

1.) CORPORATION NAME:

DUE DATE: **5/31/2015**

The NHP Foundation

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1861188**

**NATIONAL CORPORATE RESEARCH, LTD.
250 BROWNS HILL COURT
MIDLOTHIAN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1090 Vermont Avenue NW, Suite 400

CITY/ST/ZIP: Washington, DC 20005

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: THOMAS G VACCARO TITLE: VP/ASST SEC ADDRESS: 1090 VERMONT AVE #400 NW CITY/ST/ZIP/CO: WASHINGTON, DC 20005	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JOSEPH P WIEDORFER TITLE: SEN VP/SEC ADDRESS: 1090 VERMONT AVE #400 NW CITY/ST/ZIP/CO: WASHINGTON, DC 20005	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ROBERT H ABRAMS TITLE: DIRECTOR ADDRESS: 122 E 42ND ST #3605 CITY/ST/ZIP/CO: NEW YORK, NY 10168	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RALPH F BOYD JR TITLE: DIRECTOR ADDRESS: 1090 VERMONT AVE #400 NW CITY/ST/ZIP/CO: WASHINGTON, DC 20005	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RICHARD F BURNS TITLE: DIRECTOR ADDRESS: 122 E 42ND ST #3605 CITY/ST/ZIP/CO: NEW YORK, NY 10168	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: THOMAS A CARR TITLE: DIRECTOR ADDRESS: 1090 VERMONT AVE #400 NW CITY/ST/ZIP/CO: WASHINGTON, DC 20005	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: DAVID M CHILDS TITLE: DIRECTOR ADDRESS: 122 E 42ND ST #3605 CITY/ST/ZIP/CO: NEW YORK, NY 10168	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: PATRICIA DIAZ DENNIS TITLE: DIRECTOR ADDRESS: 122 E 42ND ST #3605 CITY/ST/ZIP/CO: NEW YORK, NY 10168	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ THOMAS G VACCARO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	THOMAS G VACCARO, VP/ASST SEC PRINTED NAME AND CORPORATE TITLE	5/22/2015 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.