

Form **990-PF**

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

OMB No. 1545-0052

**2016**

Department of the Treasury  
Internal Revenue Service

**Do not enter social security numbers on this form as it may be made public.**  
**Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).**

Open to Public Inspection

For calendar year 2016 or tax year beginning , and ending

Name of foundation <b>THE NETTIE L AND CHARLES L WILEY FOUNDATION</b>		A Employer identification number <b>52-1231771</b>												
Number and street (or P.O. box number if mail is not delivered to street address) <b>PO BOX 126</b>	Room/suite	B Telephone number (see instructions)												
City or town, state or province, country, and ZIP or foreign postal code <b>IRVINGTON VA 22480</b>		C If exemption application is pending, check here <input type="checkbox"/>												
G Check all that apply: <table style="display: inline-table; vertical-align: top; margin-right: 20px;"> <tr><td><input type="checkbox"/></td><td>Initial return</td></tr> <tr><td><input type="checkbox"/></td><td>Final return</td></tr> <tr><td><input type="checkbox"/></td><td>Address change</td></tr> </table> <table style="display: inline-table; vertical-align: top;"> <tr><td><input type="checkbox"/></td><td>Initial return of a former public charity</td></tr> <tr><td><input type="checkbox"/></td><td>Amended return</td></tr> <tr><td><input type="checkbox"/></td><td>Name change</td></tr> </table>		<input type="checkbox"/>	Initial return	<input type="checkbox"/>	Final return	<input type="checkbox"/>	Address change	<input type="checkbox"/>	Initial return of a former public charity	<input type="checkbox"/>	Amended return	<input type="checkbox"/>	Name change	D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/>	Initial return													
<input type="checkbox"/>	Final return													
<input type="checkbox"/>	Address change													
<input type="checkbox"/>	Initial return of a former public charity													
<input type="checkbox"/>	Amended return													
<input type="checkbox"/>	Name change													
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>												
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>u \$ 9,661,826</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>												

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule) ...				
	2 Check <b>u</b> <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	36,661	36,661	36,661	
	4 Dividends and interest from securities	211,065	211,065	211,065	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	80,636			
	b Gross sales price for all assets on line 6a <b>1,192,320</b>				
	7 Capital gain net income (from Part IV, line 2)		80,636		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) <b>STMT 1</b>	-9,338		-9,338		
12 <b>Total.</b> Add lines 1 through 11	319,024	328,362	238,388		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	36,000	12,000		24,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) <b>SEE STMT 2</b>	455	455		
	b Accounting fees (attach schedule) <b>STMT 3</b>	1,857	928		929
	c Other professional fees (attach schedule)				
	17 Interest	80			
	18 Taxes (attach schedule) (see instructions) <b>STMT 4</b>	10,279	10,279		
	19 Depreciation (attach schedule) and depletion <b>STMT 5</b>	254			
	20 Occupancy	1,800			1,800
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (att. sch.) <b>STMT 6</b>	19,799	5,137		14,662
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	70,524	28,799	0	41,391
	25 Contributions, gifts, grants paid	432,065			432,065
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	502,589	28,799	0	473,456	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-183,565				
b <b>Net investment income</b> (if negative, enter -0-)		299,563			
c <b>Adjusted net income</b> (if negative, enter -0-)			238,388		

For Paperwork Reduction Act Notice, see instructions.

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Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash – non-interest-bearing	13,187	15,209	15,213
	2	Savings and temporary cash investments	786,808	799,519	799,519
	3	Accounts receivable <b>u</b>			
		Less: allowance for doubtful accounts <b>u</b>			
	4	Pledges receivable <b>u</b>			
		Less: allowance for doubtful accounts <b>u</b>			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (att. schedule) <b>u</b>			
		Less: allowance for doubtful accounts <b>u</b>	0		
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U.S. and state government obligations (attach schedule)			
		b Investments – corporate stock (attach schedule) <b>SEE STMT 7</b>	3,786,971	3,939,236	6,149,288
		c Investments – corporate bonds (attach schedule) <b>SEE STMT 8</b>	2,484,876	2,205,658	2,201,740
	11	Investments – land, buildings, and equipment: basis <b>u</b>			
	Less: accumulated depreciation (attach sch.) <b>u</b>				
12	Investments – mortgage loans				
13	Investments – other (attach schedule)				
14	Land, buildings, and equipment: basis <b>u</b> 141,664				
	Less: accumulated depreciation (attach sch.) <b>u</b> <b>STMT 9</b> 12,551	129,367	129,113	128,476	
15	Other assets (describe <b>u</b> <b>SEE STATEMENT 10</b> )	312,313	241,222	367,590	
16	<b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)	7,513,522	7,329,957	9,661,826	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe <b>u</b> )			
	23	<b>Total liabilities</b> (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <b>u</b> <input checked="" type="checkbox"/>				
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted	7,513,522	7,329,957	
	25	Temporarily restricted			
	26	Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here</b> <b>u</b> <input type="checkbox"/>				
	<b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
30	<b>Total net assets or fund balances</b> (see instructions)	7,513,522	7,329,957		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	7,513,522	7,329,957		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	7,513,522
2	Enter amount from Part I, line 27a	2	-183,565
3	Other increases not included in line 2 (itemize) <b>u</b>	3	
4	Add lines 1, 2, and 3	4	7,329,957
5	Decreases not included in line 2 (itemize) <b>u</b>	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	7,329,957

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a SEE WORKSHEET</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b> Capital gain net income or (net capital loss) <span style="border-left: 1px solid black; padding-left: 5px;">If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</span>			<b>2</b>	<b>80,636</b>
<b>3</b> 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) (see instructions). If (loss), enter -0- in Part I, line 8			<b>3</b>	<b>-19,919</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2015	<b>464,238</b>	<b>9,494,639</b>	<b>0.048895</b>
2014	<b>440,846</b>	<b>9,636,346</b>	<b>0.045748</b>
2013	<b>419,281</b>	<b>9,014,716</b>	<b>0.046511</b>
2012	<b>386,908</b>	<b>8,309,909</b>	<b>0.046560</b>
2011	<b>392,240</b>	<b>8,226,490</b>	<b>0.047680</b>
<b>2</b> Total of line 1, column (d)			<b>0.235394</b>
<b>3</b> Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>0.047079</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			<b>9,398,165</b>
<b>5</b> Multiply line 4 by line 3			<b>442,456</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>2,996</b>
<b>7</b> Add lines 5 and 6			<b>445,452</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			<b>473,456</b>

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	<b>1</b>	<b>2,996</b>
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	<b>0</b>
<b>3</b>	Add lines 1 and 2	<b>3</b>	<b>2,996</b>
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	<b>0</b>
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	<b>5</b>	<b>2,996</b>
<b>6</b>	Credits/Payments:		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	<b>4,900</b>
<b>b</b>	Exempt foreign organizations – tax withheld at source	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d	<b>7</b>	<b>4,900</b>
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	<b>10</b>	<b>1,904</b>
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2017 estimated tax</b> <b>1,904</b> <b>Refunded</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b>		<b>X</b>
<b>b</b>		<b>X</b>
<b>c</b>		<b>X</b>
<b>d</b>		
<b>e</b>		
<b>2</b>		<b>X</b>
<b>3</b>		<b>X</b>
<b>4a</b>		<b>X</b>
<b>4b</b>		
<b>5</b>		<b>X</b>
<b>6</b>	<b>X</b>	
<b>7</b>	<b>X</b>	
<b>8a</b>		
<b>8b</b>	<b>X</b>	
<b>9</b>		<b>X</b>
<b>10</b>		<b>X</b>

**Part VII-A Statements Regarding Activities (continued)**

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		<b>X</b>
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)		<b>X</b>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>u WWW.WILEYFDN.ORG</b>	<b>X</b>	
14 The books are in care of <b>u THE FOUNDATION</b> Telephone no. <b>u 804-438-5656</b> <b>P. O. BOX 126</b>		
Located at <b>u IRVINGTON</b> <b>va</b> ZIP+4 <b>u 22480</b>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <b>u</b> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <b>u 15</b>		
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country <b>u</b>		<b>X</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <b>N/A</b> Organizations relying on a current notice regarding disaster assistance check here <b>u</b> <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <b>N/A</b>		
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>u</b> 20 , 20 , 20 , 20		
b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <b>N/A</b>		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <b>u</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.) <b>N/A</b>		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		<b>X</b>
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 2016?		<b>X</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **N/A** **5b**

Organizations relying on a current notice regarding disaster assistance check here **u**

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **N/A**  Yes  No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on 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 to a prohibited tax shelter transaction?  Yes  No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A** **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11				

**2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). 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 deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000 **0**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		u

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3	▶

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	8,297,384
b	Average of monthly cash balances	1b	807,364
c	Fair market value of all other assets (see instructions)	1c	436,536
d	<b>Total</b> (add lines 1a, b, and c)	1d	9,541,284
e	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	9,541,284
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	143,119
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,398,165
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	469,908

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	469,908
2a	Tax on investment income for 2016 from Part VI, line 5	2a	2,996
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,996
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	466,912
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	466,912
6	Deduction from distributable amount (see instructions)	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	466,912

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	473,456
b	Program-related investments – total from Part IX-B	1b	
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	473,456
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	2,996
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	470,460

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				<b>466,912</b>
<b>2</b> Undistributed income, if any, as of the end of 2016:				
<b>a</b> Enter amount for 2015 only			<b>454,562</b>	
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2016:				
<b>a</b> From 2011				
<b>b</b> From 2012				
<b>c</b> From 2013				
<b>d</b> From 2014				
<b>e</b> From 2015				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4: <b>u</b> \$ <b>473,456</b>				
<b>a</b> Applied to 2015, but not more than line 2a			<b>454,562</b>	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required – see instructions)				
<b>d</b> Applied to 2016 distributable amount				<b>18,894</b>
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b. Taxable amount – see instructions				
<b>e</b> Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount – see instructions				
<b>f</b> Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				<b>448,018</b>
<b>7</b> 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)				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)				
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2012				
<b>b</b> Excess from 2013				
<b>c</b> Excess from 2014				
<b>d</b> Excess from 2015				
<b>e</b> Excess from 2016				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling \_\_\_\_\_ **u**

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test – enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> "Support" alternative test – enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
**N/A**

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
**N/A**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here **u**  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:  
**THE FOUNDATION 804-438-5656  
PO BOX 126 IRVINGTON VA 22480**

**b** The form in which applications should be submitted and information and materials they should include:  
**SEE WEBSITE**

**c** Any submission deadlines:  
**SEE WEBSITE**

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

**Part XV** Supplementary Information *(continued)*

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<p><b>a</b> <i>Paid during the year</i>  <b>SEE STATEMENT 12</b></p>				<p><b>430,565</b></p>
<p><b>Total</b> .....</p>			<p><b>u 3a</b></p>	<p><b>430,565</b></p>
<p><b>b</b> <i>Approved for future payment</i>  <b>N/A</b></p>				
<p><b>Total</b> .....</p>			<p><b>u 3b</b></p>	



**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

	Yes	No
<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:		
<b>(1)</b> Cash .....	<b>1a(1)</b>	<b>X</b>
<b>(2)</b> Other assets .....	<b>1a(2)</b>	<b>X</b>
<b>b</b> Other transactions:		
<b>(1)</b> Sales of assets to a noncharitable exempt organization .....	<b>1b(1)</b>	<b>X</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization .....	<b>1b(2)</b>	<b>X</b>
<b>(3)</b> Rental of facilities, equipment, or other assets .....	<b>1b(3)</b>	<b>X</b>
<b>(4)</b> Reimbursement arrangements .....	<b>1b(4)</b>	<b>X</b>
<b>(5)</b> Loans or loan guarantees .....	<b>1b(5)</b>	<b>X</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations .....	<b>1b(6)</b>	<b>X</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees .....	<b>1c</b>	<b>X</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
<b>N/A</b>			

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
<b>N/A</b>		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

<p><b>Sign Here</b></p> <p>Signature of officer or trustee _____</p>	<p>Date _____</p> <p style="text-align: center;"><b>PRESIDENT</b></p> <p>Title _____</p>
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<p><b>Paid Preparer Use Only</b></p> <p>Print/Type preparer's name <b>C DWIGHT CLARKE</b></p> <p>Firm's name ,, <b>DEHNERT, CLARKE &amp; CO., P.C.</b></p> <p>Firm's address ,, <b>P.O. BOX 420 IRVINGTON, VA 22480</b></p>	<p>Preparer's signature _____</p>	<p>Date <b>05/10/17</b></p>	<p>Check <input type="checkbox"/> if self-employed</p> <p>PTIN <b>P00188399</b></p> <p>Firm's EIN ,, <b>20-1212674</b></p> <p>Phone no. <b>804-438-5656</b></p>
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**Federal Statements**

**Statement 1 - Form 990-PF, Part I, Line 11 - Other Income**

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
990PF FEDERAL REFUND	\$ 9,671	\$	\$ 9,671
BUCKEYE PARTNERSHIP	1,440		1,440
BLACKSTONE	11		11
PLAINS ALL AMERICAN PSP	-20,460		-20,460
TOTAL	\$ -9,338	\$ 0	\$ -9,338

**Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
LEGAL FEES	\$ 455	\$ 455	\$	\$
TOTAL	\$ 455	\$ 455	\$ 0	\$ 0

**Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING	\$ 1,857	\$ 928	\$	\$ 929
TOTAL	\$ 1,857	\$ 928	\$ 0	\$ 929

**Statement 4 - Form 990-PF, Part I, Line 18 - Taxes**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
REAL ESTATE TAXES	\$ 1,695	\$ 1,695	\$	\$
FOREIGN DIVIDEND TAX	8,584	8,584		
TOTAL	\$ 10,279	\$ 10,279	\$ 0	\$ 0

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**Federal Statements**

FYE: 12/31/2016

**Statement 5 - Form 990-PF, Part I, Line 19 - Depreciation**

Description								
Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income	
WEB DESIGN								
1/31/07	\$ 10,232	\$ 10,232		3	\$	\$	\$	
COPIER & MONITOR								
6/30/07	1,155	1,155	S/L	5				
COMPUTER UPGRADE								
11/09/07	528	528	S/L	5				
LAPTOP								
7/08/14	1,273	382	S/L	5	254			
TOTAL	\$ 13,188	\$ 12,297			\$ 254	\$ 0	\$ 0	

**Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
BANK CHARGES	353			353
DUES	1,200			1,200
FIDUCIARY FEES	10,275	5,137		5,138
OFFICE	337			337
POSTAGE	66			66
WEB SITE EXPENSE	6,385			6,385
NON DEDUCTABLE EXPENSES	83			83
CONVENTION EXPENSES	1,000			1,000
MISCELLANEOUS	100			100
TOTAL	\$ 19,799	\$ 5,137	\$ 0	\$ 14,662

## Federal Statements

### Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
CORPORATE STOCK & EQUITIES	\$ 3,786,971	\$ 3,939,236	COST	\$ 6,149,288
TOTAL	<u>\$ 3,786,971</u>	<u>\$ 3,939,236</u>		<u>\$ 6,149,288</u>

### Statement 8 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
CORPORATE BONDS	\$ 2,484,876	\$ 2,205,658	COST	\$ 2,201,740
TOTAL	<u>\$ 2,484,876</u>	<u>\$ 2,205,658</u>		<u>\$ 2,201,740</u>

### Statement 9 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
COMPUTER EQUIPMENT AND WEBSITE	\$ 891	\$ 13,188	\$ 12,551	\$
LAND	128,476	128,476		128,476
TOTAL	<u>\$ 129,367</u>	<u>\$ 141,664</u>	<u>\$ 12,551</u>	<u>\$ 128,476</u>



**Federal Statements****Statement 10 - Form 990-PF, Part II, Line 15 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Fair Market Value</u>
ESTATE PERSONAL PROPERTY FOR SALE	\$ 3,960	\$ 3,960	\$ 3,960
PUBLICLY TRADED PARTNERSHIPS	308,353	237,261	360,815
WARRENTS		1	2,815
TOTAL	<u>\$ 312,313</u>	<u>\$ 241,222</u>	<u>\$ 367,590</u>

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**Federal Statements**

FYE: 12/31/2016

**Statement 11 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,  
Etc.**

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
CATHARINE B MOORE PO BOX 126 IRVINGTON VA 22480	SECRETARY	2.00	6,000	0	0
GLORIA C CONLEY PO BOX 126 IRVINGTON VA 22480	VICE PRES.	2.00	6,000	0	0
B.H.B HUBBARD PO BOX 126 IRVINGTON VA 22480	TREASURER	2.00	6,000	0	0
THOMAS GOSSE PO BOX 126 IRVINGTON VA 22480	VICE PRES.	2.00	6,000	0	0
LESLIE FRANKLIN PO BOX 126 IRVINGTON VA 22480	PRESIDENT	2.00	6,000	0	0
PHILLIP WILLIAMS PO BOX 126 IRVINGTON VA 22480	HISTORIAN	2.00	6,000	0	0

**Federal Statements**

**Form 990-PF, Part XV, Line 2b - Application Format and Required Contents**

Description

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SEE WEBSITE

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**Form 990-PF, Part XV, Line 2c - Submission Deadlines**

Description

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SEE WEBSITE

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**Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations**

Description

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SEE WEBSITE

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## Federal Statements

FYE: 12/31/2016

**Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year**

Name	Address	Relationship	Status	Purpose	Amount
BETHEL UNITED METHODIST CHURCH LIVELY VA 22507	P. O. BOX 118	NONE		PRESCHOOL	10,000
MARY BALL WASHINGTON MUSEUM LANCASTER VA 22503	P. O. BOX 97	NONE		CHILDREN'S PROGRAMS	3,500
CHESAPEAKE ACADEMY IRVINGTON VA 22480	P. O. BOX 8	NONE		CHILDREN'S PROGRAMS	40,000
VIRGINIA COMMONWEALTH UNIVERSITY RICHMOND VA 23284	P. O. BOX 843031	NONE		SCHOLARSHIPS	3,000
NORTHERN NECK CONNECTION KILMARNOCK VA 22482	P. O. BOX 78	NONE		EDUCATION	3,500
LANCASTER COMMUNITY LIBRARY KILMARNOCK VA 22482	P. O. BOX 850	NONE		EDUCATION	5,000
JAMES MADISON UNIVERSITY HARRISONBURG VA 22807	180 BLUESTONE DR., MSC 35	NONE		SCHOLARSHIP	2,000
NATIONAL CHILD SAFETY COUNCIL LANCASTER VA 22503	8293 MARY BALL ROAD	NONE		CHILDREN'S PROGRAMS	500
NORTHERN NECK FAMILY YMCA KILMARNOCK VA 22482	P. O. BOX 1809	NONE		CHILDREN'S PROGRAMS	20,000
NORTHERN NECK FOOD BANK WARSAW VA 22572	P. O. BOX 735	NONE		CHILDREN'S HEALTH	20,000
NORTHERN NECK FREE HEALTH CLINIC KILMARNOCK VA 22482	P. O. BOX 1694	NONE		HEALTH	50,000
LYNCHBURG COLLEGE LYNCHBURG VA 24501	1501 LAKESIDE DRIVE	NONE		SCHOLARSHIPS	2,000
BOYS & GIRLS CLUB OF THE NN KILMARNOCK VA 22482	P. O. BOX 564	NONE		CHILDREN'S EDUCATION	25,000
VIRGINIA UNION UNIVERSITY RICHMOND VA 23220	1500 NORTH LOMBARDY ST.	NONE		SCHOLARSHIPS	5,000
VA WESLEYAN COLLEGE NORFOLK VA 23502	1584 WESLEYAN DRIVE	NONE		SCHOLARSHIPS	5,000
NORTHERN NECK FARM MUSEUM HEATHSVILLE VA 22473	12705 NORTHUMBERLAND HWY	NONE		CHILDREN'S PROGRAMS	20,000
THREE RIVERS HEALTHY FAMILIES SALUDA VA 23149	P. O. BOX 40	NONE		CHILDREN'S HEALTH	13,500

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## Federal Statements

FYE: 12/31/2016

**Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)**

Name	Address	Relationship	Status	Purpose	Amount
UNIVERSITY OF MARY WASHINGTON FREDERICKSBURG VA 22401	1119 HANOVER STREET	NONE		SCHOLARSHIPS	25,000
VIRGINIA POLYTECHNIC INSTITUTE BLACKSBURG VA 24061	800 WASHINGTON ST. SW	NONE		SCHOLARSHIPS	2,500
LANCASTER COUNTY VA EDUCATION FDN. KILMARNOCK VA 22482	P. O. BOX 928	NONE		EDUCATION	40,000
OLD DOMINION UNIVERSITY NORFOLK VA 23529	121 ROLLINS HALL	NONE		SCHOLARSHIP	3,000
CHRISTOPHER NEWPORT UNIVERSITY NEWPORT NEWS VA 23606	1 AVENUE OF THE ARTS	NONE		SCHOLARSHIPS	6,500
KIWANIS KIDS KILMARNOCK VA 22482	P. O. BOX 735	NONE		CHILDREN'S PROGRAMS	1,000
STEAMBOAT ERA MUSEUM IRVINGTON VA 22480	P. O. BOX 132	NONE		CHILDREN'S PROGRAMS	50,000
THE HAVEN WARSAW VA 22572	P. O. BOX 1267	NONE		HEALTH	10,000
THE NEMOURS FOUNDATION JACKSONVILLE FL 32256	10140 CENTURION PKWY N	NONE		EDUCATION	7,000
LANCASTER/NORTH'D INTERFATH SERVICE KILMARNOCK VA 22482	P. O. BOX 868	NONE		CHILDREN'S PROGRAMS	5,000
WHITE STONE VOLUNTEER FIRE DEPT. WHITE STONE VA 22578	P. O. BOX 272	NONE		HEALTH	3,000
KILMARNOCK VOLUNTEER FIRE DEPT. KILMARNOCK VA 22482	P. O. BOX 1295	NONE		HEALTH	3,000
BON SECOURS HEALTH - RGH CARE FDN KILMARNOCK VA 22482	P. O. BOX 588	NONE		HEALTH	25,000
NORTHERN NECK MONTESSORI SCHOOL KILMARNOCK VA 22482	P. O. BOX 1003	NONE		CHILDREN'S EDUCATION	16,565
LANC/NORTH'D HABITAT FOR HUMANITY KILMARNOCK VA 22482	P. O. BOX 908	NONE		CHILDREN'S PROGRAMS	5,000

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**Federal Statements**

FYE: 12/31/2016

**Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)**

<u>Name</u>	<u>Address</u>				<u>Amount</u>
<u>Address</u>	<u>Relationship</u>	<u>Status</u>	<u>Purpose</u>		
TOTAL					<u>430,565</u>

Form **990-T**

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0687

**2016**

Department of the Treasury  
Internal Revenue Service

For calendar year 2016 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_  
**u** Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).

Open to Public Inspection for  
501(c)(3) Organizations Only

**u** Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section</p> <table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> 501( <b>C</b> ) ( <b>3</b> )</td> <td><input type="checkbox"/> 220(e)</td> </tr> <tr> <td><input type="checkbox"/> 408(e)</td> <td><input type="checkbox"/> 530(a)</td> </tr> <tr> <td><input type="checkbox"/> 408A</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 529(a)</td> <td></td> </tr> </table> <p><b>C</b> Book value of all assets at end of year <b>7,329,957</b></p>	<input checked="" type="checkbox"/> 501( <b>C</b> ) ( <b>3</b> )	<input type="checkbox"/> 220(e)	<input type="checkbox"/> 408(e)	<input type="checkbox"/> 530(a)	<input type="checkbox"/> 408A		<input type="checkbox"/> 529(a)		<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) <b>THE NETTIE L AND CHARLES L WILEY FOUNDATION</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. <b>PO BOX 126</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code <b>IRVINGTON VA 22480</b></p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.) <b>52-1231771</b></p> <p><b>E</b> Unrelated business activity codes (See instructions.) <b>211110   211110</b></p>
<input checked="" type="checkbox"/> 501( <b>C</b> ) ( <b>3</b> )	<input type="checkbox"/> 220(e)									
<input type="checkbox"/> 408(e)	<input type="checkbox"/> 530(a)									
<input type="checkbox"/> 408A										
<input type="checkbox"/> 529(a)										
<p><b>F</b> Group exemption number (See instructions.) <b>u</b></p> <p><b>G</b> Check organization type <b>u</b> <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>										

**H** Describe the organization's primary unrelated business activity.  
**u INVESTMENT IN PUBLICLY TRADED PARTNERSHIPS.**

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? **u**  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation.

**J** The books are in care of **u THE FOUNDATION** Telephone number **u 804-438-5656**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
<b>c</b> Balance <b>u</b>		<b>1c</b>		
2	Cost of goods sold (Schedule A, line 7)	<b>2</b>		
3	Gross profit. Subtract line 2 from line 1c	<b>3</b>		
4a	Capital gain net income (attach Schedule D)	<b>4a</b>		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
c	Capital loss deduction for trusts	<b>4c</b>		
5	Income (loss) from partnerships and S corporations (attach statement) <b>SEE STMT 1</b>	<b>5</b>	-19,009	-19,009
6	Rent income (Schedule C)	<b>6</b>		
7	Unrelated debt-financed income (Schedule E)	<b>7</b>		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	<b>8</b>		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
10	Exploited exempt activity income (Schedule I)	<b>10</b>		
11	Advertising income (Schedule J)	<b>11</b>		
12	Other income (See instructions; attach schedule)	<b>12</b>		
13	<b>Total.</b> Combine lines 3 through 12	<b>13</b>	-19,009	-19,009

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)			
14	Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
15	Salaries and wages	<b>15</b>	
16	Repairs and maintenance	<b>16</b>	
17	Bad debts	<b>17</b>	
18	Interest (attach schedule)	<b>18</b>	
19	Taxes and licenses	<b>19</b>	
20	Charitable contributions (See instructions for limitation rules)	<b>20</b>	
21	Depreciation (attach Form 4562)	<b>21</b>	
22	Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>	0
23	Depletion	<b>23</b>	
24	Contributions to deferred compensation plans	<b>24</b>	
25	Employee benefit programs	<b>25</b>	
26	Excess exempt expenses (Schedule I)	<b>26</b>	
27	Excess readership costs (Schedule J)	<b>27</b>	
28	Other deductions (attach schedule)	<b>28</b>	
29	<b>Total deductions.</b> Add lines 14 through 28	<b>29</b>	
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	<b>30</b>	-19,009
31	Net operating loss deduction (limited to the amount on line 30)	<b>31</b>	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	<b>32</b>	-19,009
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	<b>33</b>	1,000
34	<b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	<b>34</b>	-19,009

**Federal Statements****Statement 1 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps**

<u>Name of Partnership or S-Corp</u>	<u>Gross Income</u>	<u>Direct Deductions (Part. only)</u>	<u>Net Income</u>
BUCKEYE PARTNERSHIP	\$ 1,440	\$	\$ 1,440
BLACKSTONE	11		11
PLAINS ALL AMERICAN PSP	-20,460		-20,460
TOTAL	\$ <u>-19,009</u>	\$ <u>0</u>	\$ <u>-19,009</u>