

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

Department of the Treasury  
Internal Revenue Service

▶ **Do not enter social security numbers on this form as it may be made public.**  
▶ **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>CECA FOUNDATION</b>			<b>A Employer identification number</b>  46-3053232	
Number and street (or P.O. box number if mail is not delivered to street address) <b>2801 M STREET NW</b>		Room/suite	<b>B Telephone number (see instructions)</b>  202-719-8095	
City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON DC 20007</b>		<b>C If exemption application is pending, check here</b> <input type="checkbox"/>		
Foreign country name	Foreign province/state/county	Foreign postal code		
<b>G Check all that apply:</b> <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change			<b>D 1. Foreign organizations, check here</b> <input type="checkbox"/> <b>2. Foreign organizations meeting the 85% test, check here and attach computation</b> <input type="checkbox"/>	
<b>H Check type of organization:</b> <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			<b>E If private foundation status was terminated under section 507(b)(1)(A), check here</b> <input type="checkbox"/>	
<b>I Fair market value of all assets at end of year (from Part II, col. (c), line 16)</b> ▶ \$ 623,782		<b>J Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>		
			<b>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here</b> <input type="checkbox"/>	

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(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>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	252,569			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments	20	20	20	
	<b>4</b> Dividends and interest from securities	7,810	7,810	7,810	
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	53,459			
	<b>b</b> Gross sales price for all assets on line 6a 319,638				
	<b>7</b> Capital gain net income (from Part IV, line 2)		53,459		
	<b>8</b> Net short-term capital gain			54,538	
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	313,858	61,289	62,368		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	92,500	6,475	6,475	86,025
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits	12,399	868	868	11,531
	<b>16a</b> Legal fees (attach schedule)	1,327	265		1,062
	<b>b</b> Accounting fees (attach schedule)	6,723	1,345		5,378
	<b>c</b> Other professional fees (attach schedule)	50,080	8,502		41,578
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)				
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy	14,404	3,601		10,803
	<b>21</b> Travel, conferences, and meetings	2,818	1,305		1,514
	<b>22</b> Printing and publications	90	90		
	<b>23</b> Other expenses (attach schedule)	28,645	2,864	2,864	25,781
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	208,986	25,315	10,207	183,672
	<b>25</b> Contributions, gifts, grants paid	43,525			43,525
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	252,511	25,315	10,207	227,197	
<b>27 Subtract line 26 from line 12:</b>					
<b>a Excess of revenue over expenses and disbursements</b>	61,347				
<b>b Net investment income</b> (if negative, enter -0-)		35,974			
<b>c Adjusted net income</b> (if negative, enter -0-)			52,161		

<b>Part II Balance Sheets</b> 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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	8,875	4,948	4,948
	<b>2</b> Savings and temporary cash investments . . . . .	14,001	7,011	7,011
	<b>3</b> Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	<b>4</b> Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .	10,001		
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	556,180	549,513	611,823
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶			
<b>15</b> Other assets (describe ▶ )				
<b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) . . . . .	589,057	561,472	623,782	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	6,736	3,150	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ )			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	6,736	3,150	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .	582,321	558,322	
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
<b>29</b> Retained earnings, accumulated income, endowment, or other funds				
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	582,321	558,322		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	589,057	561,472		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>			
<b>1</b> 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) . . . . .		<b>1</b>	582,321
<b>2</b> Enter amount from Part I, line 27a . . . . .		<b>2</b>	61,347
<b>3</b> Other increases not included in line 2 (itemize) ▶		<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .		<b>4</b>	643,668
<b>5</b> Decreases not included in line 2 (itemize) ▶ <u>Unrealized net losses on investments</u>		<b>5</b>	85,346
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .		<b>6</b>	558,322

**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</b>	Short-term - see attached		6/30/2016	12/31/2016
<b>b</b>	Long-term - see attached		12/31/2015	12/31/2016
<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> 103,228		48,690	54,538	
<b>b</b> 216,410		217,500	-1,079	
<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>			54,538	
<b>b</b>			-1,079	
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b>	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>2</b>	53,459
<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>	54,538

**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	249,225	717,554	0.347326
2014	93,216	953,315	0.097781
2013	12,137	958,257	0.012666
2012			0.000000
2011			0.000000
<b>2</b>	<b>Total</b> of line 1, column (d) . . . . .		<b>2</b> 0.457773
<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>3</b> 0.152591
<b>4</b>	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 . . . . .		<b>4</b> 512,431
<b>5</b>	Multiply line 4 by line 3 . . . . .		<b>5</b> 78,192
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b) . . . . .		<b>6</b> 360
<b>7</b>	Add lines 5 and 6 . . . . .		<b>7</b> 78,552
<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>8</b> 227,197

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, add lines, subtitle A tax, tax based on investment income, credits/payments (6a-6d), total credits, penalty, tax due, overpayment, and amount of line 10 to be credited or refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Includes questions about influencing legislation, political purposes, Form 1120-POL filing, tax on political expenditures, reimbursement, IRS reporting, unrelated business income, Form 990-T filing, liquidation, section 508(e) requirements, assets, states reported to, Form 990-PF distribution, private operating foundation status, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 covering questions about controlled entities, distributions, public inspection requirements, website address, books in care, and foreign interest.

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.

Table with 3 columns: Question, Yes, No. Rows 1a-4b covering questions about disqualifying acts, disaster assistance, taxes on failure to distribute income, and business enterprise interest.

**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)? . . . . . **5b** N/A

Organizations relying on a current notice regarding disaster assistance check here . . . . .

**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? . . . . .  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? . . . . . **7b** N/A

**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 Attached Statement		0		
	.00	0		
	.00	0		
	.00	0		
	.00	0		

**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** . . . . .

**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 . . . . . ▶

**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 Awarded 106 individuals for outstanding caregiving.	42,025
2 Charitable Grants to caregiving organizations.	3,000
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	
2	
3 All other program-related investments. See instructions.	

**Total.** Add lines 1 through 3 . . . . . ▶ 0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	484,833
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	35,402
<b>c</b>	Fair market value of all other assets (see instructions) . . . . .	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	520,235
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	520,235
<b>4</b>	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see instructions) . . . . .	<b>4</b>	7,804
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	512,431
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	25,622

**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.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5 . . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2016. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	0
<b>6</b>	Deduction from distributable amount (see instructions) . . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	0

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 . . . . .	<b>1a</b>	227,197
<b>b</b>	Program-related investments—total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	227,197
<b>5</b>	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) . . . . .	<b>5</b>	360
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	226,837

**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)

**N/A**

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7 . . . . .				
<b>2</b> Undistributed income, if any, as of the end of 2016:				
<b>a</b> Enter amount for 2015 only . . . . .			0	
<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 . . . . .			32,746	
<b>e</b> From 2015 . . . . .				
<b>f</b> <b>Total</b> of lines 3a through e . . . . .	0			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4: ▶ \$ _____				
<b>a</b> Applied to 2015, but not more than line 2a . . . . .				
<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>e</b> Remaining amount distributed out of corpus . . . . .				
<b>5</b> Excess distributions carryover applied to 2016 . . . . . <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	0			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0		
<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 . . . . .			0	
<b>f</b> Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 . . . . .				0
<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> <b>Excess distributions carryover to 2017.</b> 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 ▶   
**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 . . . . .	25,622	7,644	47,666	24,941	105,873
<b>b</b> 85% of line 2a . . . . .	21,779	6,497	40,516	21,200	89,992
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	227,197	249,225	93,216	12,137	581,775
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	227,197	249,225	93,216	12,137	581,775
<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 . . . . .					0
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					0
<b>b</b> "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .	17,081	23,919	31,777	16,627	89,404
<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) . . . . .					0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					0
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					0
<b>(4)</b> Gross investment income . . . . .					0

**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).)

**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.

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

See Part XV, Line 2b, below. NA

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

Form submitted electronically via Ceca's website at: <http://cecafoundation.org/cecas-program/>

**c** Any submission deadlines:  
 No

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

Awards are made to persons working or serving as patient caregivers.

**Part XV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	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
<b>a</b> <i>Paid during the year</i> Grants to needy individuals - see attached	Unrelated	I	Caregiver Awards	42,025
Grants to organizations - see attached	Unrelated	PC	Contributions	1,500
<b>Total</b> . . . . . ▶ <b>3a</b>				43,525
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . . ▶ <b>3b</b>				0



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

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code...
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule...

Table with 2 columns: Yes, No. Rows include 1a(1), 1a(2), 1b(1), 1b(2), 1b(3), 1b(4), 1b(5), 1b(6), and 1c.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

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... [ ] Yes [X] No

b If "Yes," complete the following schedule.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Sign Here 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. Signature: [Redacted] Date: [Redacted] Title: Chairman, CEO and Founder

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

Paid Preparer Use Only Print/Type preparer's name, Date 9/12/2017, Check self-employed, PTIN P01402577, Firm's name EASY OFFICE dba JITA, Firm's EIN 26-2176601, Firm's address 1750 W. FRONT STREET, SUITE 200, BOISE, ID 83702, Phone no. (208) 287-4777

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2016**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

<b>Name of the organization</b> CECA FOUNDATION	<b>Employer identification number</b> 46-3053232
--	---

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ .....

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> CECA FOUNDATION	<b>Employer identification number</b> 46-3053232
--	---

**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
1	Matthew P. Lawlor ----- 2801 M Street NW ----- Washington DC 20007 Foreign State or Province: ----- Foreign Country: -----	\$ 249,968	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> CECA FOUNDATION	<b>Employer identification number</b> 46-3053232
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**Part II** **Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----



<b>Name of organization</b> CECA FOUNDATION	<b>Employer identification number</b> 46-3053232
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**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ ..... 0  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
----- ----- ----- For. Prov.                      Country		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
----- ----- ----- For. Prov.                      Country		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
----- ----- ----- For. Prov.                      Country		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
----- ----- ----- For. Prov.                      Country		----- ----- -----	

**Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory**

										Totals:		Gross Sales		Cost or Other Basis, Expenses, Depreciation and Adjustments		Net Gain or Loss	
		Amount								Capital Gains/Losses		319,638		266,179		53,459	
Long Term CG Distributions		0								Other sales		0		0		0	
Short Term CG Distributions		0															
	Description	CUSIP #	Check "X" to include in Part IV	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	Net Gain or Loss		
1	Short-term - see attached		X				6/30/2016	12/31/2016	103,228	48,690					54,538		
2	Long-term - see attached		X				12/31/2015	12/31/2016	216,410	217,500				11	-1,079		

**Part I, Line 16a (990-PF) - Legal Fees**

		1,327	265	0	1,062
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Legal fees	1,327	265	0	1,062

**Part I, Line 16b (990-PF) - Accounting Fees**

		6,723	1,345	0	5,378
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Accounting fees	6,723	1,345	0	5,378

**Part I, Line 16c (990-PF) - Other Professional Fees**

		50,080	8,502	0	41,578
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Marketing product and implementation	28,928	0	0	28,928
2	Technical support	9,590	540	0	9,050
3	Investment Fees	7,557	7,557	0	0
4	Other professional fees	4,005	405	0	3,600

**Part I, Line 23 (990-PF) - Other Expenses**

		28,645	2,864	2,864	25,781
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Software development	16,313	0	0	16,313
2	Telephone and telecommunications	1,809	0	0	1,809
3	Computer hardware	1,313	0		1,313
4	Other expenses	9,210	2,864	2,864	6,346
5		0	0		

**Part II, Line 10b (990-PF) - Investments - Corporate Stock**

		556,180	549,513	571,079	611,823	
Description		Num. Shares/ Face Value	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year
1	ARTISAN INTERNATIONAL FUND	438	20,364	12,011	21,347	11,223
2	COLUMBIA SHORT TERM BOND FUND CLA	9,284	134,321	92,205	133,497	92,467
3	CREDIT SUISSE COMMODITY-RETURN PLV	0	16,676	0	10,094	0
4	HARBOR INTERNATIONAL FUND INSTL CL	0	22,247	0	19,884	0
5	ISHARES CORE S&P 500 ETF	510	109,964	86,122	134,190	114,745
6	ISHARES MSCI EMERGING MKTS MIN VOL	0	20,262	0	15,815	0
7	ISHARES RUSSELL 2000 ETF	100	23,624	9,646	28,155	13,485
8	ISHARES RUSSELL MID-CAP ETF	35	5,420	4,216	7,208	6,260
9	PIMCO HIGH YIELD FD INSTL CL	561	13,448	5,426	11,555	4,939
10	PRINCIPAL MIDCAP BLEND FUND INSTL C	643	22,988	12,145	26,408	14,465
11	VANGUARD REIT ETF	185	21,993	13,616	23,520	15,268
12	DOUBLELINE TOTAL RETURN BD FUND	2,268	42,898	25,000	41,995	24,087
13	ROBECO BOSTON PARTNERS LONG?SHO	1,082	30,512	16,561	29,768	16,724
14	WELLS FARGO ADVANTAGE ABSOLUTE R	1,170	22,990	13,022	21,002	12,097
15	DB X-Trackers MSCI EAFE Hedged	930	29,664	27,336	27,567	26,096
16	CASH		18,809	110,998	18,809	110,998
17	MORGAN STANLEY SHARE REP STG	6,400	0	121,209		147,200
18	ACCRUED				265	1,769



**Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers**

											92,500	5,323	0
Name		Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account	
1	Matthew P. Lawlor		2801 M Street NW	Washington	DC	20007		Chairman, CEO and Founder	40.00	0			
2	Rosemary K. Lawlor		2801 M Street NW	Washington	DC	20007		Director and Founder		0			
3	John Lawlor		2801 M Street NW	Washington	DC	20007		Director		0			
4	Paul Lawlor		2801 M Street NW	Washington	DC	20007		Director		0			
5	Nathan Hamme		2801 M Street NW	Washington	DC	20007		Managing Director	40.00	92,500	5,323	0	

**Ceca Foundation**

46-3053232

For Tax Year 2016

Attachments to IRS Form 990-PF

**Schedule: Part XV - Grants to Needy Individuals**

Date	Name	Relationship	Status	City, State	Purpose	Amount
<b>Capital Caring</b>						
03/09/2016	Evelyn Kpadeh	NR			Caregiver Award	250
04/12/2016	Earlene Branson	NR			Caregiver Award	250
05/12/2016	Julia Bush	NR			Caregiver Award	250
06/07/2016	Cassandra Bell	NR			Caregiver Award	250
07/15/2016	Maurice Martin	NR			Caregiver Award	250
08/15/2016	Blair Bartless	NR			Caregiver Award	250
09/14/2016	Emily Shank	NR			Caregiver Award	250
10/12/2016	Martha Perea	NR			Caregiver Award	250
10/12/2016	Shae Price	NR			Caregiver Award	500
11/08/2016	Joyce Montgomery	NR			Caregiver Award	250
12/13/2016	Sandy Shifless	NR			Caregiver Award	250
<b>Doctors Community Hospital</b>						
01/21/2016	Herbert Gaines	NR			Caregiver Award	250
02/18/2016	Clementine Atabong	NR			Caregiver Award	250
03/08/2016	Paul Blankenship	NR			Caregiver Award	250
03/23/2016	Pauline Coley-Robb	NR			Caregiver Award	2,500
04/12/2016	Larry Krespan II	NR			Caregiver Award	250
05/12/2016	Ashley Lewis	NR			Caregiver Award	250
06/07/2016	Davey Newsome	NR			Caregiver Award	250
07/15/2016	Jessica Hyde	NR			Caregiver Award	250
07/15/2016	Victoria Davidson	NR			Caregiver Award	500
08/15/2016	Van Trinh	NR			Caregiver Award	250
09/19/2016	Maher Kharma	NR			Caregiver Award	250
10/12/2016	Mary Grace Arquelita	NR			Caregiver Award	250
11/15/2016	Michelle Manley	NR			Caregiver Award	250
12/29/2016	Chiquitta Clarke	NR			Caregiver Award	250
<b>Forest Hills</b>						
01/21/2016	Christa Pantages	NR			Caregiver Award	250
02/12/2016	Ronald Thompson	NR			Caregiver Award	2,500
02/18/2016	Aster Tesfamkale	NR			Caregiver Award	250
03/08/2016	Lye Jalloh	NR			Caregiver Award	250
04/12/2016	Bena Dallas	NR			Caregiver Award	250
05/12/2016	Kayon Brice	NR			Caregiver Award	250
06/07/2016	Eida Mondelus	NR			Caregiver Award	250
07/13/2016	Claudia Campusano	NR			Caregiver Award	250
08/15/2016	Kayon Brice	NR			Caregiver Award	500
08/15/2016	Francis Lawson	NR			Caregiver Award	250
10/12/2016	Lydia Bruno	NR			Caregiver Award	250
11/08/2016	Ngozi Mbaleme	NR			Caregiver Award	250
12/13/2016	Kate Shey	NR			Caregiver Award	250
<b>Knollwood</b>						
01/21/2016	Michael Woodruff	NR			Caregiver Award	250
02/18/2016	Altaye Sensible	NR			Caregiver Award	250
03/08/2016	Mia Stewart	NR			Caregiver Award	250
04/12/2016	Janie Druskin	NR			Caregiver Award	250
05/12/2016	Bonnie Pack	NR			Caregiver Award	250
06/07/2016	Jessica Herpst	NR			Caregiver Award	250
07/13/2016	Lorraine Wilson	NR			Caregiver Award	500
07/13/2016	Kelly Davis	NR			Caregiver Award	250
08/15/2016	Nancy Smith	NR			Caregiver Award	250
09/14/2016	Andrew Baxter Hall	NR			Caregiver Award	250
10/12/2016	Debbie Schrag	NR			Caregiver Award	250
11/08/2016	Noemi Montano Rivas	NR			Caregiver Award	250
12/13/2016	Marie Pierre	NR			Caregiver Award	250
<b>Manassas</b>						
01/21/2016	Sara Billow	NR			Caregiver Award	250
02/18/2016	Daud Nawuridam	NR			Caregiver Award	2,500
04/28/2016	Carla Robinson	NR			Caregiver Award	250

07/27/2016	Charlea Robinson	NR	Caregiver Award	500
07/27/2016	Sharlet Daly	NR	Caregiver Award	250
10/17/2016	Ana Nunez	NR	Caregiver Award	250
<b>Mary Marshall</b>				
01/21/2016	Deanda Murdock	NR	Caregiver Award	250
01/22/2016	Arthur McCoy	NR	Caregiver Award	2,500
04/22/2016	Cameisha Jackson	NR	Caregiver Award	250
07/28/2016	Divina Alston	NR	Caregiver Award	500
07/28/2016	Emmanuel Bockaire	NR	Caregiver Award	250
11/01/2016	Donna Barksdale	NR	Caregiver Award	250
<b>Providence</b>				
01/21/2016	Melissa Forbes	NR	Caregiver Award	250
02/19/2016	Gladys Desselle	NR	Caregiver Award	250
03/08/2016	Paula McMillian	NR	Caregiver Award	250
04/12/2016	Felecia Snell	NR	Caregiver Award	250
05/12/2016	Rakia Smith	NR	Caregiver Award	250
06/07/2016	Elissa Curry	NR	Caregiver Award	250
07/13/2016	Sheryl Downey	NR	Caregiver Award	250
07/13/2016	Kalisha Dixon	NR	Caregiver Award	500
08/15/2016	Patrick Cheney	NR	Caregiver Award	250
09/14/2016	Latisha Crosland	NR	Caregiver Award	250
10/12/2016	Maryam Muller	NR	Caregiver Award	250
11/15/2016	Leigh Grill	NR	Caregiver Award	250
12/13/2016	Nakita Porter	NR	Caregiver Award	250
<b>Psychiatric Institute</b>				
10/19/2016	Shital George	NR	Caregiver Award	250
11/08/2016	Alexa Cronin	NR	Caregiver Award	250
12/16/2016	Dolly Mbah	NR	Caregiver Award	250
<b>Stoddard Baptist</b>				
01/21/2016	Josephine Badanaro	NR	Caregiver Award	250
01/21/2016	Linda Lee	NR	Caregiver Award	2,500
02/18/2016	Opeyemi Osunrayi	NR	Caregiver Award	250
03/08/2016	Paul Enwerem	NR	Caregiver Award	250
04/12/2016	Katz, Randy	NR	Caregiver Award	250
05/12/2016	Sarah Osunrayi	NR	Caregiver Award	250
06/07/2016	Chauncy Primm	NR	Caregiver Award	250
06/07/2016	Priyanka Tyagi	NR	Caregiver Award	500
07/13/2016	Alex Gbe	NR	Caregiver Award	250
08/15/2016	Lutricia Quarles	NR	Caregiver Award	250
09/15/2016	Solomon Ihejirika	NR	Caregiver Award	250
11/08/2016	Elsida Thullen	NR	Caregiver Award	250
11/15/2016	Fatmata Jallah	NR	Caregiver Award	250
12/13/2016	Mae Hunt-Powell	NR	Caregiver Award	250
<b>Washington Center (SBGC)</b>				
01/21/2016	Sheila Nathan	NR	Caregiver Award	150
02/18/2016	Priscilla Kamara	NR	Caregiver Award	150
02/18/2016	Wendy Cunningham	NR	Caregiver Award	2,500
03/08/2016	Emma McGhee-Hamilton	NR	Caregiver Award	200
04/12/2016	Serkalem Tezera	NR	Caregiver Award	125
05/12/2016	Larry Faison	NR	Caregiver Award	150
06/07/2016	Mary Goins	NR	Caregiver Award	250
06/07/2016	Judy Figueroa	NR	Caregiver Award	500
07/13/2016	Tony Obamogie	NR	Caregiver Award	250
08/15/2016	Osariemen Onwuka	NR	Caregiver Award	250
09/19/2016	Gail Hart	NR	Caregiver Award	250
10/12/2016	Michael Jackson	NR	Caregiver Award	250
11/08/2016	Oluremi Adebayo	NR	Caregiver Award	250
12/13/2016	Innocent Nwachukwu	NR	Caregiver Award	250

<b>Total Caregiver Awards</b>				<b>42,025</b>
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**Schedule: Part XV - Grants to Organizations**

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03/29/2016	Providence Health Foundation	Public	Contribution	1,500
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<b>Total Organization Grants</b>				<b>1,500</b>
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