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Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note: The organization may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

For calendar year 2004, or tax year beginning , and ending											
υ. 1	G Check all that apply:						nended return		Address change	Name change	
• · ·	Us	e the	IRS	Name of organization				ΑE	mployer identification nu	mber	
		label	١.	ST JOHN FOUNDATION				52-1	709184		
∞	0	therw	ise,	Number and street (or P O box nur	mber if mail is not del	vered to street address) Room/suite B T			B Telephone number (see page 10 of the instructions)		
S.		print		PO BOX 1568			ļ	410-	822-8292		
വ		or typ		City or town, state, and ZIP code		· · · · · · · · · · · · · · · · · · ·			exemption application is pe	nding, check here	
3 6		e Spe tructi		EASTON		MD	21601	l.	Foreign organizations, che	· =	
4	_			of organization. X Section				1	Foreign organizations mee		
ò	<u>~</u>	Sect	ion 49	47(a)(1) nonexempt charita	ble trust C	other taxable private	foundation	ļ ^ .	check here and attach con	· —	
<u> </u>	<u>Ц</u>								private foundation status w		
=				t value of all assets at end			Accrual	_			
الد			ar <i>(1110.</i> 6) ▶	m Part II, col (c), \$ 3,967,759	Other (sp) must be on cash basis	 e)	1	the foundation is in a 60-mi ider section 507(b)(1)(B), c	. —	
FAK					·				(5)(1)(2)(3)	(d) Disbursements	
اند	Pai			ysis of Revenue and Expe		(a) Revenue and	(b) Net investm	nent	(c) Adjusted net	for charitable	
بسيا				ts in columns (b), (c), and (d) may no ounts in column (a) (see page 11 of		expenses per books	ıncome		ıncome	purposes	
ب.									· 	(cash basis only)	
لسا		1		utions, gifts, grants, etc , received (atta	· •				<u> </u>		
\supset		_		If the foundation is not require		1,272		1,272			
		3		st on savings and temporary ca	í	93,424		3,424			
NIN NIN		4		ends and interest from securities rents	ı	33,424		J,747			
1			-	ntal income or (loss)					STATUTE	דואט	
	일			ain or (loss) from sale of assets	not on line 10	0			TCCE!\	/LD	
	Revenue		_	sales price for all assets on line 6a	0				A		
	2	7		al gain net income (from Part IV	, line 2)		156	3,100	DEC 312	2009	
	\neg	8		nort-term capital gain					0		
		9		e modifications	í				TPR BRAI	11 14	
		10 a	Gross s	sales less returns and allowances	0				OGDE		
		b	Less	Cost of goods sold	0						
		C	Gross	profit or (loss) (attach schedule	e)	0	~				
		11		income (attach schedule)		0		0			
	_	12		Add lines 1 through 11		94,696	250	0,796		FIVED	
		13	-	ensation of officers, directors, t		0				PEIVED (
	X	14		employee salaries and wages	1				10 DCC	2 3 2009	
	Expenses	15		on plans, employee benefits .		0			DEC	2 3 2009	
	흲		-	fees (attach schedule)	ı	0				<u> </u>	
	û			professional fees (attach sched		0	31	2,761	OGL	ENTIT	
	inistrative I	17		st	-					LIV, U#	
U	2	18		(attach schedule) (see page 14 of the		0					
<u>S</u>	nis	10	,	ciation (attach schedule) and d	' '	0		0	0		
₽	֓֟֟ <u>֚֚֚֚֚֚֟</u>	20	•	pancy			,				
<u>~</u>	됩	21		I, conferences, and meetings							
	밀	22	Printin	ng and publications							
⊴	ga	23	Other	expenses (attach schedule) .		0		277	0	0	
\neg	녍	20 21 22 23 24 25		operating and administrative	3						
	5			nses. Add lines 13 through 23		0	3:	3,038	0		
Z	8	25		butions, gifts, grants paid		165,500		2.000		165,500	
4	_	26		expenses and disbursements. A	dd lines 24 and 25	165,500		3,038	0	198,538	
SCANNED JAN		27		act line 26 from line 12	1 41-4	70.004					
W				s of revenue over expenses and		-70,804		7 750	-	<u> </u>	
				eventment income (if negative,				7,758	0		
		C	Adjus	sted net income (if negative, ei	nterU-)				<u> </u>	000.05	

For Privacy Act and Paperwork Reduction Act Notice, see the instructions. (HTA)

Form 990-PF (2004)

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End o	f year
Pa	Ш	Balance Sheets should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	65,652	28,878	28,878
	3	Accounts receivable ▶ 0			
		Less allowance for doubtful accounts ▶0	0	0	0
	4	Pledges receivable 0			
		Less allowance for doubtful accounts ▶0	0	0	0
	5	Grants receivable			 -
	6	Receivables due from officers, directors, trustees, and			
		other disqualified persons (attach schedule) (see page 15 of the instructions)		0	0
	7	Other notes and loans receivable (attach schedule)			
	′	Less allowance for doubtful accounts	- 0	0	o
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹		a Investments—U.S. and state government obligations (attach schedule)	0	0	0
,	ı	b Investments—corporate stock (attach schedule)	3,521,451	3,938,881	3,938,881
	ı	c Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis 0			
		Less: accumulated depreciation (attach schedule) 0	o	0	0
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment: basis ▶0			
		Less. accumulated depreciation (attach schedule)	0	0	0
	15	Other assets (describe)	0	0	0
	16	Total assets (to be completed by all filers—see			
		page 16 of the instructions Also, see page 1, item l)	3,587,103	3,967,759	3,967,759
	17	Accounts payable and accrued expenses			
	18	Grants payable			
. <u>8</u>	19	Deferred revenue			
薑	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
Liabilities	21	Mortgages and other notes payable (attach schedule)	0	0	
	22	Other liabilities (describe ►)	0		:
	23	Total liabilities (add lines 17 through 22)	o	0	
S		Organizations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
월	24	Unrestricted			:
<u>a</u>	25	Temporarily restricted			i
Ba	26	Permanently restricted	-	_	
þ	20	Organizations that do not follow SFAS 117, check here ► 💢			
∄		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	3,587,103	3,967,759	
Ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
ജ	29	Retained earnings, accumulated income, endowment, or other funds			
Ÿ	30	Total net assets or fund balances (see page 17 of the			
E		instructions)	3,587,103	3,967,759	
~	31	Total liabilities and net assets/fund balances (see page 17 of	2 527 422	0.007.750	
	l	the instructions)	3,587,103	3,967,759	<u> </u>
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Tota	I net assets or fund balances at beginning of year—Part II, column ((a), line 30 (must agre	e with	
		of-year figure reported on prior year's return)			3,587,103
2		r amount from Part I, line 27a			-70,804
3		er increases not included in line 2 (itemize) ► INTEREST, DIVIDEN			484,221
4	Add	lines 1, 2, and 3			4,000,520
5		reases not included in line 2 (itemize) CONSULTING FEES, C		5	32,761
_6	rota	I net assets or fund balances at end of year (line 4 minus line 5)—P	aπ II, column (b), line	30 6	3,967,759

Part IV	Capital Gains and L	osses for Tax on Investme	ent Inco	me				
٠,	(a) List and describe the kin 2-story brick warehouse, o	d(s) of property sold (e g , real estate, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr)		(d) Date sold (mo , day, yr)	
1a CAPIT	AL GAIN/LOSS FROM A	ACC 71A-04195		P	VARIOUS		VARIOUS	
	AL GAIN/LOSS FROM A		-	P	VARIOUS		VARIOUS	
	AL GAIN/LOSS FROM A			Р	VARIOUS		VARIOUS	
d CAPIT	AL GAIN/LOSS FROM A	ACC 71A-04199		Р	VARIOUS		VARIOUS	
	AL GAIN/LOSS FROM A			Р	VARIOUS		VARIOUS	
(6	e) Gross sales price	(f) Depreciation allowed (or allowable)	, ,,,,	Cost or other basis us expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
	565,105			568,821			-3,716	
	723,942			683,399			40,543	
С	629,856			525,600			104,256	
d	238,258			223,241			15,017	
е							0	
Comp	plete only for assets showing	ng gain in column (h) and owned by	the found	ation on 12/31/69	(I) Gain	s (Col	(h) gain minus	
(i) I	F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69) Excess of col (i) over col (j), if any			less than -0-) or om col (h))	
а				0			-3,716	
b				0			40,543	
С				0			104,256	
d				0			15,017	
e				0			0	
•	al gain net income or (ne	t ii (loss), entei	r -0- in Pa	art I, line 7	2		156,100	
If gain If (loss	i, also enter in Part I, line s), enter -0- in Part I, line	(loss) as defined in sections 122 e 8, column (c) (see pages 13 a e 8	nd 17 of t	the instructions)	3			
Part V	Qualification Under	Section 4940(e) for Reduc	ed Tax o	on Net Invest <u>men</u>	t Income			
(For optio	nal use by domestic priv	ate foundations subject to the s	ection 49	940(a) tax on net inve	estment income)		
If section	4940(d)(2) applies, leave	e this part blank.						
Was the c	organization liable for the	e section 4942 tax on the distrib t qualify under section 4940(e)			the base period	? 🗌	Yes X No	
		it in each column for each year;			ns before makın	g any	y entries	
	(a)						(d)	
	Base period years	(b)		(c)			Distribution ratio	
	rear (or tax year beginning in)	Adjusted qualifying distributions		Net value of nonchanta	bie-use assets	(cc	ol (b) divided by col (c))	
	2003	1:	57,050		3,141,000		0 050000	
	2002		69,000		3,380,000		0 050000	
	2001	1'	78,100		3,562,000		0 050000	
	2000		65,371		3,307,420		0 050000	
	1999		76,808	-	3,536,160		0 050000	
2 Total						2	0 250000	
		he 5-year base period—divide the flation has been in existence if le				3	0 050000	
4 Enter	the net value of nonchar	ritable-use assets for 2004 from	Part X, I	ıne 5		4	3,751,886	
5 Multip	oly line 4 by line 3					5	187,594	
6 Enter	1% of net investment in	come (1% of Part I, line 27b) .				6	2,178	
						7	189,772	
		rom Part XII, line 4				8	198,538	
If line		than line 7, check the box in Pai						

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	ne ins	truction	ons)				
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1							
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)		ŀ					
b	o Domestic organizations that meet the section 4940(e) requirements in Part V, check		2,178					
	here ▶ X and enter 1% of Part I, line 27b							
C	All other domestic organizations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		ا					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 2		2,178					
3								
4								
5								
6	Credits/Payments:							
	a 2004 estimated tax payments and 2003 overpayment credited to 2004 6a 3,510 Exempt foreign organizations—tax withheld at source 6b							
	Exempt foreign organizations—tax withheld at source			l				
	Backup withholding erroneously withheld 6d			l				
7	Total credits and payments. Add lines 6a through 6d		6,010	l				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		0,0.0					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0					
10			3,832					
	Enter the amount of line 10 to be: Credited to 2005 estimated tax ▶ 0 Refunded ▶ 11		3,832					
	rt VII-A Statements Regarding Activities		-1					
	During the tax year, did the organization attempt to influence any national, state, or local legislation or did		Yes	No				
	ıt participate or intervene in any political campaign?	1a		X				
k	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page							
	19 of the instructions for definition)?	1b		Х				
	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 organization in connection with the activities							
C	c Did the organization file Form 1120-POL for this year?							
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
(1) On the organization ▶ \$ (2) On organization managers. ▶ \$								
6	Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed			l				
	on organization managers. ▶ \$			1				
2	Has the organization engaged in any activities that have not previously been reported to the IRS?	2		_X_				
_	If "Yes," attach a detailed description of the activities			l				
3	Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles			V				
4	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	4a	NI/A					
	olf "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	X				
o	If "Yes," attach the statement required by General Instruction T.	3		<u> </u>				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			l				
U	By language in the governing instrument, or			Ì				
	By state legislation that effectively amends the governing instrument so that no mandatory directions			į				
	that conflict with the state law remain in the governing instrument?	6		х				
7	Did the organization have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X					
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the							
	instructions) ► MD							
k	o If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney							
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х					
9	Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3)							
	or 4942(j)(5) for calendar year 2004 or the taxable year beginning in 2004 (see instructions for Part XIV on							
	page 25)? If " Yes," complete Part XIV	9		X				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X				
11		11	_X	<u> </u>				
	Web site address ▶			- 				
12	The books are in care of ► THOMAS M TAWNEY, CPA Telephone no ► 410-822-82	<u> 292</u>	. .					
	Located at ► 401A BROOKLETTS AVE EASTON MD ZIP+4 ► 21601		. .					
13	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		. •	. []				

Pa	rt 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 organization (either directly or indirectly).	. 1	Ì	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		i	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Lagrange Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes X No	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the organization agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days.) Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the organization 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 2004?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2004, did the organization have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2004? Yes X No			'
	If "Yes," list the years ,			;
b	Are there any years listed in 2a for which the organization is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	N/A	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	2.0	14//	
C	The provisions of section 4542(a)(2) are being applied to any of the years noted in 24, not the years noted			
За	Did the organization hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2004 as a result of (1) any purchase by the organization			
	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved	'		
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	.		-
	ıf the organization had excess business holdings ın 2004)	3b	N/A	
	Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the organization 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 2004?	4b		X
5a	During the year did the organization pay or incur any amount to			
	 (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No (2) Influence the outcome of any specific public election (see section 4955), or to carry 			
	on, directly or indirectly, any voter registration drive? Yes X No			
	(4)			ļ
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or			
	educational purposes, or for the prevention of cruelty to children or animals? Yes X 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 page 20 of the instructions)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	If the answer is "Yes" to question 5a(4), does the organization claim exemption from the	1		
	tax because it maintained expenditure responsibility for the grant?			
	If "Yes," attach the statement required by Regulations section 53 4945–5(d).		-	
6a	Did the organization, during the year, receive any funds, directly or indirectly, to pay			
	premiums on a personal benefit contract? Yes X No			
b	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X
	If you answered "Yes" to 6b, also file Form 8870	1	1	1

and Contractors				
1 List all officers, directors, trustees, found	lation managers ar	d their compensa	ation (see page 20 of th	e instructions).
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	PRES 2	0	o	0
WILLIAM H PRICE II	SECY 2	0		0
DONALD D CASSON	TREAS		0	
28288 OAKLANDS RD EASTON MD 21601	4	0	0	0
		·		
2 Compensation of five highest-paid emplo If none, enter "NONE."	yees (other than th	nose included on	line 1—see page 21 of t	the instructions).
(a) Name and address of each employee paid more than \$50,	(b) Title and avera 000 hours per week devoted to position	(c) Compensation	on (d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	•••		0 0	0
Total number of other employees paid over \$50	,000			▶
3 Five highest-paid independent contractor "NONE."				
(a) Name and address of each person paid more t	han \$50,000	(b)	Type of service	(c) Compensation
NONE				
				0
				0
	 			0
		•••		0
				0
Total number of others receiving over \$50,000 for	or professional servi	ces		▶
Part IX-A Summary of Direct Charitab	le Activities			
List the foundation's four largest direct charitable activities du the number of organizations and other beneficiaries served, c				Expenses
1 N/A				
2		• • • • • • • • • • • • • • • • • • • •		
3				
·				
4				

Pa	t IX-B Summary of Program-Related Investments (see page 22 of the instructions)		
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1			
			
2			
All	other program-related investments. See page 22 of the instructions		
	tal. Add lines 1 through 3	. D	0
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	i roundat	ons,
_	see page 22 of the instructions)	T 1	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
9	purposes Average monthly fair market value of securities	1a	3,730,166
	Average of monthly cash balances	1b	78,855
	Fair market value of all other assets (see page 22 of the instructions)	1c	
d		1d	3,809,021
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,809,021
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see page 23		E7 10E
_	of the instructions)	5	57,13 <u>5</u> 3,751,886
5	Minimum investment return. Enter 5% of line 5	6	187,594
<u>6</u> _	Distributable Amount (see page 23 of the instructions) (Section 4942(i)(3) and (i)(5) private or		107,554
Pa	foundations and certain foreign organizations check here and do not complete this part)	, or a time	
1	Minimum investment return from Part X, line 6	1	187,594
2a	Tax on investment income for 2004 from Part VI, line 5	3	
b	Income tax for 2004. (This does not include the tax from Part VI)]k _* *	
C	Add lines 2a and 2b	2c	2,178
3	Distributable amount before adjustments Subtract line 2c from line 1	3	185,416
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	185,416
6	Deduction from distributable amount (see page 23 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	185,416
_			100,410
Pa	rt XII Qualifying Distributions (see page 23 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	,	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	198,538
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.,		
3	purposes	2	
а	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	198,538
5	Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b (see page 24 of the instructions)	5	2,178
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	196,360
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the fo	undation

Part XIII Undistributed Income (see page 24 of the instructions)

ST JOHN FOUNDATION

	District III	(a) Corpus	(b) Years prior to 2003	(c) 2003	(d) 2004
1	Distributable amount for 2004 from Part XI,	Сограз	Tears prior to 2000	2000	185,416
2	Undistributed income, if any, as of the end of 2003				100,410
2	Enter amount for 2003 only				
a b	•				
3	Total for prior years:,, Excess distributions carryover, if any, to 2004				
а	From 1999				
b	From 2000				
C	From 2001			:	
d	From 2002	1			
e	From 2003	1			
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2004 from Part				
	XII, line 4: ►\$ 198,538				
а	Applied to 2003, but not more than line 2a .				
	Applied to undistributed income of prior years				
	(Election required—see page 24 of the instructions)		0		
C	Treated as distributions out of corpus (Election				
	required—see page 24 of the instructions)		*,		
d	Applied to 2004 distributable amount	*	% 5		198,538
е	Remaining amount distributed out of corpus .				
5	Excess distributions carryover applied to 2004	0	,,,		
	(If an amount appears in column (d), the	902.04			
	same amount must be shown in column (a))		 ≪		
6	Enter the net total of each column as		4		
	indicated below:	Line			,
	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0	№		*
D	Prior years' undistributed income. Subtract line 4b from line 2b	**			
_		/×-	0		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			, ,	
ч	Subtract line 6c from line 6b Taxable	622.42 5 4		*	
u	amount—see page 25 of the instructions	***	o		
е	Undistributed income for 2003. Subtract line		6 *		
·	4a from line 2a. Taxable amount—see page				
	25 of the instructions			0	
f	Undistributed income for 2004 Subtract				
	lines 4d and 5 from line 1 This amount must				
	be distributed in 2005				-13,122
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(E) or 4942(g)(3) (see page	1			
	25 of the instructions)				
8	Excess distributions carryover from 1999				
	not applied on line 5 or line 7 (see page 25				
	of the instructions)				
9	Excess distributions carryover to 2005.				
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2000	4			
b	Excess from 2001	4			
C	Excess from 2002	4			
d	Excess from 2003	4			
е	Excess from 2004	<u></u>	L		

Par	t XIV Private Operating Foundations (s	see page 25 of th	ne instructions a	and Part VII-A, q	uestion 9)	
	If the foundation has received a ruling or determination, and the ruling is effective for 2004, enter	er the date of the ruli	ng			
	Check box to indicate whether the organization	on is a private ope	rating foundation	described in sect	ion	or
2 a	Enter the lesser of the adjusted net	Tax Year		Prior 3 years		(a) Tatal
	income from Part I or the minimum investment return from Part X for each	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
	year listed	0				0
h	85% of line 2a	0	0	0	0	0
	Qualifying distributions from Part XII,					
Ŭ	line 4 for each year listed	ol				0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon "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/s of minimum investment return shown in Part X, line 6 for each year listed	0				0
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
Dа	t XV Supplementary Information (Con	nnlete this part	only if the ora	anization had \$	5 000 or more i	
	assets at any time during the yea	ar—see page 26	-			
1 a	Information Regarding Foundation Manage List any managers of the foundation who hav before the close of any tax year (but only if the	e contributed more	e than 2% of the ed more than \$5,0	total contributions 000) (See section	received by the fo n 507(d)(2))	oundation
b	List any managers of the foundation who own ownership of a partnership or other entity) of	10% or more of t which the foundati	he stock of a corpion has a 10% or	poration (or an eq greater interest.	ually large portion	of the
2	Information Regarding Contribution, Grant Check here ▶ ☐ if the organization only manusolicited requests for funds. If the organizations under other conditions, comple	akes contributions tion makes gifts, g	to preselected c grants, etc. (see p	haritable organiza		
а	The name, address, and telephone number of	f the person to wh	om applications	should be address	sed [.]	
b	The form in which applications should be sub	mitted and informa	ation and materia	als they should inc	lude	
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, such factors:	h as by geographi	cal areas, charita	ible fields, kinds o	f institutions, or oth	her

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	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient							
a Paid during the year									
ACADEMY OF THE ARTS 106 SOUTH ST EASTON				5,000					
AUDUBON MD-DC 23000 WELLS PT RD BOZMAN N				7,500					
AVALON FOUNDATION 586 CYNWOOD DR EASTO				10,000					
BLAKE BLACKSTON AMERICAN LEGION 102 GLEN				1,500 2,000					
BOY SCOUT TROOP 190 100 PEACHBLOSSOM LA				2,000					
BOY SCOUT TROOP 532 100 PEACHBLOSSOM LA				2,000					
BOY SCOUT TROOP 741 100 PEACHBLOSSOM LA				5,000					
BRIGHTER CHRISTMAS FUND PO BOX 600 EASTO CASA 1 S WASHINGTON ST SUITE 2 EASTON MD	1			6,000					
CHARACTER COUNTS 319 STEWART BUILDING E				2,500					
CHESAPEAKE GIRL SCOUT COUNCIL 911 SNOWH				3,500					
CAPA PO BOX 823 EASTON MD 21601				8,000					
CUB SCOUT PACK 190 100 PEACHBLOSSOM LANI				1,500					
CUB SCOUT PACK 532 100 PEACHBLOSSOM LANI				1,500					
CUB SCOUT PACK 741 100 PEACHBLOSSOM LANI	1			1,500					
EASTERN SHORE CHAMBER MUSIC FESTIVAL PC				5,000					
EASTON CELEBRATIONS 40E DOVER ST EASTON				2,000					
EASTON DAY CARE CENTER 11 MAGNOLIA ST EA				5,000					
EASTON HIGH SCHOOL BAND 723 MECKLENBURG				2,500					
EASTON HIGH SCHOOL CHOIR 723 MECKLENBUR				2,500					
EASTON PARADE 40 E DOVER ST EASTON MD 21				1,000					
FIRST NIGHT TALBOT, FOR ALL SEASONS 40 E DO				4,000					
HABITAT FOR HUMANITY 350 N AURORA ST EAST	1			5,000					
HISTORIC CEMETERIES OF EASTON, INC PO BOX				10,000					
THE MENTAL HEALTH ASSOCIATION IN TALBOT O				5,000					
PICKERING CREEK AUDUBON CENTER 11450 AUI	1			7,500					
ST MARKS VILLAGE 100 PEACHBLOSSOM LANE E				5,000					
ST MICHAELS HIGH SCHOOL ORCHESTRA 200 SE	1			12,500 5,000					
TALBOT COUNTY HISTORICAL SOCIETY 25 S WAS TALBOT COUNTY FAMILY SUPPORT CENTER 126				5,000					
TALBOT COUNTY LIBRARY FOUNDATION 100 W D				5,000					
TALBOT HOSPICE FOUNDATION 586 CYNWOOD D	1			5,000					
HUMANE SOC, TALBOT MENTORS, DIXON HOUSE				19,000					
Total			▶ 3a	165,500					
b Approved for future payment									
.,				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
				0					
Total			▶ 3b	0					

Day VVI A Amplyois of Income Denducing Act		NDATION		52-1709184	Page 11
Part XVI-A Analysis of Income-Producing Act	ivities				
Enter gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	on 512, 513, or 51 <u>4</u>	(e)
-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 26 of
1 Program service revenue:	<u> </u>		<u> </u>	 	the instructions)
a			 		
b			ļ		
c					
d			 		
e	ļ				
			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash investments					1,272
4 Dividends and interest from securities	<u> </u>				93,424
5 Net rental income or (loss) from real estate:					- 00,12
a Debt-financed property				 	
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				-	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		0	
13 Total, Add line 12 columns (b) (d) and (e)				13	94,696
13 Total. Add line 12, columns (b), (d), and (e)	sific anlacdations				
(See worksheet in line 13 instructions on page 26 to ve			Purposes		· · · · · · · · · · · · · · · · · · ·
(See worksheet in line 13 instructions on page 26 to vereant XVI-B Relationship of Activities to the Activity for which the accomplishment of the organization's page 27 of the instructions)	complishmer income is report	t of Exempt ed in column (e) of Part XVI-A		
See worksheet in line 13 instructions on page 26 to vereat XVI-B Relationship of Activities to the Activities to the Activity for which the accomplishment of the organization's	complishmer income is report	t of Exempt ed in column (e) of Part XVI-A		
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See worksheet in line 13 instructions on page 26 to vereat XVI-B Relationship of Activities to the Activities to the Activity for which the accomplishment of the organization's	complishmer income is report	t of Exempt ed in column (e) of Part XVI-A		
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See worksheet in line 13 instructions on page 26 to vereat XVI-B Relationship of Activities to the Activities to the Activity for which the accomplishment of the organization's	complishmer income is report	t of Exempt ed in column (e) of Part XVI-A		

	• .		xempt Organiza									
1	Did the	org	anızation directly or i	indirectly enga	ge in any of the follow	wing with any oth	er organization de	scribed in s	ection		Yes	No
	501(c)	of th	e Code (other than s	section 501(c)(3) organizations) or i	ın section 527, re	lating to political or	ganizations	3,			ĺ
а	Transf	ers	from the reporting	organization	to a noncharitable	exempt organiz	zation of:					
	(1) Ca	ish								1a(1)		<u> </u>
										1a(2)		X
b			sactions:									١.,
					empt organization					1b(1)		<u> </u>
					able exempt organ					1b(2)		X
					er assets					1b(3)		X
- 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -									1b(4)		X	
(-)									1b(5)		X	
, (a)									1b(6) 1c		X	
					sts, otner assets, of ' complete the follo						L	
u	value d	alisv of th	ver to any of the at	ouve is tes, sets or servic	complete the folio	nortina organiza	ation If the organ	ıratıon rec	eived less t	nı mar han fa	ır	
	marke	t val	ue in any transacti	on or sharing	arrangement, sho	w ın column (d) the value of the	goods, oth	ner assets,	or serv	ices	
	receive	ed						_		_		
(a)	Line no		b) Amount involved	(c) Name	of noncharitable exempt	organization	(d) Description of tra	ansfers, trans	actions, and sh	arıng arr	angem	ents
1	a(1)											
										_		_
	-											
											· .	
			· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·						
		<u> </u>	··-									
		<u> </u>						-				
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		_				_						
		-										
_		\vdash	. .						_			
								-		•		
										-		
									_	_		
2a	Is the	orga	inization directly or	r indirectly aff	filiated with, or relat	ted to, one or n	nore tax-exempt of	organizatio	ns			
					other than section 5	501(c)(3)) or in	section 527? .		🔲 Ү	'es 🔲	No	
b	If "Yes	<u>," c</u>	omplete the followi	ng schedule.								
		(a)	Name of organization		(b) Type	of organization		(c) Description	on of relationsh	IP .		
												
					 							
_	-				 							
												
	Unde	or ner	naltipe of personal doctor	re that I have eva	I	ing accompanying	chedules and stateme	inte and to th	a hast of my br	owledge	and	
					of preparer (other than to							
		/1	001		, , , , , , , , , , , , , , , , , , , ,			- 0	· -	,		
	L &	($A \times X$	<u>م</u>		12.3-	09 h th	siden				
ere	Sıg	natur	e of officer or trustee	7/1		Date	Title		<u> </u>			
Sign Here						Date			Preparer's	SSN o	PTIN	
<u>ā</u>		_	. /		6/1/		Check if	_	(See Signat			
S	ت <u>ت</u>	출	Preparer's	Mhn M	1/h_MA	12/3/0	gelf-emplo	yed ►X	28 of the ins)	
	Paid Preparer's	Use Only	signature				<u></u>		P0011574	2		
	E	ٽ	Firm's name (or yours i self-employed), addres	s THOMAS	as M Tay ney CPA				١ ▶			
	_		and ZIP code	401 X	Brookletts Ave, Ea	iston, MD 21 <u>60</u>	1	Ph	one no (410) 822-	8292	
				,					For	m 990)-PF	(2004)

16 17

18 Total Enter on line 10c

0

Line 10, Part II (990-PF) - Investments - securities Book value Number Fair beginning Book value of shares/ market U.S and state government obligations of year end of year face value value 2 10 11 12 13 14 15 16 17 0 18 Total Enter on line 10a Book value Number Fair Book value of shares/ beginning market Corporate stock end of year of year face value value CITIGROUP ACC 71A-04195 885,177 1,246,073 1,246,073 CITIGROUP ACC 71A-04196 624,895 707,428 707,428 1.387,312 CITIGROUP ACC 71A-04198 1,359,659 1,359,659 CITIGROUP ACC 71A-04199 388,883 365,102 365,102 235,184 CITIGROUP ACC 71A-04272 260,619 260,619 6 7 8 9 10 11 12 13 14 15 16 17 18 Total. Enter on line 10b. 3,521,451 3,938,881 3,938,881 Book value Number Fair of shares/ beginning Book value market Corporate bonds of year end of year face value value 2 3 10 11 12 13 14 15

0

18

Part VIII Section 1 (990-	PF) - Information A	pout Onicers, e	τc <u>. </u>	
1. List all officers, directors, to	rustees, foundation mana	gers and their compe	ensation	
Name '				
VERNON J NILY JR			X Person	Business
Street				
PO BOX 757				
City		State Zip code	Country	
EASTON		MD 21601		
Title	Avg Hrs devoted	Compensation Con	tributions Expe	nse(other allowances)
PRES	2	0	0	0
Name				
WILLIAM H PRICE II			X Person	Business
Street				
28133 WOODLAND CT			10 1	
City		State Zip code	Country	
EASTON		MD 21601		
Title	Avg Hrs devoted	· · · · · · · · · · · · · · · · · · ·	'	nse(other allowances)
SECY		0	0]	0
Name				
DONALD D CASSON			X Person	Business
Street			1 X II GISON	Dusiness
28288 OAKLANDS RD				
City		State Zip code	Country	
EASTON		MD 21601		
Title	Avg. Hrs devoted		tributions Exper	nse(other allowances)
TREAS	4	. 0	ol '	` 0

Part VIII Section 2 (990)-PF) - Compensatio	n of fiv	e highes	st-paid	employees
2. Compensation of five high	nest-paid employees				
Name · NONE					
Street					
City		State	Zıp code	<u> </u>	Country
Title	Avg. Hrs devoted	Compe	nsation Co	ntribution	Expense(other allowances)
Part VIII Section 3 (990) 3. Five highest-paid indepen				ontract	tors for professional services
Name NONE					Person Business
Street					
City		State	Zip code		Country
Type of service				Comper	nsation

Líne 3a, Part XV (990-PF)		tribut	ions paid	during the y	ear	
Recipient(s) paid during the year						
Name · '						
ACADEMY OF THE ARTS				Person	X Business	
Street						
106 SOUTH ST City		State	Zıp code	Country		
EASTON		MD	21601	Journal	_	
Relationship	Foundation Status					
		_				
Purpose of grant/contribution					Amount	E 000
						5,000
Name						
AUDUBON MD-DC				Person	X Business	
Street			_			
23000 WELLS PT RD		T				
City		State MD	Zip code 21612	Country		
BOZMAN Relationship	Foundation Status	_ן _ועוט	[21012			
Troid (10) (3) (p	T oundation otatus					
Purpose of grant/contribution					Amount	
						7,500
Name						
Name AVALON FOUNDATION				Person	X Business	
Street				Feison	I V IDusiness	
586 CYNWOOD DR						
City		State	Zıp code	Country		
EASTON		MD	21601			
Relationship	Foundation Status					
Purpose of grant/contribution					Amount	
	_					10,000
					· -	
Name	FOIGH				ا ا	
BLAKE BLACKSTON AMERICAN L Street	EGION			Person	X Business	
102 GLENWOOD AVE						
City		State	Zıp code	Country		
EASTON		MD	21601			
Relationship	Foundation Status					
Purpose of grant/contribution					Amount	
r dipose of grant/contribution					Amount	1,500
						1,500
Name						
BOY SCOUT TROOP 190				Person	X Business	
Street						
100 PEACHBLOSSOM LANE City		State	Zip code	Country		
EASTON		MD	21601	Country		
Relationship	Foundation Status					
Purpose of grant/contribution					Amount	0.000
						2,000
Name						
BOY SCOUT TROOP 532				Person	X Business	
Street						
100 PEACHBLOSSOM LANE		T 76: -	lə:	10.		
City EASTON		State MD	Zip code 21601	Country		
Relationship	Foundation Status	ן ועוט	14 100 1			
Purpose of grant/contribution					Amount	
						2.000

Name BOY SCOUT TROOP 741					Person	Гх	Business	
Street								
100 PEACHBLOSSOM LANE City		State			Country		······································	
EASTON Relationship	Foundation Status	MD	21601					
	Tourisation status			_			-1	
Purpose of grant/contribution					 		Amount	2,000
Name BRIGHTER CHRISTMAS FUND					Person	Γx	Business	
Street PO BOX 600								
City		State			Country			
EASTON Relationship	Foundation Status	MD	21601					
·							Amount	
Purpose of grant/contribution							Amount	5,000
Name				_	Person	ΓV	Business	
CASA Street	 				TE GISOH	^	Innounces	
1 S WASHINGTON ST SUITE 2		Ctoto	Zin ondo	-	Country			
City EASTON		State MD	Zip code 21601		Country			
Relationship	Foundation Status							
Purpose of grant/contribution			······		<u> </u>		Amount	
							<u> </u>	6,000
Name							_	
CHARACTER COUNTS Street					Person	X	Business	
319 STEWART BUILDING								
City		State			Country			
EASTON Relationship	Foundation Status	MD	21601					
Durana of grant/antahutian				-			[Amazzat	
Purpose of grant/contribution							Amount	2,500
Name								
CHESAPEAKE GIRL SCOUT CO	UNCIL				Person	X	Business	
Street 911 SNOWHILL RD								
City		State	Zıp code		Country			
SALISBURY	Foundation Status	MD	21804					
Relationship	Foundation Status							
Purpose of grant/contribution							Amount	3,500
Name						_		
CAPA Street					Person	X	Business	
PO BOX 823								
City EASTON	·	State MD	Zip code 21601		Country			
Relationship	Foundation Status	I WID	12 100 1					
Purpose of grant/contribution							Amount	
- arpose or granicontinuution					·		Amount	8,000
Name								
CUB SCOUT PACK 190					Person	ſχ	Business	

Street								
100 PEACHBLOSSOM LANE		State	Zip code		Country			
City EASTON		MD	21601		Journary			
Relationship	Foundation Status		1= 32					
Purpose of grant/contribution	_ I		•				Amount	1,500
								1,000
Name					_		-	
CUB SCOUT PACK 532					Person	_ X	Business	
Street 100 PEACHBLOSSOM LANE								
City		State	Zıp code		Country			
EASTON		MD	21601		<u> </u>			
Relationship	Foundation Status							
Purpose of grant/contribution				**			Amount	4.500
							<u> </u>	1,500
Name					70	Γ ν	70	
CUB SCOUT PACK 741 Street		· · · · · · · · · · · · · · · · · · ·			Person		Business	
100 PEACHBLOSSOM LANE								
City		State			Country			
EASTON Relationship	Foundation Status	MD	21601					
Purpose of grant/contribution							Amount	1,500
Name EASTERN SHORE CHAMBER MUS	SIC FESTIVAL				Person	Х	Business	
Street								
PO BOX 461 City		State	Zıp code		Country			
EASTON		MD	21601					
Relationship	Foundation Status							
Purpose of grant/contribution							Amount	
								5,000
Name								
EASTON CELEBRATIONS				<u> </u>	Person	X	Business	
Street						•		
40E DOVER ST		Ctoto	7in anda		Country			
City EASTON		MD	Zip code 21601		Country			
Relationship	Foundation Status		•			-		
Purpose of grant/contribution							Amount	
r dipose of grant contribution							, unount	2,000
Name EASTON DAY CARE CENTER				Г	Person	Гх	Business	
Street					1. 0.00			
11 MAGNOLIA ST		1	T=		To .			
City EASTON		State MD	Zip code 21601		Country			
Relationship	Foundation Status		12 1001		_1		······································	
Purpose of grant/contribution							Amount	
- Feet of Stationarian	· · · · · · · · · · · · · · · · · · ·	_						5,000
Name								
EASTON HIGH SCHOOL BAND					Person	Х	Business	
Street	-							
723 MECKLENBURG AVE								

City EASTON		State MD	Zip code 21601		Country			
Relationship	Foundation Status	<u>.L</u>						
Purpose of grant/contribution							Amount	2,500
Name EASTON HIGH SCHOOL CHOIR					Person	X	Business	
Street							-	
723 MECKLENBURG AVE City		State	Zıp code		Country			· -
EASTON Relationship	Foundation Status	MD	21601				- .	
							Amount	
Purpose of grant/contribution							Amount	2,500
Name EASTON PARADE					Person	Γx	Business	
Street				<u>, </u>				
40 E DOVER ST City			Zıp code		Country			
EASTON Relationship	Foundation Status	MD	21601					
	T Garidation Gtatas						TA	
Purpose of grant/contribution							Amount	1,000
Name FIRST NIGHT TALBOT, FOR ALL S	EASONS				Person	X	Business	
Street 40 E DOVER ST, 300 TALBOT ST								
City	M6		Zip code		Country			
EASTON Relationship	Foundation Status	MD	21601		<u> </u>			
Purpose of grant/contribution							Amount	
- upose of grant/contribution							Amount	4,000
Name								
HABITAT FOR HUMANITY					Person	Х	Business	
Street 350 N AURORA ST								
City EASTON		State MD	Zip code 21601		Country			
Relationship	Foundation Status	1 1410	121001		J			
Purpose of grant/contribution							Amount	
								5,000
Name HISTORIC CEMETERIES OF EAST	ON, INC			Г	Person	X	Business	_
Street								
PO BOX 92 City	· · · · · · · · · · · · · · · · · · ·		Zıp code		Country			
EASTON Relationship	Foundation Status	MD	21601					
							Amariat	
Purpose of grant/contribution							Amount	10,000
Name THE MENTAL HEALTH ASSOCIATION	ON IN TALBOT COUNT	Υ			Person	Γx	Business	
Street 611 DUTCHMANS LANE								
City			Zip code	<u>-</u>	Country			
EASTON		I MD	21601		1			_

Relationship	Foundation Status							
Purpose of grant/contribution							Amount	5,000
Name PICKERING CREEK AUDUBON CENT	ſER				Person	X	Business	
Street 11450 AUDUBON LANE								_ <u>-</u>
City EASTON		State MD	Zıp code 21601		Country			
Relationship	Foundation Status							
Purpose of grant/contribution							Amount	7,500
Name ST MARKS VILLAGE Street					Person	X	Business	
100 PEACHBLOSSOM LANE								
City EASTON		State MD	Zip code 21601		Country			
Relationship	Foundation Status							····
Purpose of grant/contribution	<u> </u>						Amount	
							<u> </u>	5,000
Name ST MICHAELS HIGH SCHOOL ORCH	ESTRA				Person	X	Business	
Street 200 SEYMOUR AVE								
City			Zıp code		Country			
ST MICHAELS Relationship	Foundation Status	MD	21601					
Purpose of grant/contribution							Amount	12,500
				_	· · · · · · · · · · · · · · · · · · ·		1	12,500
Name TALBOT COUNTY HISTORICAL SOC	IETY				Person	X	Business	
Street 25 S WASHINGTON ST								
City			Zip code		Country			
EASTON Relationship	Foundation Status	MD	21601		<u> </u>			
Purpose of grant/contribution			 -				Amount	
							Amount	5,000
Name TALBOT COUNTY FAMILY SUPPORT	CENTER				Person	X	Business	
Street 126 PORT ST								
City			Zıp code		Country			
EASTON Relationship	Foundation Status	MD	21601					
	Todination States						T	
Purpose of grant/contribution							Amount	5,000
Name TALBOT COUNTY LIBRARY FOUND	TION			<u> </u>	7 n	ΓV	7 ₀	
TALBOT COUNTY LIBRARY FOUNDA	ATIUN				Person	X	Business	
100 W DOVER ST		1 65 1	7		10			
City EASTON		State	Zıp code 21601		Country		_	
Relationship	Foundation Status							
	_1							

Purpose of grant/contribution				Amount	5,000
Name -					
TALBOT HOSPICE FOUNDATI	ON		Person	X Business	
Street					
586 CYNWOOD DR				····	
City EASTON		State Zip code MD 21601	Country		
Relationship	Foundation Status	3			
Purpose of grant/contribution				Amount	5,000
Name HUMANE SOC, TALBOT MENT	ORS, DIXON HOUSE, TRE	ED AVON PLAYERS	Person	X Business	
Street					
7894 OCEAN GATEWAY, 408N	IWASHINGTON ST, 108 N I	HIGGINS ST, OXFORD	COMMUNITY CEN	ITER	
City EASTON		State Zip code MD 21601	Country		
Relationship	Foundation Status	3			
Purpose of grant/contribution				Amount	19,000