

Return of Private Foundation

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

2018

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

For calendar year 2018 or tax year beginning

, and ending

Name of foundation ENO TRANSPORTATION FOUNDATION		A Employer identification number 06-0662124
Number and street (or P.O. box number if mail is not delivered to street address) 1629 K STREET NW	Room/suite 200	B Telephone number 202-879-4700
City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20006		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 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) \$ 7,009,399.	J Accounting method: <input type="checkbox"/> Cash <input checked="" 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, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(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	1,242,814.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	87.	87.	87.	
	4 Dividends and interest from securities	142,189.	142,189.	142,189.	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	90,194.			
	b Gross sales price for all assets on line 6a	498,714.			
	7 Capital gain net income (from Part IV, line 2)		90,194.		
	8 Net short-term capital gain			0.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	766,767.	0.	766,767.	STATEMENT 1	
12 Total. Add lines 1 through 11	2,242,051.	232,470.	909,043.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	244,326.	0.	31,392.	210,780.
	14 Other employee salaries and wages	830,340.	0.	106,685.	716,333.
	15 Pension plans, employee benefits	138,629.	0.	17,736.	120,158.
	16a Legal fees STMT 2	990.	0.	127.	5,903.
	b Accounting fees STMT 3	67,488.	3,374.	8,671.	58,292.
	c Other professional fees STMT 4	405,554.	0.	313,811.	98,456.
	17 Interest	822.	0.	0.	822.
	18 Taxes STMT 5	73,629.	0.	9,460.	63,722.
	19 Depreciation and depletion	23,472.	0.	3,016.	
	20 Occupancy	121,162.	0.	15,567.	52,330.
	21 Travel, conferences, and meetings	388,463.	0.	311,975.	75,577.
	22 Printing and publications	2,939.	0.	499.	2,440.
	23 Other expenses STMT 6	93,748.	0.	14,932.	69,871.
	24 Total operating and administrative expenses. Add lines 13 through 23	2,391,562.	3,374.	833,871.	1,474,684.
	25 Contributions, gifts, grants paid	7,501.			7,501.
26 Total expenses and disbursements. Add lines 24 and 25	2,399,063.	3,374.	833,871.	1,482,185.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-157,012.				
b Net investment income (if negative, enter -0-)		229,096.			
c Adjusted net income (if negative, enter -0-)			75,172.		

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	228,806.	268,580.	268,580.
	2 Savings and temporary cash investments	47,689.	163,367.	163,367.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶	63,194.		
	4 Pledges receivable ▶ 333,854.			
	Less: allowance for doubtful accounts ▶	334,271.	333,854.	333,854.
	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	2,600.		
	9 Prepaid expenses and deferred charges	31,101.	9,461.	9,461.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 7	6,668,930.	6,025,033.	6,025,033.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶ 235,671.				
Less: accumulated depreciation ▶ 56,436.	30,333.	179,235.	179,235.	
15 Other assets (describe ▶ DEPOSITS)	55,673.	29,869.	29,869.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	7,462,597.	7,009,399.	7,009,399.	
Liabilities	17 Accounts payable and accrued expenses	80,828.	80,436.	
	18 Grants payable			
	19 Deferred revenue	116,967.	203,884.	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ STATEMENT 8)	37,336.	227,543.	
23 Total liabilities (add lines 17 through 22)	235,131.	511,863.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted	6,666,595.	6,045,812.	
	25 Temporarily restricted	236,667.	127,522.	
	26 Permanently restricted	324,204.	324,202.	
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	7,227,466.	6,497,536.		
31 Total liabilities and net assets/fund balances	7,462,597.	7,009,399.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	7,227,466.
2 Enter amount from Part I, line 27a	2	-157,012.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	7,070,454.
5 Decreases not included in line 2 (itemize) ▶ UNREALIZED LOSS	5	572,918.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,497,536.

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.)
1a PUBLICLY TRADED SECURITIES	P		
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 498,714.		408,520.	90,194.
b			
c			
d			
e			

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

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			90,194.
b			
c			
d			
e			

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	90,194.
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	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.) N/A

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))
2017			
2016			
2015			
2014			
2013			

2 Total of line 1, column (d)	2	
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	
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, credits/payments, and total tax due. Values include 0.00 and N/A.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question text, Yes, and No. Includes questions about political campaigns, tax returns, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, and charitable trusts.

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

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

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

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

5a During the year, did the foundation pay or incur any amount to:			Yes	No
(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	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"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8	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
SEE STATEMENT 9		244,326.	37,674.	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
JEFFREY DAVIS - 1629 K STREET NW #200, WASHINGTON, DC 20006	SENIOR FELLOW & EDITOR, ETW	180,301.	20,857.	0.
ALEXANDER BOND - 1629 K STREET NW #200, WASHINGTON, DC 20006	DIRECTOR, CTL	106,616.	11,180.	0.
PAUL LEWIS - 1629 K STREET NW #200, WASHINGTON, DC 20006	VP, POLICY AND FINANCE	106,674.	10,381.	0.
KAREN PRICE - 1629 K STREET NW #200, WASHINGTON, DC 20006	DIR., DEV. & STRATEGY	92,801.	8,173.	0.
ERIN SHUMATE - 1629 K STREET NW #200, WASHINGTON, DC 20006	SR. MANAGER, TRAINING & EVENTS	63,510.	8,489.	0.
Total number of other employees paid over \$50,000				2

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."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Includes entries for INSIGHT STRATEGIES and PERMUT CONSULTING, LLC.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity, Expenses. Includes entries for 'SEE STATEMENT 10' and 'LEADERSHIP AND DEVELOPMENT - DEVELOPED AND IMPLEMENTED TRAINING COURSES...'.

Part IX-B Summary of Program-Related Investments

Table with 2 columns: Description of investment, Amount. Includes entry '1 N/A' and '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	6,681,241.
b	Average of monthly cash balances	1b	392,871.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,074,112.
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	7,074,112.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	106,112.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,968,000.
6	Minimum investment return. Enter 5% of line 5	6	348,400.

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	
2a	Tax on investment income for 2018 from Part VI, line 5	2a	
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	

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	1,482,185.
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	1,482,185.
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	1,482,185.

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

Part XIII Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2018:				
a Enter amount for 2017 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e				
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$				
a Applied to 2017, but not more than line 2a ...				
b Applied to undistributed income of prior years (Election required - see instructions) ...				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2018 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr. ...				
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				
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)				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2014 ...				
b Excess from 2015 ...				
c Excess from 2016 ...				
d Excess from 2017 ...				
e Excess from 2018 ...				

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

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 2018, enter the date of the ruling ▶ 12/31/85

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) 2018	(b) 2017	(c) 2016	(d) 2015	
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	75,172.	255,588.	151,868.	358,923.	841,551.
b 85% of line 2a	63,896.	217,250.	129,088.	305,085.	715,318.
c Qualifying distributions from Part XII, line 4 for each year listed	1,482,185.	1,407,730.	1,687,197.	2,309,186.	6,886,298.
d Amounts included in line 2c not used directly for active conduct of exempt activities	7,501.	7,499.	7,500.	0.	22,500.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	1,474,684.	1,400,231.	1,679,697.	2,309,186.	6,863,798.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	232,267.	225,836.	217,991.	239,282.	915,376.
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)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from an exempt organization					0.
(4) Gross investment income					0.

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

1 Information Regarding Foundation Managers:

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

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:

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				
SIMSBURY FREE LIBRARY 725 HOPMEADOW STREET SIMSBURY, CT 06070	NONE	PC	GENERAL OPERATING EXPENSES	7,501.
Total				7,501.
b Approved for future payment				
NONE				
Total				0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a REGISTRATION FEES					520,550.
b CONTRACT REVENUE					178,088.
c PUBLICATIONS					62,671.
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	87.	
4 Dividends and interest from securities			14	142,189.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	90,194.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a MISCELLANEOUS			01	5,458.	
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0.		237,928.	761,309.
13 Total. Add line 12, columns (b), (d), and (e)					999,237.

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

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

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).
1A	EDUCATION SEMINARS & CONFERENCES FOR STUDENTS AND THE PUBLIC AT LARGE
1B	REPORTS FOR STUDENTS AND THE PUBLIC AT LARGE
1C	PUBLICATIONS ABOUT AREAS OF TRANSPORTATION THAT BENEFIT THE PUBLIC

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

Table with 3 columns: Question, Yes, No. Contains questions 1a through 1c regarding transfers and 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. Row 1 contains 'N/A'.

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

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.

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. Signature of officer or trustee: [Signature] Date: [Date] Title: PRESIDENT & CEO

Paid Preparer Use Only Print/Type preparer's name, Preparer's signature, Date, Check [] if self-employed, PTIN, Firm's name: GELMAN, ROSENBERG & FREEDMAN, Firm's EIN: 52-1392008, Firm's address: 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930, Phone no. (301) 951-9090

May the IRS discuss this return with the preparer shown below? See instr. [X] Yes [] No

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

ENO TRANSPORTATION FOUNDATION

Employer identification number

06-0662124

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization

Employer identification number

ENO TRANSPORTATION FOUNDATION

06-0662124

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAPAN INTERNATIONAL TRANSPORT INSTITUTE 1819 L ST NW #1000 WASHINGTON, DC 20036	\$ 127,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	VALLEY METRO RAIL, INC 101 N. 1ST AVENUE PHEONIX, AZ 85003	\$ 94,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	CHARLOTTE AREA TRANSIT SYSTEM 600 EAST 4TH STREET CHARLOTTE, NC 28202	\$ 64,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	INTEL CORPORATION P.O. BOX 1000 HILLSBORO, OR 97123	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	STV INCORPORATED 7125 AMBASSADOR ROAD, SUITE 200 BALTIMORE, MD 21244	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	UBER TECHNOLOGIES 1717 RHODE ISLAND AVENUE, NW WASHINGTON, DC 20036	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ENO TRANSPORTATION FOUNDATION

06-0662124

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	DISTRICT DEPARTMENT OF TRANSPORTATION 55 M STREET SE, SUITE 400 WASHINGTON, DC 20003	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	DALLAS AREA RAPID TRANSIT AUTHORITY P.O. BOX 660263 DALLAS, TX 75266	\$ 29,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	LOS ANGELES COUNTY METROPOLITAN TRANSPORTATION AUTHORITY ONE GATEWAY PLAZA LOS ANGELES, CA 90012	\$ 29,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	METROPOLITAN ATLANTA RAPID TRANSIT AUTHORITY 2424 PIEDSMONT ROAD NE ATLANTA, GA 30324	\$ 29,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	REGIONAL TRANSPORTATION DISTRICT 1900 31ST STREET DENVER, CO 80216	\$ 29,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	SOUND TRANSIT 401 S JACKSON ST. SEATTLE, WA 98104	\$ 29,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	AMERICAN AIRLINES, INC. 1101 17TH STREET, NW SUITE 600 WASHINGTON, DC 20036	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	BNSF 500 NEW JERSEY AVE, NW. WASHINGTON, DC 20001	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	INTERNATIONAL AIR TRANSPORT ASSOCIATION 33, ROUE DE L'AEROPORT P.O. BOX 4161215 GENEVA, SWITZERLAND	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	ON SEMICONDUCTOR 5005 EAST MCDOWELL ROAD PHEONIX, AZ 85008	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	TRANSURBAN 6440 GENERAL GREEN WAY ALEXANDRIA, VA 22312	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	US CHAMBER OF COMMERCE 1615 H ST., NW WASHINGTON, DC 20062	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	APCO WORLDWIDE INC. 1299 PENN AVE NW, SUITE 300 WASHINGTON, DC 20004	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	ASSOCIATION OF EQUIPMENT MANUFACTURERS 1000 VERMONT AVENUE NW SUITE 450 WASHINGTON, DC 20005	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	AECOM 2101 WILSON BOULEVARD SUITE 700 ARLINGTON, VA 22201	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	AIR LINE PILOTS ASSOCIATION INTERNATIONAL 1625 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	DAIMLER NORTH AMERICA CORP PO BOX 42368 INDIANAPOLIS, IN 46242	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	LYFT 801 PENNSYLVANIA AVE NW, SUITE 405 WASHINGTON, DC 20004	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION 1325 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20005	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	SOUTHERN CALIFORNIA ASSOCIATION OF GOVERNMENTS 818 WEST 7TH STREET, 12TH FLOOR LOS ANGELES, CA 90017	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	CUBIC TRANSPORTATION SYSTEMS , INC 5650 KEARNY MESA ROAD SAN DIEGO, CA 92111	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	HDR, INC. 8404 INDIAN HILLS DR. OMAHA, NE 68114	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	NATIONAL ASSOCIATION OF MANUFACTURERERS 733 10TH STREET NW, SUITE 700 WASHINGTON, DC 20001	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	NORTHERN VIRGINIA TRANSPORTATION COMMISSION 2300 WILSON BLVD ARLINGTON, VA 22201	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	US DEPARTMENT OF TRANSPORTATION 1200 NEW JERSEY AVENUE, SE ROOM W84-127 WASHINGTON, DC 20590	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	VENABLE LLP 575 7TH ST. NW SUITE 1 WASHINGTON, DC 20004	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	WSP USA 1015 HALF STREET SUITE 650 WASHINGTON, DC 20005	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	FOOTHILL TRANSIT 100 S. VINCENT AVE. #200 WEST COVINA, CA 91790	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	NORTH CAROLINA DEPARTMENT OF TRANSPORTATION 1 S. WILMINGTON ST RALEIGH, NC 27601	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	CALTRANS TRANSPORTATION LIBRARY AND HISTORY CENTER 1120 N ST. ROOM 1430 MS-45 SACRAMENTO, CA 95814	\$ 5,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	SQUIRE PATTON BOGGS (US) LLP 2550 M STREET, NW WASHINGTON, DC 20037	\$ 5,583.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	AAA 607 14TH STREET NW, SUITE 200 WASHINGTON, DC 20005	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	ASSOCIATED GENERAL CONTRACTORS 2300 WILSON BLV., SUITE 400 ARLINGTON, VA 22201	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	AIRLINES FOR AMERICA 1301 PENNSYLVANIA AVE., NW SUITE 1100 WASHINGTON, DC 20004	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	AMAZON CORPORATE 601 NEW JERSEY AVE NW SUITE 900 WASHINGTON, DC 20001	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	AMTRAK 1 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20001	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	CAMBRIDGE SYSTEMATICS 100 CAMBRIDGE PARK DRIVE, SUITE 400 CAMBRIDGE, MA 02140	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	CHAMBERS, CONLON & HARTWELL 500 NEW JERSEY AVE NW, SUITE 400 WASHINGTON, DC 20001	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	MAJESTIC REALTY 3001 COMMERCE CENTER BOULEVARD BETHLEHEM, PA 18015	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	MANATT, PHELPS & PHILIPS, LLP 11355 W. OLYMPIC BLVD., LOS ANGELES, CA 90064	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	NATIONAL GOVERNORS ASSOCIATION 444 NORTH CAPITOL STREET, NW SUITE 267 WASHINGTON, DC 20001	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	NATIONAL STONE, SAND & GRAVEL ASSOCIATION 1605 KING STREET ALEXANDRIA, VA 22314	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	THOMPSON COBURN LLP 1909 K STREET, N.W. SUITE 600 WASHINGTON, DC 20006	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization ENO TRANSPORTATION FOUNDATION	Employer identification number 06-0662124
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

FORM 990-PF	OTHER INCOME		STATEMENT	1
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
REGISTRATION FEES	520,550.	0.	520,550.	
CONTRACT REVENUE	178,088.	0.	178,088.	
PUBLICATIONS	62,671.	0.	62,671.	
MISCELLANEOUS	5,458.	0.	5,458.	
TOTAL TO FORM 990-PF, PART I, LINE 11	766,767.	0.	766,767.	

FORM 990-PF	LEGAL FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	990.	0.	127.	5,903.
TO FM 990-PF, PG 1, LN 16A	990.	0.	127.	5,903.

FORM 990-PF	ACCOUNTING FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	67,488.	3,374.	8,671.	58,292.
TO FORM 990-PF, PG 1, LN 16B	67,488.	3,374.	8,671.	58,292.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROGRAM CONSULTING	324,539.	0.	298,825.	30,777.	
COMPUTER CONSULTING	29,235.	0.	3,756.	25,979.	
OTHER CONSULTING	51,780.	0.	11,230.	41,700.	
TO FORM 990-PF, PG 1, LN 16C	405,554.	0.	313,811.	98,456.	

FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES	73,629.	0.	9,460.	63,722.	
TO FORM 990-PF, PG 1, LN 18	73,629.	0.	9,460.	63,722.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MEMBERSHIPS AND SUBSCRIPTIONS	15,782.	0.	1,654.	14,128.	
INSURANCE	18,476.	0.	2,374.	11,438.	
OFFICE SUPPLIES AND EXPENSES	17,604.	0.	2,650.	14,954.	
TELEPHONE	13,154.	0.	1,690.	11,817.	
SERVICE CHARGES	9,606.	0.	1,211.	8,395.	
COST OF GOODS SOLD	2,600.	0.	0.	2,600.	
POSTAGE AND DELIVERY	4,811.	0.	3,848.	1,388.	
EQUIPMENT REPAIRS AND RENTALS	2,147.	0.	276.	1,871.	
MISCELLANEOUS	9,568.	0.	1,229.	3,280.	
TO FORM 990-PF, PG 1, LN 23	93,748.	0.	14,932.	69,871.	

FORM 990-PF	CORPORATE STOCK	STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
COMMON STOCK	6,025,033.	6,025,033.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	6,025,033.	6,025,033.	

FORM 990-PF	OTHER LIABILITIES	STATEMENT	8
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
SECURITY DEPOSIT	12,568.	0.	
CAPITAL LEASE PAYABLE	20,826.	10,311.	
DEFERRED RENT	3,942.	51,209.	
DEFERRED LEASE INCENTIVE	0.	166,023.	
TOTAL TO FORM 990-PF, PART II, LINE 22	37,336.	227,543.	

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 9
 TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ROBERT PUENTES 1629 K STREET NW #200 WASHINGTON, DC 20006	PRESIDENT & CEO 37.50	244,326.	37,674.	0.
JAMES H. BURNLEY 1629 K STREET NW #200 WASHINGTON, DC 20006	CHAIR 1.00	0.	0.	0.
JEROME PREMO 1629 K STREET NW #200 WASHINGTON, DC 20006	VICE-CHAIR 1.00	0.	0.	0.
MARY E. PETERS 1629 K STREET NW #200 WASHINGTON, DC 20006	SECRETARY 1.00	0.	0.	0.
SAM LAMAGNA 1629 K STREET NW #200 WASHINGTON, DC 20006	TREASURER (UNTIL JUNE 2018) 1.00	0.	0.	0.
TOM PRENDERGAST 1629 K STREET NW #200 WASHINGTON, DC 20006	TREASURER (FROM JUNE 2018) 1.00	0.	0.	0.
NORMAN Y. MINETA 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
MARTIN T. WHITMER JR. 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
TAY YOSHITANI 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
KEITH PARKER 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
MARJORIE DICKMAN 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER (FROM AUG. 2018) 1.00	0.	0.	0.

CAROLYN FLOWERS 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER (FROM NOV. 2018) 1.00	0.	0.	0.
DIANE WOODEND JONES 1629 K STREET NW #200 WASHINGTON, DC 20006	BOARD MEMBER (FROM NOV. 2018) 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		<u>244,326.</u>	<u>37,674.</u>	<u>0.</u>

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 10

ACTIVITY ONE

TRANSPORTATION POLICY - DEVELOPED AND PUBLISHED
TRANSPORTATION POLICY RESEARCH TO HELP PROMOTE SOLUTIONS TO
THE INDUSTRY'S MOST PRESSING CHALLENGES. ALSO ORGANIZED
FORUMS AND EVENTS TO DISCUSS ISSUES AND DISSEMINATE RESEARCH
FINDINGS.

EXPENSES

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

791,848.