Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

► Do_not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017 or tax year beginning , 2017, and ending 20 Name of foundation A Employer identification number CORNELL DOUGLAS FOUNDATION, INC 65-1287707 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 4701 SANGAMORE ROAD S133 (301)229 - 3008City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here BETHESDA MD 20816 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here . ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, ☐ Address change □ Name change check here and attach computation Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation Fair market value of all assets at | J Accounting method: X Cash Accruái If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 14,982,107. (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per income purposes (cash basis only) the amounts in column (a) (see instructions)) books Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 41. 41 4 Dividends and interest from securities 272,018. 272,018 5a b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV 0. R Net short-term capital gain. 9 Income modifications 10a Gross sales less returns and allowar Less. Cost of goods sold Gross profit or (loss) (attach schedule) OGDEN, WT 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 272,059. 272,059. Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1,594. 1,594 Accounting fees (attach schedule) b 3,285 3,285. Other professional fees (attach schedule) . 17 18 Taxes (attach schedule) (see instructions) See Stmt. 549. 356. 193. Depreciation (attach schedule) and depletion 949. 20 23,480. 23,480. 21 Travel, conferences, and meetings 8,180. <u>8,</u>180. 22 Printing and publications 349. 349. 23 Other expenses (attach schedule) See .St.mt. 38,496. 38,496. Total operating and administrative expenses. 76,882. 356. 75,577. 25 Contributions, gifts, grants paid . . 828,500. 828,500. 26 Total expenses and disbursements. Add lines 24 and 25 905,382. 356 904,077. 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements -633,323 Net investment income (if negative, enter -0-) . 271,703 c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

		Attached schedules and amounts in the description column	Beginning of year	End	of year
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	120,786.	70,611.	
	2、	Savings and temporary cash investments	999.	78,007.	78,007.
	3	Accounts receivable ►	_		
l		Less. allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	_		
		Less: allowance for doubtful accounts ▶	,		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			1 000 057
۲	10a	Investments—U.S. and state government obligations (attach schedule)	2,296,887.		
	b	Investments—corporate stock (attach schedule) L-10b Stmt	5,701,157.	5,667,507	
1	С	Investments—corporate bonds (attach schedule) L-10c Stmt	494,760.	295,958	. 303,273.
	11	Investments—land, buildings, and equipment: basis ▶			
		Less. accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			000 001
	13	Investments—other (attach schedule) . L-13. Stmt	153,787.	153,787	. 202,821.
Ì	14	Land, buildings, and equipment basis ► 25,006.			1 201
		Less accumulated depreciation (attacm schedule) ► 23, 685.	2,270.		1,321.
[15	Other assets (describe ► ACC_INT, ADVANCE)	2,907.	6,830	6,830.
	16	Total assets (to be completed by all filers—see the	0 770 550	0 101 046	14 000 107
		instructions Also, see page 1, item l)	8,773,553.	8,121,246	. 14,982,107.
	17	Accounts payable and accrued expenses			
es	18 19	Grants payable	ļ		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ä	21	Mortgages and other notes payable (attach schedule)			
<u> </u>	22				
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			
_		Foundations that follow SFAS 117, check here ▶ 🗵			
ances		and complete lines 24 through 26, and lines 30 and 31.			
ınc	24	Unrestricted	8,773,553.	8,121,246	5.
	25	Temporarily restricted			
8	26	Permanently restricted			
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here ▶ □			
ũ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			-
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
¥	30	Total net assets or fund balances (see instructions)	8,773,553.	8,121,246	5.
<u>e</u>	31	Total liabilities and net assets/fund balances (see			_
		instructions)	8,773,553.	8,121,246	ō.
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	(a) line 00 feet	t ogras with	
1	Tota	al net assets or fund balances at beginning of year—Part II, coli	umn (a), line 30 (mus	st agree with	4 0 772 552
		d-of-year figure reported on prior year's return)			1 8,773,553. 2 -633,323.
		er amount from Part I, line 27a		į į	2 -633,323. 3
3					4 8,140,230.
		d lines 1, 2, and 3		<u> </u>	5 18,984.
5	Dec	creases not included in line 2 (itemize) ► See Statement all net assets or fund balances at end of year (line 4 minus line 5)-	- Part II. column (b) II		6 8,121,246.
€	orot	arrier assets or lund balances at end of year (line 4 minus line 5)-	- 1 art II, Column (D), II		0,121,290.

Part	V Capital Gains and	d Losses for Tax on Investm	nent Incor			·
		nd(s) of property sold (for example, real eduse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquii (mo , day, yr	
1a	DELL TECHNOLOGIES	INC		P	05/25/201	12 08/31/2017
b	DOWDUPONT INC			P	09/23/202	11 09/01/2017
	MICROSOFT CORP			P	03/05/203	14 11/15/2017
	ALCOA CORP	 		P	02/05/200	07 08/31/2017
<u>e</u>	See Statement					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	ost or other basis expense of sale		n) Gain or (loss) plus (f) minus (g))
a	9,585.			6,136.		3,449.
b	26.			12.	ļ	14.
<u>_</u>	200,000.			200,000.		0.
d	1,865.			3,474.		-1,609.
е_	11,359.			24,028.		-12,669.
	Complete only for assets sho	owing gain in column (h) and owned	by the found	ation on 12/31/69	(I) Gain	s (Col (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	Excess of col (i) er col (j), if any		out not less than -0-) or ses (from col (h))
а						3,449.
b						14.
С						0.
d						-1,609.
е						-12,669.
2	Capital gain net income o			n Part I, line 7		
-	Sapital gain het meome c	(net capital loss) { If (loss)	, enter -0- ı	n Part I, line 7 ∫	2	-10,815.
sect	tion 4940(d)(2) applies, leav he foundation liable for the	ivate foundations subject to the re this part blank section 4942 tax on the distribu qualify under section 4940(e). Do	table amou	nt of any year in the		☐ Yes ☐ No
1	Enter the appropriate am	ount in each column for each yea	ar; see the	nstructions before r	naking any ent	ries.
Cale	(a) Base period years endar year (or tax year beginning ir	(b) Adjusted qualifying distribution	s Net v	(c) alue of noncharitable-use	assets (co	(d) Distribution ratio (b) divided by col (c))
	2016	936,5	57.	11,668,		0.080267
	2015	841,8		11,998,		0.070165
	2014	669,8		12,363,		0.054183
	2013	640,3		11,487,		0.055745
	2012	359,9		3,286,		0.109535
2	<u> </u>)		al on line 2 by 5.0,	2	0.369895
	the number of years the f	oundation has been in existence	if less thar	15 years	3	0.073979
4	Enter the net value of nor	ncharitable-use assets for 2017 f	rom Part X	line 5	4	14,124,631
5	Multiply line 4 by line 3				. 5	1,044,926
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	2,717
7	Add lines 5 and 6				7	1,047,643
8		ons from Part XII, line 4 ater than line 7, check the box i				904,077 g a 1% tax rate. See th
	Part VI instructions.			•		

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-see i	<u>nstru</u>	ction	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)		N/I	- 1	_
b		1	5,4	34.	
_	here and enter 1% of Part I, line 27b	-		}	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of part I, line 12, col. (b).			-	
2		2		0.	
3		3	5,4	$\overline{}$	
4		4		0.	
5		5	5,4	34.	
6	Credits/Payments:	}		Į	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 5, 085.	}		,	
b	Exempt foreign organizations—tax withheld at source 6b	}			
C	Tax paid with application for extension of time to file (Form 8868) . 6c			-	
_d	Backup withholding erroneously withheld 6d	_ 1	- 0	<u> </u>	
7	, ,	7	5,0	85.	
8		8		10	
9		9	3	49.	
10 11	_ • • • • • • • • • • • • • • • • • • •	10		0.	
	Enter the amount of line 10 to be Credited to 2018 estimated tax ► 0. Refunded ► //II-A Statements Regarding Activities	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	r did it	r)	Yes	No
	participate or intervene in any political campaign?		1a		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? S		10		
_	instructions for the definition		1b	Ì	×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any m	aterials			
	published or distributed by the foundation in connection with the activities.			(
С	Did the foundation file Form 1120-POL for this year?		1c		×
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	•			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impon foundation managers. > \$	posed			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		×
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, art	ticles of	_	_	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		×
	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	L	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	5		×
_	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 direction conflict with the state law remain in the governing instrument?		-	-	
_	- · · · · · · · · · · · · · · · · · · ·		6	×	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and	Part XV	7	×	<u> </u>
8a -	Enter the states to which the foundation reports or with which it is registered. See instructions. DE	A			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	×	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942			ļ —	
٠	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. I complete Part XIV		9	-	×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listii	na their	- ّ -	 -	 ^
	names and addresses		10	x	

Pan	Statements Regarding Activities (continued)			
11	At any time during the year did the foundation directly or indirectly, even a controlled entity within the		Yes	No
• •	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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► www.cornelldouglas.org			
14	The books are in care of ► CORNELL DOUGLAS FOUNDATION, INC Telephone no. ► (301):	229-	3008	
15	Located at ► 4701 SANGAMORE RD BETHESDA MD ZIP+4 ► 20816 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			N
13	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			1
	the foreign country ▶	<u></u>		
Pan	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	т —	Yes	No
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly).		103	1.00
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		}	,
	disqualified person?		1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . Yes No		}	
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	ļ <u>-</u>	
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c		× -
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10	- -	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			ļ
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			j '
	all years listed, answer "No" and attach statement—see instructions.)	2b		-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
_	at any time during the year?	ľ		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017.)	3b		1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	_	×
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 2017?	4b	1	X

Pa	a	A	6

	Statements Regarding Activities					- 4					
5a	During the year, did the foundation pay or incui	any am	ount to.							Yes	No
	(1) Carry on propaganda, or otherwise attempt	to influe	nce legislatio	n (sectio	on 4945(e))? .	☐ Yes	⊠ No			
	(2) Influence the outcome of any specific pub		•			-			1 .	1	
	directly or indirectly, any voter registration of						☐Yes	⊠ No	İ		į
	(3) Provide a grant to an individual for travel, st						☐ Yes	⊠ No			i
		•					∐ res	₩ IAO	1		
	(4) Provide a grant to an organization other than					ibea in		[57]			:
	section 4945(d)(4)(A)? See instructions .						☐ Yes	X No			
	(5) Provide for any purpose other than religiou										
	purposes, or for the prevention of cruelty to						☐Yes	⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	ne transa	actions fail to	qualify (under the	exception	ons descr	ibed in			
	Regulations section 53.4945 or in a current notice	e regardii	ng disaster as	sistance	e? See inst	ructions			5b		
	Organizations relying on a current notice regard	dina disa	ster assistan	ce, chec	ck here .			ightharpoons			-
С	If the answer is "Yes" to question 5a(4), does	_						_			
	because it maintained expenditure responsibility						Yes	□No			
			_				162		Ì] }	1
۰-	If "Yes," attach the statement required by Regu										i
6a	Did the foundation, during the year, receive any		=		to pay pre	emiums		-	ļ	i i	- 1
	•						Yes	× No]
b	Did the foundation, during the year, pay premit	ıms, dıre	ctly or indired	tly, on a	a personal	benefit	contract	?.	6b		X_
	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax year, was the foundation	a party t	to a prohibited	l tax she	lter transac	tion?	Yes	⊠ No	-{]	i
b	If "Yes," did the foundation receive any proceed	ds or hav	ve any net inc	ome att	tributable ⁻	o the tr	ansaction	٦ [?] .	7b		
Par	VIII Information About Officers, Dire	ctors, 1	rustees, Fo	oundat	ion Mana	gers,	Highly F	aid E	mploy	ees,	
-	and Contractors	•	•			,	• •				
1	List all officers, directors, trustees, and foun	dation r	nanagers an	d their	compens	ation. S	ee instru	ctions			
			e, and average		pensation		Contribution		(e) Expe		
	(a) Name and address	hou	rs per week		ot paid, er -0-)	emplo	yee benefit rred compe	plans		allowar	
		devot	ed to position	ent	er -u-)	and dele	rred compe	risation			
VVIVI		DDDGTDD	COMPORATE & DIV			i .					
	CORNELL	PRESIDE	NT & DIRECTOR								•
	CORNELL 1 SANGAMORE RD BETHESDA MD 20816		40.00		0.			0.			0.
470					 _	· · · · · · · · · · · · · · · · · · ·				·	
470 ELI	1 SANGAMORE RD BETHESDA MD 20816		40.00		0.			0.		· · · · · ·	0.
470 ELI 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816	SECRETA	40.00 RY & DIRECTOR		 _						
470 ELI 470 GEO	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR	SECRETA	40.00 RY & DIRECTOR 4.00		 _						
470 ELI 470 GEO	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816	SECRETA	40.00 ARY & DIRECTOR 4.00 SURER		0.			0.			0.
470 ELI 470 GEO	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR	SECRETA	40.00 ARY & DIRECTOR 4.00 SURER		0.			0.			0.
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816	SECRETA	40.00 RY & DIRECTOR 4.00 SURER 4.00	se inclu	0.	ne 1—	see instr	0.	s) If n	one	0.
470 ELI 470 GEO	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ	SECRETA	40.00 RY & DIRECTOR 4.00 SURER 4.00	se inclu	0.	ne 1—:	see instr	0.	s). If n	one,	0.
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816	SECRETA	40.00 RY & DIRECTOR 4.00 SURER 4.00	se inclu	0.	ne 1—:		0. 0.	s). If n	one,	0.
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE."	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Her than those	iverage	0. 0.		(d) Contrib	0. 0. uctions	s). If n		0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ	SECRETA TREAS	40.00 RY & DIRECTOR 4.00 SURER 4.00	iverage veek	0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe		0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE."	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREAS	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those than those than those thours per version and a hours per version and a hours per version.	iverage veek	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREA	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those (b) Title, and a hours per videvoted to per the devoted	iverage veek osition	0. 0.		(d) Contribi employee plans and	0. 0. uctions	(e) Expe	ense ac	0. 0. enter
470 ELI 470 GEO 470	1 SANGAMORE RD BETHESDA MD 20816 ZABETH SWORD 1 SANGAMORE RD BETHESDA MD 20816 RGE L CORNELL, JR 1 SANGAMORE RD BETHESDA MD 20816 Compensation of five highest-paid employ "NONE." (a) Name and address of each employee paid more than \$50,	SECRETA TREA	40.00 ARY & DIRECTOR 4.00 SURER 4.00 Ter than those (b) Title, and a hours per videvoted to per the devoted	iverage veek osition	0. 0.		(d) Contribi employee plans and	0. 0. uctions to benefit deferred sation	(e) Expe	ense ac	o. o. enter

Part VI	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3 Fi	ve 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		
		
·····		
otal nui	mber of others receiving over \$50,000 for professional services	0
Part IX	-A Summary of Direct Charitable Activities	
		
List the organiza	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N</u>	/A	
		}
		0
2		
3		
4		
		<u> </u>
Part IX	· · · · · · · · · · · · · · · · · · ·	Amount
	e the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N	/A	
		0
2		<u>_</u>
All othe	r program-related investments. See instructions	
3		(
Total A	Id lines 1 through 2	
OTAL AC	dd lines 1 through 3) (

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	ign fo	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	٠,	
	purposes.	ر الشد	
а	Average monthly fair market value of securities	1a	13,741,007.
b	Average of monthly cash balances	1b	598,720.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	14,339,727.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	3, 2, 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	14,339,727.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1 1	
	instructions)	4	215,096.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,124,631.
6	Minimum investment return. Enter 5% of line 5	6	706,232.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ound	ations
1	Mınımum ınvestment return from Part X, line 6	1	706,232.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 5, 434.	300	
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	5,434.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	700,798.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	700,798.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	700,798.
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	904,077.
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	ثو ^{ا ع} م	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	904,077.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	904,077.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	ig whe	ther the foundation
			F 000 - DE /0017

Part	XIII Undistributed Incom	ne (see instruction	ons)		· · ·	rage 3
1	Distributable amount for 201		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	Ine 7				*-	700,798.
2	Undistributed income, if any, as o					
а	Enter amount for 2016 only .				578,889.	
b	Total for prior years. 20,2	.20				
3	Excess distributions carryover					
a	From 2012					
b	From 2013					1
c	From 2014	669,897.				
d	From 2015					1
e	From 2016					
f 4		17 fram Day VII	3,448,692.			
7	Qualifying distributions for 20° line 4. ► \$ 904,077.	i / irom Part All,				I
•	Applied to 2016, but not more	than line On				
a b	Applied to undistributed incon				· · · · · · · · · · · · · · · · · · ·	
_	(Election required—see instruc					i į
С	Treated as distributions out of required—see instructions)	corpus (Election				1
d	Applied to 2017 distributable a					
e	Remaining amount distributed		004 077			
5	Excess distributions carryover		904,077.			
•	(If an amount appears in colum					
	amount must be shown in colu					
6	Enter the net total of ear					
а	Corpus. Add lines 3f, 4c, and 4e	e. Subtract line 5	4,352,769.			1
b	Prior years' undistributed in					
	line 4b from line 2b			0.		,
С	Enter the amount of prior year	rs' undistributed				
	income for which a notice of					İ
	been issued, or on which the					
_	tax has been previously assess					
d	Subtract line 6c from line					
	amount—see instructions .			0.		
е	Undistributed income for 201					
	4a from line 2a. Taxable instructions					
					578,889.	
f	Undistributed income for 2017 4d and 5 from line 1. This a					
	distributed in 2018					700 700
7	Amounts treated as distribution					700,798.
•	to satisfy requirements impo					
	170(b)(1)(F) or 4942(g)(3) (Ele					
	required—see instructions) .					
8	Excess distributions carryover					
	applied on line 5 or line 7 (see		359,991.			
9	Excess distributions carry					
	Subtract lines 7 and 8 from line	e6a	3,992,778.			
10	Analysis of line 9					
а	Excess from 2013	640,363.		İ		
b	Excess from 2014	669,897.				
С	Excess from 2015	841,884.				1
d	Excess from 2016	936,557.				Ì
ее	Excess from 2017	904,077.				

orm 99	0-PF (2017)					Page 10
Part	XIV Private Operating Founda	tions (see ınstru	uctions and Par	VII-A, question 9	9)	N/A
1a	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective fo	•	•		L	
	Check box to indicate whether the four		e operating founda		ection),ór 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	 	Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed		ļ			
	85% of line 2a			 		
С	Qualifying distributions from Part XII,		j			•
	line 4 for each year listed .		 		 / 	
đ	Amounts included in line 2c not used directly for active conduct of exempt activities		}			
_	•	<u> </u>		/-	 	
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c]	
3		<u> </u>	 	 	 	
0	Complete 3a, b, or c for the alternative test relied upon:		1			
а	"Assets" alternative test—enter.				}	
a	(1) Value of all assets		ļ.	\mathcal{L}	1	
	(2) Value of assets qualifying under	 	 	/	 	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3	 	-			
	of minimum investment return shown in Part X, line 6 for each year listed .					
С	"Support" alternative test—enter:		+-/			
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section	1			1	
	512(a)(5)), or royalties)	/				
	(2) Support from general public					· <u>-</u>
	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		<u> </u>		 	
Part			•	the foundation	had \$5,000 or mo	re in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation List any managers of the foundation		utad mara than (10/ of the total con	tributions received t	w the foundation
а	before the close of any tax year (but of					by the louridation
1	N/A	only if they have e	onthibated more		00011011001(0)(2).)	
b		who own 10% o	or more of the sto	ock of a corporation	on (or an equally lar	ge portion of the
-	ownership of a partnership or other e					go portion or the
	N/A	,,		3		
2	Information Regarding Contribution	n, Grant, Gift, Lo	an, Scholarship,	etc., Programs:		
	Check here ► 🗵 if the foundation			_	organizations and	does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See in	nstructions.		_		
а	The name, address, and telephone no	umber or email ac	ddress of the pers	on to whom applic	ations should be ad	dressed.
b	The form in which applications should	d be submitted ar	nd information and	d materials they sh	ould include:	
	Any submission doadlings:					
С	Any submission deadlines:					
d	Any restrictions or limitations on av	wards, such as I	by geographical	areas, charitable	fields, kinds of inst	itutions, or othe
	factors:					

Part XV Supplementary Information (continuous Grants and Contributions Paid During to	nued) he Year or Approv	ed for Fut	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIBUTION	
a Paid during the year				
SEE ATTACHED		Publicly		
SCHEDULE OF GRANT		Supported		828,500.
DISBURSEMENTS		301 (C) 3	GENERAL SUPPORT	820,300.
		ļ		
Total				a 828,500.
b Approved for future payment				
Total	1		• 3	3b

Prog		(0)	/hl		on 512, 513, or 514	(e) Related or exem
Prog		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function incom (See instruction
•	gram service revenue.	ļ		 		
a b				 		
C -				 		
ď					·	
e				 		
f				 		
g	ees and contracts from government agencies			 		
	nbership dues and assessments	 		1		
	rest on savings and temporary cash investments			14	41.	
	dends and interest from securities			14	272,018.	
	rental income or (loss) from real estate:				2.2,010.	
	Debt-financed property					
	Not debt-financed property					
	rental income or (loss) from personal property					
	er investment income			14		
	or (loss) from sales of assets other than inventory					
	income or (loss) from special events					
	ss profit or (loss) from sales of inventory					
	er revenue: a					
b				 		
C						
ď				1		
e						
-	total. Add columns (b), (d), and (e)				272,059.	
	, , , , , , , , , , , , , , , , , , , ,					272,05
	sheet in line 13 instructions to verify calculation					
irt XV	I-B Relationship of Activities to the A	Accomplishme	ent of Exemp	pt Purposes		
	accomplishment of the loungation's exempt put	poses torner man			oses) (See instru	ctions)
	Explain below how each activity for which accomplishment of the foundation's exempt pure	poses (other than			oses) (See Instru	ctions)
	accomplishment of the foundation's exempt pur	poses (other than			oses) (See Instru	ctions)
	accomplishment of the foundation's exempt pur	poses (other than			oses) (See Instru	ctions)
	accomplishment of the foundation's exempt pur	poses (other than			oses) (See Instru	ctions)
	accomplishment of the foundation's exempt pur				oses) (See Instruc	ctions)
	accomplishment of the foundation's exempt pur				oses) (See Instruc	ctions)
	accomplishment of the foundation's exempt pur				oses) (See Instru	ctions)
	accomplishment of the foundation's exempt pur				oses) (See Instruc	ctions)
	accomplishment of the foundation's exempt pur				oses) (See Instru	ctions)

Form 99	0-PF ((2017)						Pa	ige 13
Part	XVI	Information Organization		nsfers to and Transa	ections and R	elationships With Noncha	itable	e Exe	mpt
1	ın s					other organization described on 527, relating to political		Yes	No
а	•		oorting foundation t	o a noncharitable exem	pt organization	of:			,
	(1)	Cash					1a(1)		×
		Other assets .					1a(2)	ļ	×
b		er transactions:	a nanahawtahla ay	ament arranged as			45.64	-	
				empt organization . table exempt organization			1b(1) 1b(2)	-	×
				er assets			1b(3)		×
							1b(4)		×
		Loans or loan gua	_				1b(5)		×
				hip or fundraising solicit			1b(6)		×
C				ists, other assets, or pa			1c	<u> </u>	
a	valu	ie of the goods, o	ther assets, or serv	rices given by the repor	ting foundation.	Column (b) should always should for the foundation received less of the goods, other assets, or se	than	fair m	narket
(a) Line	on e	(b) Amount involved	(c) Name of nonc	charitable exempt organization	(d) Descr	ption of transfers, transactions, and sha	ring arr	angem	ents
				· · · · · · · · · · · · · · · · · · ·				·-·	
									
									
									
								-	
2a						re tax-exempt organizations	- 7		
ь			out(c) (other than se e following schedule	ection 501(c)(3)) or in se	ction 527? .	[_ Yes	s 🔀	No
	<u>'' '</u>	(a) Name of organ		(b) Type of organ	uzation	(c) Description of relation			
		(.,		(a) Type of organ	- Lation	(V) Dooriphon on Tolland			
			1						
	Line	d	The state of the same of the s					1 1 6	
Sign				ied this return, including accomp han taxpayer) is based on all info			<u> </u>		
Here		Alun D C	oppell.	5.12-18	PRESIDENT	May the with the p			
11610		gnature of officer or true	<u> </u>	Date	Title	See instru	ctions	∐Yes	□No
Paid		Print/Type preparer	's name	Preparer's signature		Date Check If	PTIN		
Prepare	arer	JOYCE LEEG	E	JOYCE LEEGE		05/11/2018 self-employed	P003	9197	19
Use			MOER & LEEGE			Firm's EIN ► 52-1	3683	33	
		Firm's address ▶	9065 Shady 0			Phone no (301) 9			
BAA			Gaithersburg	J	MD 20877	F	orm 9 5	JU-PF	= (2017)

Form 990-PF: Return of Private Foundation

Part IV: Capital Gains and Losses for Tax on Investment Income

Continuation Statement

(a) List and describe (e.g., real estate, common stoc ARCONIC INC DOWDUPONT INC	(b) How acquired P-Purchase D-Donation	(c) Date acquired 02/05/07 08/14/09	(d) Date sold 08/31/17 09/01/17		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other us expense of sale	02/06/07 (h) Gain (e) plus	(f) minus
3,345. 19. 7,995.			9,588. 9. 14,431.		-6,243. 10. -6,436.
	0. ets showing gain in co e foundation on 12/31/	69		gain minus	
		ess of col. col. (j), if any	but not less or Losses (h)	(from col.	
					-6,243. 10. -6,436.
0.	0.		0.		-12,669.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FOREIGN TAX	356.	356.		
PROPERTY TAX	193.			193.
Total	549.	356.		193.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
ADMINISTRATIVE EXP	18,820.			18,820.
DUES & FEES	15,625.			15,625.
INSURANCE	1,459.			1,459.
LICENSES/FILING FEES	225.			225.
OFFICE SUPPLIES	307.			307.
TELEPHONE EXPENSE	2,060.			2,060.
Total	38,496.			38,496.

Form 990-PF: Return of Private Foundation

Other Decreases

Continuation Statement

Description	Amount
FEDERAL TAX	2,000.
REALIZED LOSS ON SALE OF INV	10,815.
DIFFERENCE OF COST & FMV OF STOCK	6,169.
	Total 18, 984.

Name CORNELL DOUGLAS FOUNDAT:	ION, INC				ver Identification No
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	US Govern Obligati Book V	ions	f Year US Government Obligations FMV
US TREASURY BILL			1,292	,984.	1,295,333.
US TREASURY NOTES			554,	.241.	542,924.
Tot to Fm 990-PF, Pt II, Ln 10a			1,847	,225.	1,838,257.
				End o	f Year
Line 10b - Investme	ents - Corporate	Stock:	Bool Valu		Fair Market Value
3M CO			31	,408.	94,148.
ALPHABET INC				,315.	262,475.
AMBARELLA INC				087.	58,750.
See L-10b Stmt			5,533		12,065,614.
Totals to Form 990-PF, Part II, L	_ine 10b		5,667	,507.	12,480,987.
			<u> </u>	End o	of Year
Line 10c - Investme	ents - Corporate l	Bonds:	Boo Valu	k	Fair Market Value
BERKSHIRE HATHAWAY FIN			103	,954.	105,739.
IBM CORP				,004.	197,534.
Totals to Form 990-PF, Part II, I	Line 10c		295	,958.	303,273.
Line 12 - Investme	ents - Mortgage I	loans:	Воо		of Year Fair Market
			Valu	e 	Value
Totals to Form 990-PF, Part II, I	Line 12				
Line 13 - Invo	estments - Other	·:	Boo Valu	k	of Year Fair Market Value
BROWN ADVISORY FDS			50	,004.	98,841.
WELLS FARGO & CO				,783.	103,980.
Totals to Form 990-PF, Part II, I	Line 13		152	797	202 021
Totals to Form 990-PF, Part II, I	Line 13		153	<u>,787.</u>	202,821.

Form 990-PF Part II, Line 11

Investments — Land, Buildings, and Equipment

2017

Name				Employer Identification No
CORNELL	DOUGLAS	FOUNDATION,	INC	 65-1287707

Line 11b - Description of Investments Land, Buildings and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Totals to Form 990-PF, Part II, Line 11			

Form 990-PF Part II, Line 14

Land, Buildings, and Equipment

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
FURNITURE & EQUIPMENT	25,006.	23,685.	1,321.
Totals to Form 990-PF, Part II, Line 14	25,006.	23,685.	1,321.

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

	ELL DOUGLAS FO		65-1287707
Organiz	zation type (check on	e)	
Filers o	f:	Section:	
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated	I as a private foundation
		☐ 527 political organization	
Form 99	90-PF	▼ 501(c)(3) exempt private foundation	
		☐ 4947(a)(1) nonexempt charitable trust treated as	a private foundation
		☐ 501(c)(3) taxable private foundation	
	nly a section 501(c)(7	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both th	e General Rule and a Special Rule. See
Genera	l Rule		
X		filing Form 990, 990-EZ, or 990-PF that received, during reproperty) from any one contributor. Complete Parts ontributions.	
Special	Rules		
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-Ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Sch that received from any one contributor, during the yethe amount on (i) Form 990, Part VIII, line 1h; or (ii) Fo	edule A (Form 990 or 990-EZ), Part II, line ear, total contributions of the greater of (1)
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 99 ne year, total contributions of more than \$1,000 exclus all purposes, or for the prevention of cruelty to children	sively for religious, charitable, scientific,
	contributor, during to contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 9 he year, contributions exclusively for religious, charital more than \$1,000. If this box is checked, enter here in exclusively religious, charitable, etc., purpose. Don'tes to this organization because it received nonexclusivore during the year	ble, etc., purposes, but no such the total contributions that were received t complete any of the parts unless the religious, charitable, etc., contributions
		t isn't covered by the General Rule and/or the Specia ist answer "No" on Part IV, line 2, of its Form 990; or	

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization		Employer identification number
CORNELL DOUGLAS FOUNDATION,	INC	65-1287707

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		s	Person Payroll Noncash				
			(Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash				
			(Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		 \$	Person Payroll Noncash				
			(Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash				
			(Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person Payroll Noncash (Complete Part II for				
(a)	(b)	(c)	noncash contributions.)				
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution				
		\$	Person Payroll Noncash				
			(Complete Part II for noncash contributions.)				

Name of organization

CORNELL DOUGLAS FOUNDATION.

Employer identification number

65-1287707

	JOGEAS FOUNDATION, INC		1201101
art II No	oncash Property (see instructions). Use duplicate co	pies of Part II if additional space	e is needed.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Employer identification number

Name of organization

ORNELL				65-1287707				
Part III	(10) that total more than \$1,000 for	the year from any ions completing Par	one contribut t III, enter the	is described in section 501(c)(7), (8), or tor. Complete columns (a) through (e) and total of exclusively religious, charitable, etc., e. See instructions.) \$\Bigsim \text{\$\sigma}\$				
	Use duplicate copies of Part III if add			σ. σσο ποι αστιστιστή ν φ				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
Part I								
}	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(e) Transf	er of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
-		(e) Transf	er of aift					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
			<u>-</u>					
	(e) Transfer of gift							
-	Transferee's name, address, ar	14 ZIF + 4	Relationship of transferor to transferee					
Ì								

Additional information from your 2017 Federal Exempt Tax Return

Form 990-PF Part II Line 10, 12 and 13 Investments L-10b Stmt

Continuation Statement

L-10b Stmt	Contin	Continuation Statement		
Line 10b Description	Line 10b Book	Line 10b FMV		
APPLE INC	125,131.	592,305.		
AT&T INC	76,906.	93,312.		
AUTOMATIC DATA PROCESSING	86,412.	152,347.		
CDK GOLBAL HOLDINGS	12,493.	30,864.		
CISCO SYSTEMS INC	31,450.	45,960.		
CLOROX COMPANY	91,525.	156,177.		
COCA-COLA COMPANY	33,605.	45,880.		
COSTCO	34,035.	74,448.		
DOMTAR CORP	11,095.	14,856.		
DU PONT E.I. DE NEMOURS AND COMPANY	4,251,515.	9,700,093.		
ECOLAB INC	25,391.	70,444.		
GENERAL ELECTRIC COMPANY	42,048.	20,940.		
GENERAL MILLS INC	14,159.	29,645.		
HALYARD HEALTH INC	1,395.	2,863.		
HANGER INC	8,671.	6,300.		
IBM	20,933.	23,013.		
INTEL CORP	32,451.	64,624.		
IROBOT CORP	19,936.	42,185.		
JOHNSON & JOHNSON	19,992.	41,916.		
KIMBERLY-CLARK CORP	32,711.	60,330.		
LULULEMON ATHLETICA INC	20,610.	39,295.		
MICROSOFT CORP	23,081.	68,432.		
NEW YORK TIMES	14,420.	11,100.		
ORACLE CORPORATION	17,810.	23,640.		
OWENS CORNING INC	8,172.	27,582.		
PFIZER INCORPORATED	14,140.	18,110.		
PROCTOR & GAMBLE CO	47,641.	68,910.		
PUBLIC STORAGE INC	28,331.	36,575.		
SEAGATE TECHNOLOGY	36,249.	36,610.		
SIEMENS	39,160.	48,489.		
SYSCO CORPORATION	31,577.	54,657.		
TARGET CORP	23,339.	26,100.		
TOYOTA MTR CORP	46,900.	50,868.		
VERIZON COMMUNICATIONS	175,577.	209,074.		
WASTE MGMT INC	34,836.	77,670.		
Tota	5,533,697.	12,065,614.		