

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).	nment of
-		
, •		
923621 12-17	7-19	Form 990-PF (2019)

9) THE NORA ROBERTS FAMILY FOUNDATION, INC 46-4402908 Information Regarding Transfers to and Transactions and Relationships With Noncharitable 46-4402908 Part XVII Exempt Organizations

1 Did the or	rganization directly or indir	rectly engage in any	of the followin	ig with any other organizati	on described in sec	ction 501(c)		Yes	No
		· ·		g to political organizations?	•				
a Transfers	from the reporting founda	ation to a noncharital	ble exempt or	ganization of:					
(1) Cash	1						1a(1)		X
(2) Othe	r assets						1a(2)		X
b Other tran	nsactions;						İ		ĺ
(1) Sales	s of assets to a noncharital	ble exempt organizat	tion				1b(1)		<u> </u>
(2) Purc	hases of assets from a noi	ncharitable exempt o	rganization				1b(2)		X
(3) Rent	al of facilities, equipment,	or other assets					1b(3)		Х
(4) Reim	bursement arrangements						1b(4)		Х
	s or loan guarantees						1b(5)		X
	ormance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
	of facilities, equipment, mai						10		Х
-					wavs show the fair	market value of the goods,		ets.	
			-	, -		on or sharing arrangement, s		,	
	d) the value of the goods,								
(a) Line no	(b) Amount involved			exempt organization	(d) Description	on of transfers, transactions, and	sharing ar	rangeme	ents
	(-)	(0)	N/A		(-)				
			N/A						
			 		 				
									—
	· <u>-</u> .								
	· 								
						·			
					<u> </u>				
									
						<u></u>			
2a Is the fou	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
	501(c) (other than section	·					Yes	X] No
	omplete the following sche					_			_
	(a) Name of org			(b) Type of organization		(c) Description-of relations	nip		
	N/A					· · · · · · · · · · · · · · · · · · ·			
									
						<u> </u>			
Under	penalties of perjury, I declare t	that I have examined this	s return includin	g accompanying schedules and	statements, and to th	e best of my knowledge			
				taxpayer) is based on all inform		may had any knowledge May	y the IRS o		
Here	THE PART			15/1/2020	a) M mp ma c		Wn below		7 1
📈	A THE STATE OF THE				· ·	URER	Yes		J No I
Sigi	nature of officer or trustee		D	Date	Title	Chook J if DTIN			
	Print/Type of eparer's na		Preparer's si	gnature	Date	Check if PTIN			
Paid		ACHOR,	L			self- employed		465	
_	CPA, CFP		RANDY		07/07/20		0109		
Preparer	Firm's name ALB	RIGHT CRU	MBACKE	R MOUL & IT	ELL, CPA	' Firm's EIN ► 52-1:	T309	74	
Use Only						1			
	Firm's address > 11	10 PROFES	SIONAL	COURT, SUIT	'E 300				
	HA	GERSTOWN,	MD 21	740		Phone no. (301)			
						Fo	orm 99 0)-PF	(2019)

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS 4,850.	(B) NET INVEST- MENT INCOME 4,850.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.	
TO FORM 990-PF, PG 1, LN 16B	4,850.	4,850.		0.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS 41,409.	(B) NET INVEST- MENT INCOME 37,268.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 4,141.	
TO FORM 990-PF, PG 1, LN 16C	41,409.	37,268.		4,141.	
FORM 990-PF	TAX	ES	S	TATEMENT 3	
DESCRIPTION FOREIGN TAXES TO FORM 990-PF, PG 1, LN 18	(A) EXPENSES PER BOOKS 2,477.	(B) NET INVEST- MENT INCOME 2,477.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.	
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
EVENT SUPPLIES BANK FEE	40,903.	0. 583.		40,903.	
TO FORM 990-PF, PG 1, LN 23	41,486.	583.		40,903.	

FORM 990-PF OTHER DECREASES II	N NET ASSI	ETS OR	FUND	BALANCES	STATEMENT	5
DESCRIPTION					AMOUNT	
COST BASIS ADJUSTMENT FEDERAL TAXES					4,79	
TOTAL TO FORM 990-PF, PART III, I	LINE 5				6,3	99.
FORM 990-PF U.S. AND STATE	E/CITY GOV	/ERNMEN	T OBL	IGATIONS	STATEMENT	6
DESCRIPTION	U.S. GOV'T	OTHER GOV'T		OK VALUE	FAIR MARKET	r
GOVERNMENT AND AGENCY SECURITIES	X			151,056.	163,83	18.
TOTAL U.S. GOVERNMENT OBLIGATIONS	5			151,056.	163,83	18.
TOTAL STATE AND MUNICIPAL GOVERNM	MENT OBLIC	SATIONS	-	· · · · · · · · · · · · · · · · · · ·		
TOTAL TO FORM 990-PF, PART II, L	INE 10A		•=	151,056.	163,83	18.
FORM 990-PF (CORPORATE	STOCK			STATEMENT	7
DESCRIPTION			во	OK VALUE	FAIR MARKET	r
EQUITIES			<u> </u>	2,298,026.	3,124,20	61.
TOTAL TO FORM 990-PF, PART II, LI	INE 10B			2,298,026.	3,124,20	61.
FORM 990-PF (CORPORATE	BONDS	·····		STATEMENT	8
DESCRIPTION			ВО	OK VALUE	FAIR MARKE	r
CORPORATE BONDS				767,491.	803,52	26.
TOTAL TO FORM 990-PF, PART II, LI	INE 10C			767,491.	803,52	26.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	COST	669,923.	622,446.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	669,923.	622,446.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
ACCOUNTING FEES	4,850.	4,850.			0.
TO FORM 990-PF, PG 1, LN 16B	4,850.	4,850.			0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	PATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
INVESTMENT MANAGEMENT FEES	41,409.	37,268.		4,14	1.
TO FORM 990-PF, PG 1, LN 16C =	41,409.	37,268.		4,14	1.
FORM 990-PF	TAX	ES	S'	PATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES	
FOREIGN TAXES	2,477.	2,477.		(0.
TO FORM 990-PF, PG 1, LN 18 =	2,477.	2,477.			0.
FORM 990-PF	OTHER E	XPENSES	S	ratement -	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES	
DDDCKII I I ON					—
EVENT SUPPLIES BANK FEE	40,903. 583.	0. 583.		40,90	3. 0.

		-
FORM 990-PF OTHER DECREASES IN NET ASSETS	OR FUND BALANCES	STATEMENT 5
DESCRIPTION		AMOUNT
COST BASIS ADJUSTMENT FEDERAL TAXES		4,793. 1,606.
TOTAL TO FORM 990-PF, PART III, LINE 5		6,399.
FORM 990-PF U.S. AND STATE/CITY GOVERN	MENT OBLIGATIONS	STATEMENT 6
-	THER OV'T BOOK VALUE	FAIR MARKET VALUE
GOVERNMENT AND AGENCY SECURITIES X	151,056.	163,818.
TOTAL U.S. GOVERNMENT OBLIGATIONS	151,056.	163,818.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATI	ONS	
TOTAL TO FORM 990-PF, PART II, LINE 10A	151,056.	163,818.
FORM 990-PF CORPORATE STO	OCK	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
EQUITIES	2,298,026.	3,124,261.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,298,026.	3,124,261.
FORM 990-PF CORPORATE BON	DS .	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS	767,491.	803,526.
TOTAL TO FORM 990-PF, PART II, LINE 10C	767,491.	803,526.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	ŗ
MUTUAL FUNDS	COST	669,923.	622,44	16.
TOTAL TO FORM 990-PF, PART II, LINE	13	669,923.	622,44	16.