



**CITRINCOOPERMAN®**

Accountants and Advisors

## **THIS COPY OF FORM 990/990-T IS FOR PUBLIC DISCLOSURE PURPOSES**

To assist you in complying with Internal Revenue Service compliance guidelines, the attached copy of the Form 990 or 990-T has been prepared for public disclosure purposes. In addition, summarized below are the key aspects of these disclosure requirements.

### What information must you provide?

- Form 990 and schedules and attachments, unless specifically excluded by IRS.
- Form 990-T if one is filed by a 501(c)(3) organization.
- Requests for limited portions of the form (such as a request for just a list of officers and directors) must also be honored.

### What information may you exclude?

-Information about: Name and address of any contributor to the organization. Schedules, attachments, and supporting documents filed with Form 990T that do not relate to the imposition of unrelated business income tax are not required to be made available for public inspection. These include: trade secret, patents, processes, style of work or apparatus of the organization. We have removed the information which we believe meets the IRS guidelines. Please verify that you are satisfied with release of the remaining information.

### Where and when the information must be provided?

- An organization must provide copies of required documents in response to a request made in person at its principal, regional and district offices during regular business hours. An organization must provide such copies to a requester on the day the request is made, except for unusual circumstances, in which case, the organization must provide the copies no later than the next business day following the day that the unusual circumstances cease to exist, or the 5th business day after the date of the request, whichever occurs first.
- An organization must honor a written request for a copy of documents (or the requested part) if the request (1) is addressed to, and delivered by mail, facsimile, or a private delivery service; and (2) sets forth the address to which the copy of the documents should be sent.

**CITRIN COOPERMAN & COMPANY, LLP**

**2 BETHESDA METRO CENTER, 11TH FLOOR BETHESDA, MD 20814 | TEL 301.654.9000 | FAX 301.656.3056 [CITRINCOOPERMAN.COM](http://CITRINCOOPERMAN.COM)**

**AN INDEPENDENT FIRM ASSOCIATED WITH MOORE STEPHENS**



#### Reasonable fees for providing copies

-An organization may charge a reasonable fee for providing copies. Before the organization provides the documents, it may require that the individual requesting copies of the documents pay the fee. If the organization has provided an individual making a request with notice of the fee, and the individual does not pay the fee within 30 days, or if the individual pays the fee by check and the check does not clear upon deposit, the organization may disregard the request. This applies to an annual return only during the 3-year period beginning on the last day prescribed for filing such return (determined with regard to any extension of time for filing).

-Where an organization does not require prepayment and a requester does not enclose payment with a request, an organization must receive consent from a requester before providing copies for which the fee charged for copying and postage exceeds \$20.

#### Alternative method of compliance

- Disclosure requirements may be met by posting this information on the World Wide Web as part of a database or on your organization's web page. Organizations electing this method need only inform persons requesting this information as to its location (no public access or providing copies is necessary).

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

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

For calendar year 2019 or tax year beginning , and ending

Name of foundation <b>WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE INSTITUTE</b>		<b>A Employer identification number</b> <b>54-1075268</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>6819 ELM STREET</b>	Room/suite <b>10</b>	<b>B Telephone number</b> <b>(703)-402-3745</b>
City or town, state or province, country, and ZIP or foreign postal code <b>MCLEAN, VA 22101</b>		<b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>
<b>G</b> 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 type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>
<b>H</b> 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		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>21,006,893.</b>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <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)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received .....			<b>N/A</b>	
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments .....	3,884.	3,884.		<b>STATEMENT 1</b>
	<b>4</b> Dividends and interest from securities .....	479,877.	479,877.		<b>STATEMENT 2</b>
	<b>5a</b> Gross rents .....	12,000.	12,000.		<b>STATEMENT 3</b>
	<b>b</b> Net rental income or (loss) <b>-12,366.</b>				<b>STATEMENT 4</b>
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a <b>5,077,917.</b>	188,891.			
	<b>7</b> Capital gain net income (from Part IV, line 2) .....		188,891.		
	<b>8</b> Net short-term capital gain .....				
	<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) .....					
<b>11</b> Other income .....					
<b>12 Total.</b> Add lines 1 through 11 .....	684,652.	684,652.			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc. ....	197,308.	29,596.		167,712.
	<b>14</b> Other employee salaries and wages .....				
	<b>15</b> Pension plans, employee benefits .....	11,148.	1,672.		9,476.
	<b>16a</b> Legal fees <b>STMT 5</b> .....	14,122.	0.		14,122.
	<b>b</b> Accounting fees <b>STMT 6</b> .....	13,603.	6,802.		0.
	<b>c</b> Other professional fees <b>STMT 7</b> .....	75,623.	75,623.		0.
	<b>17</b> Interest .....				
	<b>18</b> Taxes <b>STMT 8</b> .....	69,513.	14,294.	0.	570.
	<b>19</b> Depreciation and depletion .....	5,908.	5,884.		
	<b>20</b> Occupancy .....	26,018.	4,164.	0.	21,854.
	<b>21</b> Travel, conferences, and meetings .....	33,323.	0.		33,323.
	<b>22</b> Printing and publications .....				
	<b>23</b> Other expenses <b>STMT 9</b> .....	95,347.	0.		95,347.
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....	541,913.	138,035.		342,404.
	<b>25</b> Contributions, gifts, grants paid .....	801,246.			801,246.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....	1,343,159.	138,035.		1,143,650.	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements ...	-658,507.				
<b>b Net investment income</b> (if negative, enter -0-) .....		546,617.			
<b>c Adjusted net income</b> (if negative, enter -0-) .....			<b>N/A</b>		

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INSTITUTE**

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<b>Part II Balance Sheets</b> 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
<b>Assets</b>	1 Cash - non-interest-bearing .....	3,139.	55,749.	55,749.
	2 Savings and temporary cash investments .....	1,915,518.	29,281.	29,281.
	3 Accounts receivable ▶ .....			
	Less: allowance for doubtful accounts ▶ .....	151,800.		
	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 ..... <b>STMT 11</b>	14,567,299.	14,222,716.	16,906,063.
	c Investments - corporate bonds ..... <b>STMT 12</b>	2,185,143.	2,248,155.	2,272,340.
	11 Investments - land, buildings, and equipment: basis ▶ ..... <b>254,252.</b>			
Less: accumulated depreciation ..... <b>STMT 13</b> ▶ ..... <b>95,883.</b>	164,276.	158,369.	1,743,460.	
12 Investments - mortgage loans .....				
13 Investments - other .....				
14 Land, buildings, and equipment: basis ▶ .....				
Less: accumulated depreciation ..... ▶ .....				
15 Other assets (describe ▶ .....) .....				
16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) .....	18,987,175.	16,714,270.	21,006,893.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....			
	18 Grants payable .....			
	19 Deferred revenue .....			
	20 Loans from officers, directors, trustees, and other disqualified persons .....	674,220.	522,420.	
	21 Mortgages and other notes payable .....			
	22 Other liabilities (describe ▶ <b>AMOUNT DUE UNDER E</b> ) .....	1,227,529.	468,704.	
23 <b>Total liabilities</b> (add lines 17 through 22) .....	1,901,749.	991,124.		
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ..... ▶ <input type="checkbox"/>			
	<b>and complete lines 24, 25, 29, and 30.</b>			
	24 Net assets without donor restrictions .....			
	25 Net assets with donor restrictions .....			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ..... ▶ <input checked="" type="checkbox"/>			
	<b>and complete lines 26 through 30.</b>			
	26 Capital stock, trust principal, or current funds .....	0.	0.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund .....	0.	0.	
28 Retained earnings, accumulated income, endowment, or other funds ...	17,085,426.	15,723,146.		
29 <b>Total net assets or fund balances</b> .....	17,085,426.	15,723,146.		
30 <b>Total liabilities and net assets/fund balances</b> .....	18,987,175.	16,714,270.		

**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 29 (must agree with end-of-year figure reported on prior year's return) .....	17,085,426.
2 Enter amount from Part I, line 27a .....	-658,507.
3 Other increases not included in line 2 (itemize) ▶ ..... <b>SEE STATEMENT 10</b>	558,825.
4 Add lines 1, 2, and 3 .....	16,985,744.
5 Decreases not included in line 2 (itemize) ▶ <b>NET UNREALIZED LOSSES</b>	1,262,598.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 .....	15,723,146.

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

(a) List and describe the kind(s) of property sold (for example, 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 PUBLICLY TRADED SECURITIES</b>					
b					
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 5,077,917.		4,889,026.	188,891.		
b					
c					
d					
e					
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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a			188,891.		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss) <span style="font-size: small;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 .....</span>			2	188,891.	
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 0.	

**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 doesn't 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))
2018	1,222,656.	19,374,355.	.063107
2017	1,097,414.	22,211,019.	.049409
2016	680,591.	23,125,459.	.029430
2015			
2014			
2 Total of line 1, column (d) .....			2 .141946
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years .....			3 .047315
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 .....			4 17,990,154.
5 Multiply line 4 by line 3 .....			5 851,204.
6 Enter 1% of net investment income (1% of Part I, line 27b) .....			6 5,466.
7 Add lines 5 and 6 .....			7 856,670.
8 Enter qualifying distributions from Part XII, line 4 .....			8 1,143,650.

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.

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**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 checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	5,466.
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	5,466.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-		5	5,466.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	10,000.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	10,000.	
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9		
10 <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	4,534.	
11 Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> <input checked="" type="checkbox"/> <b>4,534.</b>   <b>Refunded</b> <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 the instructions for the definition 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.		X
c Did the foundation file <b>Form 1120-POL</b> 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 checked="" type="checkbox"/> \$ <u>0.</u> (2) On foundation managers. <input checked="" 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 checked="" type="checkbox"/> \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		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? If "Yes," attach a conformed copy of the changes		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 <b>Form 990-T</b> for this year? <span style="float:right">N/A</span>		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>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? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> <u>DC</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> ? If "No," attach explanation	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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**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		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.AUTOIMMUNEINSTITUTE.ORG</u>	<input checked="" type="checkbox"/>	
14 The books are in care of ► <u>SANDRA B. WERNESS</u> Telephone no. ► <u>(703)-402-3745</u> Located at ► <u>6819 ELM STREET, NO. 10, MCLEAN, VA</u> ZIP+4 ► <u>22101</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		<input checked="" type="checkbox"/>

**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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input 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? ( <b>Exception.</b> 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 <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	<input checked="" type="checkbox"/>
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 2019?	1c	<input checked="" type="checkbox"/>
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 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <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 <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<input checked="" type="checkbox"/>
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	<input checked="" type="checkbox"/>

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

		Yes	No
<b>5a</b> 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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>		
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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.			
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

**1 List all officers, directors, trustees, and 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
SANDRA BOEK WERNESS 10020 PARK ROYAL DRIVE GREAT FALLS, VA 22066	PRESIDENT & CEO 55.00	197,308.	0.	0.
ALFREDA JONES, MD 1008 BELLEVIEW ROAD MCLEAN, VA 22102	TREASURER 3.00	0.	0.	0.
SUSAN GERBER 122 ALDEBARAN DRIVE MCLEAN, VA 22101	SECRETARY 3.00	0.	0.	0.
MARLENE BEKEY 4624 QUARTER CHARGE DRIVE ANNANDALE, VA 22003	DIRECTOR 3.00	0.	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 SEE STATEMENT 15	855,954.
2 SEE STATEMENT 16	17,865.
3 SEE STATEMENT 17	89,034.
4 SEE STATEMENT 18	88,412.

**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	18,155,746.
b	Average of monthly cash balances .....	1b	108,370.
c	Fair market value of all other assets .....	1c	
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	18,264,116.
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	18,264,116.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) .....	4	273,962.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	5	17,990,154.
6	<b>Minimum investment return.</b> Enter 5% of line 5 .....	6	899,508.

**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	899,508.
2a	Tax on investment income for 2019 from Part VI, line 5 .....	2a	5,466.
b	Income tax for 2019. (This does not include the tax from Part VI.) .....	2b	
c	Add lines 2a and 2b .....	2c	5,466.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	894,042.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	894,042.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	7	894,042.

**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	1,143,650.
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	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 .....	4	1,143,650.
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	5,466.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 .....	6	1,138,184.

**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.

**WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE  
INSTITUTE**

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

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7 .....				894,042.
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only .....			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014 .....				
<b>b</b> From 2015 .....				
<b>c</b> From 2016 .....				
<b>d</b> From 2017 .....				
<b>e</b> From 2018 .....	62,658.			
<b>f</b> Total of lines 3a through e .....	62,658.			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 1,143,650.				
<b>a</b> Applied to 2018, but not more than line 2a ...			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) .....	0.			
<b>d</b> Applied to 2019 distributable amount .....				894,042.
<b>e</b> Remaining amount distributed out of corpus	249,608.			
<b>5</b> Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).) .....	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .....	312,266.			
<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 .....		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions .....		0.		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 .....				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) .....	0.			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 .....	0.			
<b>9</b> Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a .....	312,266.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015 ...				
<b>b</b> Excess from 2016 ...				
<b>c</b> Excess from 2017 ...				
<b>d</b> Excess from 2018 ...	62,658.			
<b>e</b> Excess from 2019 ...	249,608.			

**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 2019, 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) 2019	(b) 2018	(c) 2017	(d) 2016	
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).)

NONE

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., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email 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:

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**Part XV** Supplementary Information (continued)

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
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 Paid during the year</b>				
VANGUARD CHARITABLE P.O. BOX 9509 WARWICK, RI 02889		PC	TO DESIGNATE THE FUNDS FOR A RESEARCH PROJECT	550,000.
CUNY FOUNDATION 160 CONVENT AVENUE, SH-154 NEW YORK, NY 10031		PC	FOR SCIENTIFIC INVESTIGATION OF ASPECT OF MOLECULAR MIMICRY IN LUPUS, JULY 1, 2019- JUNE 31, 2020	150,000.
WASHINGTON UNIVERSITY FOUNDATION ONE BROOKINGS DRIVE ST. LOUIS, MO 63130		PC	FOR INFORMATICS STUDY OF AUTOIMMUNE DISEASE INCIDENCE IN 100,000 PATIENT POPULATION (DR. RANDI FORAKER)	96,353.
ORDER OF ST. JOHN, USA PRIORY 1850 M STREET, NW, SUITE #1070 WASHINGTON D.C, DC 20036-5856		PC	GENERAL SUPPORT	2,350.
REFUGEES INTERNATIONAL 1800 M STREET, NW #405N WASHINGTON D.C, DC 20036		PC	GENERAL SUPPORT	900.
<b>Total SEE CONTINUATION SHEET(S)</b>				<b>801,246.</b>
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				<b>0.</b>





**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
FRIENDS OF THE NATIONAL ARBORETUM 3501 NEW YORK AVE NE WASHINGTON, DC 20002		PC	GENERAL SUPPORT	500.
ARCS FOUNDATION METRO WASHINGTON CHAPTER 10221 RIVER ROAD POTOMAC, MD 20859-0868		PC	GENERAL SUPPORT	350.
PRS, INC. 10455 WHITE GRANITE DRIVE, SUITE 400 OAKTON, VA 22124		PC	GENERAL SUPPORT	350.
TUDOR PLACE FOUNDATION, INC. 1644 31ST ST. NW WASHINGTON, DC 20007		PC	GENERAL SUPPORT	250.
MCLEAN TREES FOUNDATION P.O. BOX 113 MCLEAN, VA 22101		PC	GENERAL SUPPORT	100.
CONSUMER REPORTS 101 TRUMAN AVENUE YONKERS, NY 10703		PC	GENERAL SUPPORT	48.
WETA TV 3939 CAMPBELL AVENUE ARLINGTON, VA 22206		PC	GENERAL SUPPORT	45.
<b>Total from continuation sheets</b> .....				<b>1,643.</b>



**Part XV** | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - CUNY FOUNDATION

FOR SCIENTIFIC INVESTIGATION OF ASPECT OF MOLECULAR MIMICRY IN LUPUS,

JULY 1, 2019- JUNE 31, 2020 (DR. LINDA SPATZ)

## 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
RBC - INTEREST	101.	101.	
WELLS FARGO - INTEREST	3,783.	3,783.	
TOTAL TO PART I, LINE 3	3,884.	3,884.	

## 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
ALLIANCE BERNSTEIN - DIVIDENDS	280,605.	0.	280,605.	280,605.	
MORGAN STANLEY - DIVIDENDS	866.	0.	866.	866.	
RBC - DIVIDENDS	24,787.	0.	24,787.	24,787.	
VANGUARD - DIVIDENDS	19,892.	0.	19,892.	19,892.	
WELLS FARGO - DIVIDENDS	153,727.	0.	153,727.	153,727.	
TO PART I, LINE 4	479,877.	0.	479,877.	479,877.	

## FORM 990-PF RENTAL INCOME STATEMENT 3

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
5011 LOWELL STREET	1	12,000.
TOTAL TO FORM 990-PF, PART I, LINE 5A		12,000.

## FORM 990-PF

## RENTAL EXPENSES

## STATEMENT 4

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		5,908.	
REAL ESTATE EXPENSES		4,164.	
PROPERTY TAXES		14,294.	
- SUBTOTAL -	1		24,366.
TOTAL RENTAL EXPENSES			24,366.
NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B			-12,366.

## FORM 990-PF

## LEGAL FEES

## STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL EXPENSES	14,122.	0.		14,122.
TO FM 990-PF, PG 1, LN 16A	14,122.	0.		14,122.

## FORM 990-PF

## ACCOUNTING FEES

## STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	13,603.	6,802.		0.
TO FORM 990-PF, PG 1, LN 16B	13,603.	6,802.		0.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	75,623.	75,623.		0.
TO FORM 990-PF, PG 1, LN 16C	75,623.	75,623.		0.

## FORM 990-PF

## TAXES

## STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INCOME TAXES	54,649.	0.		0.
LICENSES AND FEES	570.	0.		570.
PROPERTY TAXES	14,294.	14,294.		0.
TO FORM 990-PF, PG 1, LN 18	69,513.	14,294.		570.

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 9

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES	78.	0.		78.
INSURANCE	4,500.	0.		4,500.
EQUIPMENT	386.	0.		386.
FURNITURE	473.	0.		473.
GIFTS	486.	0.		486.
PARKING	122.	0.		122.
POSTAGE AND MAILING SERVICES	225.	0.		225.
SOFTWARE AND INTERNET SERVICES	1,625.	0.		1,625.
OFFICE SUPPLIES	2,822.	0.		2,822.
PROFESSIONAL DEVELOPMENT	935.	0.		935.
COLLABORATION AND PROMOTION	1,377.	0.		1,377.
BOARD MEETINGS	262.	0.		262.
WEBSITE DEVELOPMENT AND MAINTENANCE	77,275.	0.		77,275.
CONTRACTED SERVICES (RESEARCH)	2,000.	0.		2,000.
DUES AND SUBSCRIPTIONS	2,781.	0.		2,781.
TO FORM 990-PF, PG 1, LN 23	95,347.	0.		95,347.

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FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 10
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DESCRIPTION	AMOUNT
PRIOR PERIOD ADJUSTMENT TO AMOUNT DUE UNDER EMPLOYMENT AGREEMENT	558,825.
TOTAL TO FORM 990-PF, PART III, LINE 3	558,825.

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FORM 990-PF	CORPORATE STOCK	STATEMENT 11
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	14,222,716.	16,906,063.
TOTAL TO FORM 990-PF, PART II, LINE 10B	14,222,716.	16,906,063.

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FORM 990-PF	CORPORATE BONDS	STATEMENT 12
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	2,248,155.	2,272,340.
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,248,155.	2,272,340.

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FORM 990-PF	DEPRECIATION OF ASSETS HELD FOR INVESTMENT	STATEMENT 13
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
5011 LOWELL STREET PROPERTY	77,742.	77,742.	0.
5011 LOWELL STREET REMODELLING	176,510.	18,141.	158,369.
TOTAL TO FM 990-PF, PART II, LN 11	254,252.	95,883.	158,369.

FORM 990-PF

OTHER LIABILITIES

STATEMENT 14

DESCRIPTION

BOY AMOUNT

EOY AMOUNT

AMOUNT DUE UNDER EMPLOYMENT AGREEMENTS

1,227,529.

468,704.

TOTAL TO FORM 990-PF, PART II, LINE 22

1,227,529.

468,704.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 15

ACTIVITY ONE

RESEARCH GRANTS: GAI SEEKS TO INCREASE KNOWLEDGE IN THE FIELD OF AUTOIMMUNE DISEASE IN SEVERAL AND OFTEN UNIQUE WAYS, BY IDENTIFYING AREAS OF RESEARCH WITH LIKELY IMPORT REGARDING COMMONALITIES, BOTH AS TO CAUSES AND TO IMMUNOLOGY OF CERTAIN, AND PERHAPS ALL, AUTOIMMUNE DISEASES. TO THIS END, GAI CONSULTS WITH PROMINENT INSTITUTIONS IN ORDER TO SOLICIT PROPOSALS TO FUND PROMISING RESEARCH PROJECTS THAT MAY BE NOVEL AND GROUNDBREAKING, AND TO FURTHER PROGRESS OF WELL ESTABLISHED RESEARCH TRAJECTORIES. USUALLY THE ANNUAL TIMELINE FOR THESE PROJECTS IS JULY 1 - JUNE 30 OF THE FOLLOWING YEAR. GAI'S FUNDING IN 2019 INCLUDED THE START OF A TWO YEAR POST-DOCTORAL RESEARCH PROJECT AT THE JOHNS HOPKINS MEDICAL CENTER RELATING TO AUTOIMMUNITY.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

855,954.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 16

ACTIVITY TWO

CNMC MULTIDISCIPLINARY CLINIC & CLINIC RESEARCH STUDY: THIS WAS THE 3RD YEAR OF A MULTIYEAR LARGE GRANT GIVEN TO THE CHILDREN'S NATIONAL MEDICAL CENTER IN WASHINGTON, D.C. FOR THE STUDY OF IMMUNOLOGY IN CELIAC DISEASE. TO THIS SCIENTIFIC INVESTIGATION WAS ADDED (WITH OUR FUNDING) THE ESTABLISHMENT OF THE MULTIDISCIPLINARY CLINIC FOR CELIAC DISEASE PATIENTS AND FAMILIES, WHICH NOW SERVES AS THE INTERNATIONAL GOLD STANDARD FOR THE TREATMENT OF CELIAC DISEASE, AND CO-EXISTING AUTOIMMUNE DISEASES AND NEUROLOGICAL DISORDERS. THE CLINIC BRINGS TOGETHER A COMPREHENSIVE TEAM TO MEET WITH THE PATIENT AND FAMILY, INCLUDING A PSYCHOLOGIST, NUTRITIONIST, NEUROLOGIST, AND EDUCATION SPECIALIST. IN ADDITION, TISSUE AND OTHER BIOSAMPLES ARE COLLECTED AND PRESERVED IN A BIOBANK FOR FUTURE STUDY. THIS GRANT TOTALS \$1.5 MILLION; HOWEVER, THIS AMOUNT IS SPREAD OVER 4-5 YEARS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

17,865.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 17

ACTIVITY THREE

EDUCATION: GAI CONTINUED ITS PARTNERSHIPS TO DEVELOP AND DISSEMINATE EDUCATION IN SEVERAL MAJOR WAYS, INCLUDING THE VERY POPULAR ANNUAL GLUTEN FREE EDUCATION DAY IN THE WASHINGTON, D.C., METROPOLITAN AREA WITH THE CHILDREN OF THE CHILDREN'S NATIONAL MEDICAL CENTER; MANY PODCASTS AND WEBINARS PUBLISHED IN VARIOUS WAYS INCLUDING ON THE GLUTEN FREE DIET AND RESOURCE CENTER APP., THE GAI WEBSITE, AND THE YOUTUBE CHANNEL, WHICH ATTRACTED TENS OF THOUSANDS OF USERS INTERNATIONALLY.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

89,034.

ACTIVITY FOUR

COMMUNITY BUILDING AND RESOURCE DEVELOPMENT: GAI CONTINUED TO BUILD COMMUNITY AND TO DEVELOP RESOURCES AND SUPPORT FOR PATIENTS AND FAMILIES AFFECTED BY AUTOIMMUNE DISEASE. EARLY SEPT. GAI'S NEW WEBSITE WENT LIVE, WITH EXCELLENT AND EXTENSIVE CONTENT RANGING FROM ARTICLES, LINKS TO THE BEST SOURCES OF INFORMATION IN AD; EMBEDDED PODCASTS AND WEBINARS. GAI DEVELOPED A SOCIAL MEDIA ENGAGEMENT PLAN FOR 2020, INCLUDING LINKED IN, FACEBOOK, INSTAGRAM AND TWITTER. GAI CONTINUED ITS NETWORKING, OUTREACH IN SUPPORT OF THIS AND ITS RESEARCH EFFORTS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 4

88,412.



2019 DEPRECIATION AND AMORTIZATION REPORT

5011 LOWELL STREET

RENT 1

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
7	(D)CHILDREN'S FURNITURE	02/21/14	SL	5.00		16	17,500.				17,500.	17,500.		0.	17,500.
8	5011 LOWELL STREET PROPERTY	08/15/13	SL	40.00		16	77,742.				77,742.	77,742.		0.	77,742.
9	(D)EQUIPMENT	08/15/13	SL	5.00		16	3,180.				3,180.	3,180.		0.	3,180.
10	(D)EQUIPMENT	01/30/14	SL	5.00		16	1,399.				1,399.	1,375.		24.	1,398.
11	(D)FURNITURE	02/21/14	SL	5.00		16	17,500.				17,500.	17,500.		0.	17,500.
12	5011 LOWELL STREET REMODELLING	11/30/16	SL	30.00		16	176,510.				176,510.	12,257.		5,884.	18,141.
	* TOTAL 990-PF RENTAL DEPR						293,831.				293,831.	129,554.		5,908.	135,461.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						293,831.			0.	293,831.	129,554.			135,461.
	ACQUISITIONS						0.			0.	0.	0.			0.
	DISPOSITIONS/RETIRED						39,579.			0.	39,579.	39,555.			39,578.
	ENDING BALANCE						254,252.			0.	254,252.	89,999.			95,883.
	ENDING ACCUM DEPR LESS DISPOSITIONS											95,883.			
	ENDING BOOK VALUE											158,369.			

# 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.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**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/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/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.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>WALTER AND JEAN BOEK GLOBAL AUTOIMMUNE INSTITUTE</b>	Taxpayer identification number (TIN) <b>54-1075268</b>
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. <b>6819 ELM STREET, NO. 10</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MCLEAN, VA 22101</b>	

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

**SANDRA B. WERNESS**

- The books are in the care of ▶ **6819 ELM STREET, NO. 10 - MCLEAN, VA 22101**  
Telephone No. ▶ **(703)-402-3745** 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 TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2019** 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

<b>3a</b> 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.	<b>3a</b>	\$ <b>17,000.</b>
<b>b</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.	<b>3b</b>	\$ <b>17,000.</b>
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$ <b>0.</b>

**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.