

Return of Private Foundation

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

2016

Open to Public Inspection

Form **990-PF**

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.

For calendar year 2016 or tax year beginning , and ending

Name of foundation WRIGHT FAMILY FOUNDATION		A Employer identification number 52-2278319
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 1606	Room/suite	B Telephone number 410-472-3398
City or town, state or province, country, and ZIP or foreign postal code COCKEYSVILLE, MD 21030		C If exemption application is pending, check here ... <input type="checkbox"/>
G Check all that apply: <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 checked="" type="checkbox"/> Address change <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"/>
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) ▶ \$ 15,236,660.	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).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	4,850.		N/A	
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	44.	44.		STATEMENT 1
	4 Dividends and interest from securities	353,601.	353,601.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	166,845.			
	b Gross sales price for all assets on line 6a	5,760,608.			
	7 Capital gain net income (from Part IV, line 2)		166,845.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	-54,509.	-36,852.		STATEMENT 3	
12 Total. Add lines 1 through 11	470,831.	483,638.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	136,800.	136,800.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	8,980.	8,980.		0.
	c Other professional fees	36,480.	36,480.		0.
	17 Interest				
	18 Taxes	21,735.	11,390.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	3,213.	3,213.		0.
	22 Printing and publications				
	23 Other expenses	6,431.	6,431.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	213,639.	203,294.		0.
	25 Contributions, gifts, grants paid	728,734.			728,734.
26 Total expenses and disbursements. Add lines 24 and 25	942,373.	203,294.		728,734.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements ..	-471,542.				
b Net investment income (if negative, enter -0-)		280,344.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	261,979.	446,839.	446,839.
	2 Savings and temporary cash investments			
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock	STMT 8 1,095,170.	1,142,889.	631,071.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other	STMT 9 13,356,755.	12,648,982.	14,150,720.	
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation				
15 Other assets (describe)	STATEMENT 10 4,378.	8,030.	8,030.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	14,718,282.	14,246,740.	15,236,660.	
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			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	14,718,282.	14,246,740.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
30 Total net assets or fund balances	14,718,282.	14,246,740.		
31 Total liabilities and net assets/fund balances	14,718,282.	14,246,740.		

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	14,718,282.
2 Enter amount from Part I, line 27a	2	-471,542.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	14,246,740.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	14,246,740.

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.)
1a			
b	SEE ATTACHED STATEMENT		
c			
d			
e			

(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)
a			
b			
c			
d			
e			
	5,760,608.	5,593,763.	166,845.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) 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	
a			
b			
c			
d			
e			166,845.

2	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	2	166,845.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

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	783,298.	15,266,071.	.051310
2014	801,102.	15,760,247.	.050831
2013	844,748.	15,767,814.	.053574
2012	908,294.	15,995,625.	.056784
2011	933,443.	16,531,727.	.056464

2	Total of line 1, column (d)	2	.268963
3	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	3	.053793
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	14,726,519.
5	Multiply line 4 by line 3	5	792,184.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	2,803.
7	Add lines 5 and 6	7	794,987.
8	Enter qualifying distributions from Part XII, line 4	8	728,734.

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.

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

1a 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 Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	5,607.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	5,607.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	5,607.
6 Credits/Payments:			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	7,240.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	7,000.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	14,240.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8,633.	
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax <input type="checkbox"/> 8,633. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ <u>0.</u> (2) On foundation managers. <input type="checkbox"/> \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> <u>MD</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		X

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)		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	
Website address ► WWW.WRIGHTFAMILYFDN.ORG		
14 The books are in care of ► VERNON H.C. WRIGHT Telephone no. ► 410-472-3398		
Located at ► PO BOX 1606, COCKEYSVILLE, MD ZIP+4 ► 21030		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A		
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?	Yes	No
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

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)? N/A	1b	
Organizations relying on a current notice regarding disaster assistance check here <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?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
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 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____, _____, _____, _____		
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.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	X

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)? Yes No **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 **N/A**
 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? Yes No
 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? Yes No **N/A**

5b		
6b		X
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.

(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
LUCY BABB WRIGHT P.O. BOX 1606 COCKEYSVILLE, MD 21030	TRUSTEE 4.00	0.	0.	0.
VERNON H.C. WRIGHT P.O. BOX 1606 COCKEYSVILLE, MD 21030	TRUSTEE 4.00	0.	0.	0.
KATHERINE B WRIGHT 12400 HWY 71 WEST, STE 350-119 AUSTIN, TX 78738	EXECUTIVE DIREC 25.00	61,800.	0.	0.
MARI BETH MOULTON P.O. BOX 1606 COCKEYSVILLE, MD 21030	EXECUTIVE DIREC 25.00	75,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and 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. 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 0

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

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	
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.)

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	489,974.
b	Average of monthly cash balances	1b	209,257.
c	Fair market value of all other assets	1c	14,251,550.
d	Total (add lines 1a, b, and c)	1d	14,950,781.
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	14,950,781.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	224,262.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,726,519.
6	Minimum investment return. Enter 5% of line 5	6	736,326.

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	736,326.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	5,607.
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	5,607.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	730,719.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	730,719.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	730,719.

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	728,734.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	728,734.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	728,734.

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
1 Distributable amount for 2016 from Part XI, line 7				730,719.
2 Undistributed income, if any, as of the end of 2016:				
a Enter amount for 2015 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011	114,755.			
b From 2012	115,509.			
c From 2013	61,311.			
d From 2014	17,200.			
e From 2015	27,213.			
f Total of lines 3a through e	335,988.			
4 Qualifying distributions for 2016 from Part XII, line 4: ▶ \$	728,734.			
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2016 distributable amount				728,734.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).)	1,985.			1,985.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	334,003.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	112,770.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	221,233.			
10 Analysis of line 9:				
a Excess from 2012	115,509.			
b Excess from 2013	61,311.			
c Excess from 2014	17,200.			
d Excess from 2015	27,213.			
e Excess from 2016				

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

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

SEE STATEMENT 11

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.

NONE

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:

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

c Any submission deadlines:

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

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)				
a Paid during the year				
ASSOCIATION FOR BALTIMORE AREA GRANTAMKERS 2 E. READ STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	10,203.
AUSTIN COMMUNITY FOUNDATION 4315 GUADALUPE STREET, SUITE 300 AUSTIN, TX 78751	NONE	PUBLIC	UNRESTRICTED	30,000.
AUSTIN THEATRE ALLIANCE P.O. BOX 1566 AUSTIN, TX 78767	NONE	PUBLIC	UNRESTRICTED	20,000.
BALTIMORE COMMUNITY FOUNDATION 2 E. READ STREET BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	10,000.
BALTIMORE MONTESSORI PUBLIC CHARTER SCHOOL 1600 GUILFORD AVENUE BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	25,000.
Total	SEE CONTINUATION SHEET(S)			728,734.
b Approved for future payment				
MCDONOGH SCHOOL P.O. BOX 380 OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	20,000.
NEW LEADERS 1500 UNION AVENUE, SUITE 1400 BALTIMORE, MD 21211	NONE	PUBLIC	UNRESTRICTED	25,000.
TEACH FOR AMERICA 2601 N. HOWARD STREET, STE.300 BALTIMORE, MD 21228	NONE	PUBLIC	UNRESTRICTED	25,000.
Total	SEE CONTINUATION SHEET(S)			175,000.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue (a-f), 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments (14, 44), 4 Dividends and interest from securities (14, 353,601), 5 Net rental income or (loss) from real estate (a-b), 6 Net rental income or (loss) from personal property, 7 Other investment income (15, 244), 8 Gain or (loss) from sales of assets other than inventory (18, 166,845), 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue (a-e, SEE STATEMENT 12, -17,657, -37,096), 12 Subtotal (483,638, 0), 13 Total (465,981).

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

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

Table with 3 columns: Question, Yes, No. Rows include questions about transfers to noncharitable exempt organizations and other transactions.

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 (other than section 501(c)(3)) or in section 527? Yes No

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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer Use Only Print/Type preparer's name, Preparer's signature, Date, Check self-employed, Firm's name, Firm's address, Firm's EIN, Phone no., PTIN.

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

WRIGHT FAMILY FOUNDATION

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.)
1a ENBRIDGE ENERGY PARTNERS, L.P.		01/01/01	12/31/16
b A&M CAPITAL PARTNERS, LP		01/01/16	12/31/16
c A&M CAPITAL PARTNERS, LP		01/01/01	12/31/16
d NB STRATEGIC CO-INVESTMENT PARTNERS II LP		01/01/01	12/31/16
e SCHWAB ST		01/01/16	12/31/16
f SCHWAB LT		01/01/01	12/31/16
g CAPITAL GAINS DIVIDENDS			
h			
i			
j			
k			
l			
m			
n			
o			

(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)
a		13.	-13.
b 27,325.			27,325.
c 91,274.			91,274.
d 118,979.			118,979.
e 150,410.		149,249.	1,161.
f 5,309,500.		5,444,501.	-135,001.
g 63,120.			63,120.
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-13.
b			27,325.
c			91,274.
d			118,979.
e			1,161.
f			-135,001.
g			63,120.
h			
i			
j			
k			
l			
m			
n			
o			

2 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 }	2	166,845.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
BALTIMORE SYMPHONY ORCHESTRA 1212 CATHEDRAL STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	10,000.
BANNER NEIGHBORHOODS 2911 PULASKI HIGHWAY BALTIMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	10,000.
BROWN MEMORIAL TUTORING PROGRAM 1316 PARK AVENUE BALTIMORE, MD 21217	NONE	PUBLIC	UNRESTRICTED	10,000.
BUILDING EDUCATED LEADERS FOR LIFE 1500 UNION AVENUE, STE. 117 BALTIMORE, MD 21211	NONE	PUBLIC	UNRESTRICTED	15,000.
CAROLINE CENTER 900 SOMERSET STREET BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	5,000.
COLUMBIA CENTER FOR THEATRICAL ARTS 6655 DOBBIN ROAD, UNIT #4 COLUMBIA, MD 20145	NONE	PUBLIC	UNRESTRICTED	5,000.
COMMUNITIES IN SCHOOLS OF CENTRAL TEXAS 3001 SOUTH IH-35, STE 200 AUSTIN, TX 78704	NONE	PUBLIC	UNRESTRICTED	15,000.
CREATIVE ACTION 2921 E 17TH STREET, BLDG. B, BOX 7 AUSTIN, TX 78702	NONE	PUBLIC	UNRESTRICTED	5,000.
CYLBURN ARBORETUM ASSOCIATION 4915 GREENSPRING AVENUE BALTIMORE, MD 21209	NONE	PUBLIC	UNRESTRICTED	5,000.
EPISCOPAL COMMUNITY SERVICES OF MARYLAND 901 N. MILTON AVENUE, STE. 340 BALTIMORE, MD 21205	NONE	PUBLIC	UNRESTRICTED	10,000.
Total from continuation sheets				633,531.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
FUND FOR EDUCATIONAL EXCELLENCE 800 N. CHARLES STREET, SUITE 400 BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	43,600.
GIRL SCOUTS OF CENTRAL TEXAS 12012 PARK THIRTY-FIVE CIRCLE AUSTIN, TX 78753	NONE	PUBLIC	UNRESTRICTED	5,000.
GRANTMAKERS FOR EDUCATION 851 SW 6TH AVE # 350 PORTLAND, OR 97204	NONE	PUBLIC	UNRESTRICTED	1,000.
HARRY R. HUGHES CENTER FOR AGRO-ECOLOGY, INC. P.O. BOX 169, 124 WYE NARROWS DRIVE QUEENSTOWN, MD 21658	NONE	PUBLIC	UNRESTRICTED	5,000.
HELPING HAND HOME FOR CHILDREN 3804 AVENUE B AUSTIN, TX 78751	NONE	PUBLIC	UNRESTRICTED	5,000.
JOHNS HOPKINS UNIVERSITY OFFICE OF CONTROLLER, 3910 KESWICK ROAD BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	-55.
KIPP AUSTIN 8509 FM 969, BLDG. 513 AUSTIN, TX 78724	NONE	PUBLIC	UNRESTRICTED	10,000.
LIVE WIRE STRING QUARTET (BALTIMORE CHAMBER ORCHESTRA) 6602 SHELICK PLACE BALTIMORE, MD 21209	NONE	PUBLIC	UNRESTRICTED	10,500.
MARYLAND FAMILY NETWORK 1001 EASTERN AVENUE, 2ND FLOOR BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	20,000.
MCDONOGH SCHOOL P.O. BOX 380 OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	10,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
MOVE THIS WORLD 424 BROADWAY - SUITE 405 NEW YORK, NY 10013	NONE	PUBLIC	UNRESTRICTED	20,000.
NEW LEADERS 1500 UNION AVENUE, SUITE 1400 BALTIMORE, MD 21211	NONE	PUBLIC	UNRESTRICTED	25,000.
NOTRE DAME OF MARYLAND UNIVERSITY 4701 N. CHARLES STREET BALTIMORE, MD 21210	NONE	PUBLIC	UNRESTRICTED	5,000.
PARTNERS IN EXCELLENCE 320 CATHEDRAL STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	30,000.
PATTERSON PARK PUBLIC CHARTER SCHOOL 27 N. LAKEWOOD AVENUE BALTIMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	11,500.
PEOPLE'S COMMUNITY CLINIC 2909 NORTH IH-35 AUSTIN, TX 78722	NONE	PUBLIC	UNRESTRICTED	2,500.
PLANNED PARENTHOOD OF GREATER TEXAS 201 E. BEN WHITE BLVD, STE. B AUSTIN, TX 78704	NONE	PUBLIC	UNRESTRICTED	20,000.
PLAYWORKS 2601 N. HOWARD STREET, STE. 310 BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	10,000.
READING PARTNERS 916 N. CHARLES STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	30,000.
READY AT FIVE 5520 RESEARCH PARK DRIVE, STE. 150 BALTIMORE, MD 21228	NONE	PUBLIC	UNRESTRICTED	25,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
SETON KEOUGH HIGH SCHOOL 1201 CATON AVENUE BALTIMORE, MD 21227	NONE	PUBLIC	UNRESTRICTED	500.
SOUTHWEST BALTIMORE CHARTER SCHOOL 1300 HERKIMER STREET BALTIMORE, MD 21223	NONE	PUBLIC	UNRESTRICTED	35,000.
ST. VINCENT DE PAUL 2305 N. CHARLES STREET, SUITE 300 BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	45,000.
TEACH FOR AMERICA 2601 N. HOWARD STREET, STE.300 BALTIMORE, MD 21228	NONE	PUBLIC	UNRESTRICTED	25,000.
TEXAS BOOK FESTIVAL 610 BRAZOS STREET, SUITE 200 AUSTIN, TX 78701	NONE	PUBLIC	UNRESTRICTED	15,000.
THE COLUMBUS ACADEMY 4300 CHERRY BOTTOM ROAD GAHANNA, OH 43230	NONE	PUBLIC	UNRESTRICTED	10,000.
THE FUND FOR GARRISON FOREST 300 GARRISON FOREST ROAD OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	1,000.
THE NATURAL HISTORY SOCIETY OF MARYLAND, INC. P.O. BOX 18750 BALTIMORE, MD 21206	NONE	PUBLIC	UNRESTRICTED	10,000.
UNIVERSITY OF BALTIMORE FOUNDATION 1130 N. CHARLES STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	15,000.
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION 4603 CALVERT ROAD COLLEGE PARK, MD 20742	NONE	PUBLIC	UNRESTRICTED	5,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
UNIVERSITY OF MARYLAND FOUNDATION 620 WEST LEXINGTON STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	20,000.
UNIVERSITY OF TEXAS FOUNDATION (ACE) 1616 GUADALUPE STREET AUSTIN, TX 78701	NONE	PUBLIC	UNRESTRICTED	7,500.
URBAN ROOTS 4900 GONZALES STREET AUSTIN, TX 78702	NONE	PUBLIC	UNRESTRICTED	5,000.
URBAN TEACHER CENTER 1500 UNION AVENUE, SUITE 2200 BALTIMORE, MD 21211	NONE	PUBLIC	UNRESTRICTED	15,000.
VARIOUS PASSTHROUGH ENTITIES ADDRESS OF RECIPIENTS - VARIOUS BALTIMORE, MD 21208	NONE	PUBLIC	UNRESTRICTED	486.
VILLAGE LEARNING PLACE 2521 SAINT PAUL STREET BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	15,000.
YOUNG AUDIENCES 2600 NORTH HOWARD STREET, SUITE 1300 BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	30,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

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
THE COLUMBUS ACADEMY 4300 CHERRY BOTTOM ROAD GAHANNA, OH 43230	NONE	PUBLIC	UNRESTRICTED	40,000.
UNIVERSITY OF BALTIMORE FOUNDATION 1130 N. CHARLES STREET BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	45,000.
YOUNG AUDIENCES 2600 NORTH HOWARD STREET, SUITE 1300 BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	20,000.
Total from continuation sheets				105,000.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB CHECKING	44.	44.	
TOTAL TO PART I, LINE 3	44.	44.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
AMCP AIV	979.	0.	979.	979.	
AMCP SECURITY AIV LP	73.	0.	73.	73.	
BARCLAYS	0.	0.	0.	0.	
ENERGY TRANSFER EQT MIDSTREAM PARTNERS	381.	0.	381.	381.	
NB CO-INVESTMENT II	100.	0.	100.	100.	
SCHWAB	2,839.	0.	2,839.	2,839.	
SCHWAB - OTHER	412,310.	63,120.	349,190.	349,190.	
PERIODIC INTEREST	22.	0.	22.	22.	
STIFEL	17.	0.	17.	17.	
TO PART I, LINE 4	416,721.	63,120.	353,601.	353,601.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ENERGY TRANSFER PARTNERS		2.	2.
NB CO-INVESTMENT PARTNERSHIP ROYALTIES	242.	242.	
NB CO-INVESTMENT II K-1 INCOME (LOSS)	-19,590.	-11,136.	
NB CO-INVESTMENT III K-1 INCOME (LOSS)	-11,000.	-11,000.	
NB CO-INVESTMENT CAYMAN K-1 INCOME (LOSS)	-70.	-70.	

A&M CAPITAL PARTNERS K-1 INCOME (LOSS)	-7,958.	-7,958.
AMCP SECURITY AIV K-1 INCOME (LOSS)	5,847.	-30.
AMCP PAYMENTS AIV K-1 INCOME (LOSS)	77.	0.
AMCP PIPELINE AIV K-1 INCOME (LOSS)	-2,625.	-48.
AMCP AIV K-1 INCOME (LOSS)	-12,601.	-21.
EQT MIDSTREAM PARTNERSHIP K-1 INCOME (LOSS)	-1,542.	-1,542.
ENERGY TRANSFER K-1 INCOME (LOSS)	-2,790.	-2,790.
ENBRIDGE ENERGY K-1 INCOME (LOSS)	-2,501.	-2,501.
TOTAL TO FORM 990-PF, PART I, LINE 11	-54,509.	-36,852.

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	8,980.	8,980.		0.
TO FORM 990-PF, PG 1, LN 16B	8,980.	8,980.		0.

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL PROCESSING FEES	2,435.	2,435.		0.
INVESTMENT FEES	34,045.	34,045.		0.
TO FORM 990-PF, PG 1, LN 16C	36,480.	36,480.		0.

FORM 990-PF TAXES STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	10,491.	10,491.		0.
FOREIGN TAXES	899.	899.		0.
FEDERAL TAXES	10,345.	0.		0.
TO FORM 990-PF, PG 1, LN 18	21,735.	11,390.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DUES & SUBSCRIPTIONS	3,087.	3,087.			0.
INSURANCE	2,250.	2,250.			0.
MEALS & ENTERTAINMENT	256.	256.			0.
BANK CHARGES	100.	100.			0.
OFFICE EXPENSE	738.	738.			0.
TO FORM 990-PF, PG 1, LN 23	6,431.	6,431.			0.

FORM 990-PF	CORPORATE STOCK		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
CHARLES SCHWAB CORPORATE STOCK		1,142,889.	631,071.	
TOTAL TO FORM 990-PF, PART II, LINE 10B		1,142,889.	631,071.	

FORM 990-PF	OTHER INVESTMENTS			STATEMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE		
CHARLES SCHWAB VARIOUS INVESTMENTS	COST	11,596,346.	12,854,913.		
STIFEL	COST	1,052,636.	1,295,807.		
TOTAL TO FORM 990-PF, PART II, LINE 13		12,648,982.	14,150,720.		

FORM 990-PF	OTHER ASSETS			STATEMENT	10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE		
OTHER ASSETS	3,790.	6,250.	6,250.		
DEFERRED DIVIDENDS	588.	1,780.	1,780.		
TO FORM 990-PF, PART II, LINE 15	4,378.	8,030.	8,030.		

FORM 990-PF

PART XV - LINE 1A
LIST OF FOUNDATION MANAGERS

STATEMENT 11

NAME OF MANAGER

LUCY BABB WRIGHT
VERNON H.C. WRIGHT

FORM 990-PF

OTHER REVENUE

STATEMENT 12

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
NB CO-INVESTMENT II K-1 INCOME (LOSS)	523000	-8,454.	14	-11,136.	
NB CO-INVESTMENT III K-1 INCOME (LOSS)	523000		14	-11,000.	
NB CO-INVESTMENT CAYMAN K-1 INCOME (LOSS)			14	-70.	
A&M CAPITAL PARTNERS K-1 INCOME (LOSS)			14	-7,958.	
AMCP SECURITY AIV K-1 INCOME (LOSS)	523000	5,877.	14	-30.	
AMCP PAYMENTS AIV K-1 INCOME (LOSS)	523000	77.	14	0.	
AMCP PIPELINE AIV K-1 INCOME (LOSS)	523000	-2,577.	14	-48.	
AMCP AIV K-1 INCOME (LOSS)	523000	-12,580.	14	-21.	
EQT MIDSTREAM PARTNERSHIP K-1 INCOME (LOSS)			14	-1,542.	
ENERGY TRANSFER K-1 INCOME (LOSS)			14	-2,790.	
ENBRIDGE ENERGY K-1 INCOME (LOSS)			14	-2,501.	
TOTAL TO FORM 990-PF, PG 12, LN 11		-17,657.		-37,096.	

Form **990-T**

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

OMB No. 1545-0687

2016

For calendar year 2016 or other tax year beginning _____, and ending _____

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

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

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

Department of the Treasury
Internal Revenue Service

<p>A <input checked="" type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) WRIGHT FAMILY FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 1606</p> <p>City or town, state or province, country, and ZIP or foreign postal code COCKEYSVILLE, MD 21030</p>	<p>D Employer identification number (Employees' trust, see instructions.) 52-2278319</p> <p>E Unrelated business activity codes (See instructions.) 523000</p>
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C Book value of all assets at end of year: **14,246,740.**

F Group exemption number (See instructions.) ▶ _____

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. ▶ **PASSTHROUGH FROM INVESTMENT PARTNERSHIPS**

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

J The books are in care of ▶ **VERNON H.C. WRIGHT** Telephone number ▶ **410-472-3398**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales			
b Less returns and allowances			
c Balance	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4 a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnerships and S corporations (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)...	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13	-17,657.	-17,657.

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)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-17,657.
31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 13	31	
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-17,657.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	-17,657.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____		
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____		
c Income tax on the amount on line 34	35c	0.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36	
37 Proxy tax. See instructions	37	
38 Alternative minimum tax	38	
39 Tax on Non-Compliant Facility Income. See instructions	39	
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	0.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a	
b Other credits (see instructions)	41b	
c General business credit. Attach Form 3800	41c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	41d	
e Total credits. Add lines 41a through 41d	41e	
42 Subtract line 41e from line 40	42	0.
43 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	43	
44 Total tax. Add lines 42 and 43	44	0.
45a Payments: A 2015 overpayment credited to 2016	45a	
b 2016 estimated tax payments	45b	
c Tax deposited with Form 8868	45c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	45d	
e Backup withholding (see instructions)	45e	
f Credit for small employer health insurance premiums (Attach Form 8941)	45f	
g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	45g	
46 Total payments. Add lines 45a through 45g	46	
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	47	
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48	0.
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	0.
50 Enter the amount of line 49 you want: Credited to 2017 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	50	

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes	No
		X
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
53 Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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.

Sign Here
 Signature of officer _____ Date _____ **TRUSTEE**
 Title _____
 May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only
 Print/Type preparer's name: PAUL O. WALLACE
 Preparer's signature: PAUL O. WALLACE
 Date: 11/09/17
 Check if self-employed
 PTIN: P00002583
 Firm's name: GROSS, MENDELSON & ASSOCIATES, P.A.
 Firm's address: 36 SOUTH CHARLES ST., 18TH FLOOR, BALTIMORE, MD 21201
 Firm's EIN: 52-0982413
 Phone no.: 410-685-5512

FORM 990-T		NET OPERATING LOSS DEDUCTION		STATEMENT 13
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/14	33,693.	0.	33,693.	33,693.
12/31/15	16,031.	0.	16,031.	16,031.
NOL CARRYOVER AVAILABLE THIS YEAR			49,724.	49,724.

FORM 990-T		INCOME (LOSS) FROM PARTNERSHIPS		STATEMENT 14
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)	
NB CO-INVESTMENT II	4,063.	12,517.	-8,454.	
AMCP SECURITY AIV LP	5,877.	0.	5,877.	
AMCP PAYMENTS AIV LP	77.	0.	77.	
AMCP PIPELINE AIV LP	-2,577.	0.	-2,577.	
AMCP AIV LP	-12,580.	0.	-12,580.	
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-5,140.	12,517.	-17,657.	

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868 .**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. WRIGHT FAMILY FOUNDATION	Employer identification number (EIN) or 52-2278319
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 1606	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. COCKEYSVILLE, MD 21030	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

VERNON H.C. WRIGHT

• The books are in the care of ▶ **PO BOX 1606 - COCKEYSVILLE, MD 21030**
Telephone No. ▶ **410-472-3398** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year **2016** or
- ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	7,000.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	7,000.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868 .**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. WRIGHT FAMILY FOUNDATION	Employer identification number (EIN) or 52-2278319
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 1606	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. COCKEYSVILLE, MD 21030	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

VERNON H.C. WRIGHT

• The books are in the care of ▶ **PO BOX 1606 - COCKEYSVILLE, MD 21030**
Telephone No. ▶ **410-472-3398** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year **2016** or
- ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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