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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department Internal Reve	of the Treasury	e able to use a copy of this i		rting requirements	2010
	lar year 2010, or tax year beginning		, and ending		
	all that apply: Initial return	Initial return of a fo	rmer public charity	Final retui	'n
	Amended return	Address chang	le	Name change	
Name of t	foundation			A Employer identification	n number
	THE BAKER/MERINE FAMI			26-001622	1
Number an	d street (or P 0 box number if mail is not delivered to street. 6618 MARYWOOD ROAD	address)	Room/suite	B Telephone number 301-469-89	997
City or to	wn, state, and ZIP code			C If exemption application is	
	BETHESDA, MD 20817-2			D 1. Foreign organization 2. Foreign organizations no check here and attach of	ns, check here
	type of organization X Section 501(c)(3) ex		•	check here and attach	computation
	ction 4947(a)(1) nonexempt charitable trust rket value of all assets at end of year J Accountii	Other taxable private foundaring method Cash	X Accrual	 E If private foundation st under section 507(b)(
	·	her (specify)	ACCIDAL	F If the foundation is in	** *
(<i>nonr</i> ▶\$	501,272. (Part I, colu		pasis.)	under section 507(b)(
	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 chantable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	53,432.		N/A	
- 1	Check if the foundation is not required to attach Sch B	,			
3	Interest on savings and temporary cash investments	5,003.	5,003.		STATEMENT 1
4	Dividends and interest from securities	5,508.	5,508.		STATEMENT 2
5a	Gross rents		····		
b	Net rental income or (loss)			· · · · · · · · · · · · · · · · · · ·	Hall 11 11 11 11 11 11 11 11 11 11 11 11 1
<u>ა</u> 6a	Net gain or (loss) from sale of assets not on line 10	760.			
w ı	Gross sales price for all assets on line 6a 45,453.		760.		
é 7	Capital gain net income (from Part IV, line 2)		700		
- 8 g	Net short-term capital gain Income modifications				
ء م	Gross sales less returns and allowances				
	Less Cost of goods sold	······································	, · · · · · · · · · · · · · · · · · · ·		
	Gross profit or (loss)				
11	Other income				
12	Total. Add lines 1 through 11	64,703.	11,271		0.
13	Compensation of officers, directors, trustees, etc	19,501.	0	•	
14	Other employee salaries and wages			-	
2 15 2 45-	Pension plans, employee benefits		<u> </u>		
<u> </u>	Legal fees Accounting fees STMT 3	1,850.	740		0.
<mark>X</mark>	Other professional fees	2,000			
E 9 17	Interest				
18 E	Taxes				
19	Depreciation and depletion				
<u>-></u> Ē 20	Occupancy				
21	Travel, conterences, and meetings				
) E 22	Printing and publications	4 960			0.
E 23	Other expenses STMT 4	4,860.	1,956	•	
erati	expenses. Add lines 13 through 23	26.211.	2,696		0.
Operating and Administrative E 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25	Contributions, gifts, grants paid	26,211. 22,565.	_,		22,565.
26	Total expenses and disbursements.				
	Add lines 24 and 25	48,776.	2,696	•	22,565.
27					
a	Excess of revenue over expenses and disbursements	15,927.	~ ===		
b	Net investment income (if negative, enter -0-)		8,575		
023501	Adjusted net income (if negative, enter -0-)	the instructions	<u>[</u>	N/A	Form 990-PF (2010)

Cash - non-interest-barring Cas	n		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year			
2 Samps and temporary cash avestments 3 Accounts recreable Lass allowance for countral accounts 4 Prefets recreable Lass allowance for doubtful accounts 5 Sand recreable 8 Recreables due from efficers, directors, trustees, and other disqualified persons 7 Cere-mass evides weather 18 Recreables due from efficers, directors, trustees, and other disqualified persons 8 Recreables due from efficers, directors, trustees, and other disqualified persons 19 Sand trecreable 10 Recreative 11 Recreative 12 Investments - comporate bloods 13 Investments - comporate bloods 13 Investments - comporate bloods 14 Recreative 15 Carlad sasetis (describe 16 Grants persons 17 Total assets (describe 18 Grants payable 19 Debrired revenue 20 Learn from these, nection, invatices, and other disqualified persons 21 Investments - comporate bloods 22 Total Highlities (add lines 17 through 25 and lines 30 and 31. 17 Recreative 18 Company 19 Debrired revenue 20 Learn from these, nection, invatices, and coher disqualified persons 21 Total Highlities (add lines 17 through 25. 22 Total Lines (describe		ari	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
Security in the content of the co		1	Cash - non-interest-bearing					
Lass allowance for doubtful accounts		2	Savings and temporary cash investments	102,334.	67,459.	67,459.		
4 Peoples receivable		3	Accounts receivable ►					
Less allowance for doubtful accounts S Grants receivable B Receivable du from officers, directors, trustees, and other degapathed persons Our create accommendate B Receivable du from officers, directors, trustees, and other degapathed persons Our create accommendate B Commendate for sals or use B Investments - Us and state government obligations Its investments - Comporate stock C Investments - Comporate boards It investments - Comporate boards STMT 6 92,083 154,120 1154,120 . 11 Investment - Inviting and sequent basis Less sconnisted exprection 12 Investments - Comporate boards 13 Investments - Comporate boards 14 Land, buildings, and equipment basis Less sconnisted exprection 15 Other assets (describe STATEMENT 7			Less allowance for doubtful accounts ▶					
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8 Reparables due from officers, directors, trustees, and other disqualified persons 7 Own was uniform reaching to Liss allowance for obustiful accounts >			Less allowance for doubtful accounts ▶	76,551.	53,432.	53,432.		
The investments of the completed by all filters is accompleted by		5	Grants receivable					
Private and to the complete of the complete		6	Receivables due from officers, directors, trustees, and other					
10 10 10 10 10 10 10 10			disqualified persons					
STATEMENT 7 1,217 1,917 1,917 15 Total assets (to be completed by all filters) 16 Grants payable and accrued expenses and complete lines 7 through 22 20 Loses them Gleen, disections that to follow SFAS 117, check here and complete lines 27 through 23 27 Capital stasks for find blainces at beginning of year - Part III, column (a), line 30 (mustage see not column Part III agree with end-of-year figure eponded in line 2 (termize) 15 Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part III, column (a), line 30 (mustages end cline) 23 Cherr increases not included in line 2 (termize) 15 Changes in Net Assets or Fund Balances 1 Total interesses on tincluded in line 2 (termize) 15 Changes in Net Assets or Fund Balances 1 Total net sasses or fund balances at beginning of year - Part III, column (a), line 30 (mustagree with end-of-year figure eponded on pror year's return) 2 Earter amount from Part I, line 27a 2 15, 927- 2 15, 927- 3 16, 92		7	Other notes and loans receivable					
Pepad expenses and deferred charges 10a Investments - US and state government obligations 1			Less allowance for doubtful accounts ▶					
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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► CHANGE IN FMV OF ASSETS 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 0.	_	31			301,272.	<u> </u>		
(must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► CHANGE IN FMV OF ASSETS 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 0.	F	art	Analysis of Changes in Net Assets or Fund E	Balances				
(must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► CHANGE IN FMV OF ASSETS 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 0.	_	Tota	I not access or fund halances at beginning of year - Part II. column (a) line	30				
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) CHANGE IN FMV OF ASSETS 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 5 0.	'			. 30		461,687.		
3 Other increases not included in line 2 (itemize) CHANGE IN FMV OF ASSETS 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 5 0.	2	•			- 			
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 0. 501.333				MV OF ASSETS				
5 Decreases not included in line 2 (itemize) > 5 0.								
501 222						0.		
				olumn (b), line 30		501,223.		

Form 990-PF (2010) THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016221 Page 2

		MERINE FAM			N,	IN	c	2(5-001 6	5221	Page 3
Part IV Capital Gains	and Losses	for Tax on Inv	estment/	Income	1 (1))						
		of property sold (e g , nmon stock, 200 shs			(b) F P D	iow ac - Purci - Dona	nase į '	c) Date a (mo , da		(d) Dat (mo , d	
<u>1a</u>											
b SEE ATTACHED	STATEM	ENT									
<u>c</u>					_	<u>·</u>					
<u>d</u>					_		-				
<u>e</u>	/f) Denree	iation allowed	(a) Coc	st or other basis	<u> </u>			(b) Ga	ın or (loss)		 -
(e) Gross sales price	1 ,, ,	lowable)		xpense of sale					(f) minus (q	<u>) </u>	
<u>a</u>					_						
<u>b</u>										_	
					-						
e 45,453.				44,69	3						760.
Complete only for assets showi		(h) and owned by th	e foundation	<u>-</u>	*		(1)	Gains (Co	ol (h) gain r	ninus	700.
(i) F M V as of 12/31/69	(j) Adju	isted basis 12/31/69	(k) Ex	cess of col (I)			col ((k), but n	ot less than from col (h	-0-) or	
	25 01	12/31/09		COT (j), it ally							
<u>a</u> b	· · · · —						· · ·				
C											
<u> </u>											760.
	•	∫ If gain, also enter i	n Part I line	7	٦						
2 Capital gain net income or (net c	Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7								<u>.</u>		760.
3 Net short-term capital gain or (lo	•	sections 1222(5) and	l (6)		۱۱						
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8					•	3			N/A		
Part V Qualification U		on 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inco	me			
(For optional use by domestic privat		· · · · · · · · · · · · · · · · · · ·									
		-,				•					
If section 4940(d)(2) applies, leave t	this part blank										
Was the foundation liable for the sec	ction 4942 tax on	the distributable amo	ount of any ye	ear in the base pei	riod?					Yes	X No
If "Yes," the foundation does not qua											
1 Enter the appropriate amount in	each column for		ctions before	making any entri				т—		(d)	
(a) Base period years	Δα.	(b) Justed qualifying disti	nhutions	Net value of no	(C) nchar	ıtable-	elise assets		Distribi	ition ratio	/o\\
Calendar year (or tax year beginn	ing in) Au	· · · · · · · · · · · · · · · · · · ·	3,650.	1401 44140 01110	IICIIUI		8,875		col (b) divi		48947
2009			1,155.				7,737				20879
2007			1,680.				5,984				23758
2006			7,223.		-		5,806				10750
2005	-		7,010.				2,985				73009
						_					
2 Total of line 1, column (d)								2		. 4	77343
3 Average distribution ratio for the	5-year base peri	od - divide the total o	n line 2 by 5,	or by the number	of ye	ars					
the foundation has been in existe	ence if less than 5	years						3		0	95469
4 Enter the net value of noncharita	hle-use assets fo	r 2010 from Part X II	ne 5					4		352	,958.
		0.0 uit //, !!							-		
5 Multiply line 4 by line 3						5		33	,697.		
6 Enter 1% of net investment inco	me (1% of Part I.	line 27b)						6			86.
		=: - /									
7 Add lines 5 and 6								7		33	<u>,783.</u>
8 Enter qualifying distributions fro	m Part XII, line 4							8		22	,565.
If line 8 is equal to or greater tha	n line 7, check th	e box in Part VI, line	1b, and comp	plete that part usin	g a 1°	% tax	rate				
See the Part VI instructions										rm 000	PF (2010)
023521 12-07-10									ro	···· 220-	r r (2010)

	1990-PF (2010) THE BAKER/MERINE FAMILY FOUNDATION, INC.			0016			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940	(e), or 4	948 -	see ir	ıstru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			•••••		
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%)	1			1	72.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b))					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0.
3	Add lines 1 and 2		3			1	72.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			1	72.
	Credits/Payments						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a						
þ	Exempt foreign organizations - tax withheld at source						
	Tax paid with application for extension of time to file (Form 8868) 6c	200.					
d	Backup withholding erroneously withheld 6d					_	
	Total credits and payments Add lines 6a through 6d		7			2	<u>00.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				28.
	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 28. Refi	ınded 🟲	11_				0.
	rt VII-A Statements Regarding Activities					V	NI -
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate of	r intervene	IN		***************************************	Yes	
	any political campaign?				1a	_	<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for de				1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	s publishe	d or				
	distributed by the foundation in connection with the activities.				4.		v
	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	0.					
	(1) On the foundation ► \$ (2) On foundation managers ► \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on found	ation					
_	managers > \$				2		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				-		
•	If "Yes," attach a detailed description of the activities.	rooration (
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of inco	ipolation, t	,,		3		х
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				4a		X
	n Did the foundation have unrelated business gross income of \$1,000 or more during the year? In it "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		- <u></u>
E E	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		- '	,	5		Х
J	If "Yes," attach the statement required by General Instruction T.				ļ .		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
Ü	By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict w 	th the state	e law				
	remain in the governing instrument?				6	Х	Ì
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
-	MD						
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or design	ate)					
-	of each state as required by General Instruction G? If "No," attach explanation	•			8b	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5) for cale	ndar				
-	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV				9	L	X
10	Did any parents become substantial contributors during the tay year? It says a sheet a sabadula liables their pages and add				10		X

	990-PF(2010) THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016	221		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A		1	
14	The books are in care of ► THE DIRECTORS Telephone no. ►301-46	9-89	997	
• •		817-		04
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N,	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	· · · · · · · · · · · · · · · · · · ·	16	103	X
	securities, or other financial account in a foreign country?	10		
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
D ₂	the foreign country▶ art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
1 0	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Ţ'''	Vas	No
10	During the year did the foundation (either directly).		. 63	110
''	(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) a disqualified person? Yes X No			
			1	
	(1) Lay component to per pay or commence and anoque more person			
	(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			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			37
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2010? Yes X No			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2010.) N/A	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		X

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be P	lequired (continu	ıed)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Yes	x X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	L Yes	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye:	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations	77 / 7	.
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A 5	b
Organizations relying on a current notice regarding disaster assistance check h				
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?		/A Yes	s L No	
If "Yes," attach the statement required by Regulations section 53.4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		चि	
a personal benefit contract?		Ye	s X No	ь Х
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		6	
If "Yes" to 6b, file Form 8870.			s X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L Ye	N/A 7	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		manaya Himbb		<u>u]</u>
Part VIII Information About Officers, Directors, Trust	ees, roundation Ma	inagers, nigniy		
1 List all officers, directors, trustees, foundation managers and their	compensation.	 -		
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
MARLA M. BAKER	DIRECTOR			
6618 MARYWOOD ROAD				
BETHESDA, MD 20817	2.00	9,751.	0.	_0.
	DIRECTOR			
6618 MARYWOOD ROAD	1			
BETHESDA, MD 20817	2.00	9,750.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evacaca
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	1			
				_
]			
	<u></u>	1		
Total number of other employees paid over \$50,000		<u> </u>		0

	Form 990-PF	(2010)
Total. Add lines 1 through 3		0.
All other program-related investments. See instructions 3		
All other arrayon related investments. Con instructions		
	_	
2		
1 N/A	_	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A	Amount	
Part IX-B Summary of Program-Related Investments	Amount	
4		
3		
2		
2		
		0.
INTA DIRECT CONTRIDUTIONS TO STREET CHARTITES SKETT	_	
1 N/A DIRECT CONTRIBUTIONS TO OTHER CHARITIES ONLY.		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	
Part IX-A Summary of Direct Charitable Activities	<u> </u>	
Total number of others receiving over \$50,000 for professional services	•	0
		
HONE		
(a) Name and address of each person paid more than \$50,000 (b) Type of service NONE	(c) Compe	nsation
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
Form 990-PF (2010) THE BAKER/MERINE FAMILY FOUNDATION, INC. 26	-0016221	Page 7

P	art X Minimum Investment Return (All domestic foundations	must complete this par	t. Foreign foun	dations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charital	ole, etc., purposes			
а	Average monthly fair market value of securities	, , pp	ľ	1a	333,167.
	Average of monthly cash balances		Ī	1b	333,167. 25,166.
	Fair market value of all other assets		Γ	10	
d	Total (add lines 1a, b, and c)		Γ	1d	358,333.
	Reduction claimed for blockage or other factors reported on lines 1a and		Ī.		
	1c (attach detailed explanation)	18	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	358,333.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amoun	t, see instructions)		4	5,375.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o	n Part V, line 4	[5	352,958.
6	Minimum investment return. Enter 5% of line 5			6	17,648.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) art XI foreign organizations check here		foundations and	d certain	
1	Minimum investment return from Part X, line 6	·		1	17,648.
2a	·	2a	172.		
b	Income tax for 2010 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b	<u> </u>		2c	<u> 172.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	17,476.
4	Recoveries of amounts treated as qualifying distributions		[4	0.
5	Add lines 3 and 4		[5	17,476.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	t XIII, line 1		7	17,476.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		ļ	1a	22,565.
b	Program-related investments - total from Part IX-B		1	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	able, etc., purposes	ļ	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)		ļ	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8,	and Part XIII, line 4		4	22,565.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estment			•
	income Enter 1% of Part I, line 27b		ļ	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		Į	6	22,565.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years	when calculating whether	the foundation q	ualifies fo	r the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				17,476.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2010	***************************************	U .		••••••••
a From 2005 5, 491.				
b From 2006 15, 187.				
c From 2007 19,121.				
d From 2008 18,408.				
a From 2009				
f Total of lines 3a through e	58,207.			
4 Qualifying distributions for 2010 from	20,23.3	······		
Part XII, line 4 ▶\$ 22,565.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		······································	· · · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		····	[1444444444444444444444444444444444444	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		######################################	}	17,476.
e Remaining amount distributed out of corpus	5,089.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as Indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	63,296.			
b Prior years' undistributed income Subtract	,			
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line			0	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2011		***************************************	**************************************	V •
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2005	5,491.			
not applied on line 5 or line 7	3,471.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	57,805.			
10 Analysis of line 9	3,,003.			
a Excess from 2006 15,187.				
b Excess from 2007 19, 121.				
c Excess from 2008 18,408.				
d Excess from 2009				
e Excess from 2010 5,089.				
<u> </u>	lane, con-			Form 990-PF (2010)

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Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described	ın section	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	·	
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a	···				
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					1
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					,
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(8)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			****		
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see the	instructions.)		• •	
1 Information Regarding Foundation	_				
List any managers of the foundation whyear (but only if they have contributed in the	no have contributed more		tributions received by th	e foundation before the cl	ose of any tax
NONE					
b List any managers of the foundation whether entity) of which the foundation had			(or an equally large port	ion of the ownership of a	partnership or
NONE					
2 Information Regarding Contribut Check here ► X If the foundation of	only makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc	(see instructions) to indi	viduals or organizations	under other conditions, o	complete items 2a, b, c, ar	nd d
a The name, address, and telephone num	nber of the person to who	m applications should be	e addressed		
b The form in which applications should	be submitted and informa	ition and materials they s	hould include		
c Any submission deadlines					
d Any motivations or limitations or assessed	la quah as bu sasarashis	al arang shortable felds	kinds of institutions of	other factors	
d Any restrictions or limitations on award	is, such as by geographic	ai aivas, viiaiilavie iielus	, หมานอ บา มาอนเนนเบมอ, 01	outer factors	

023601 12-07-10

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated	business income	Exclude	d by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue	code		code	Amount		
3	-			 		
0	-					
C	-	<u> </u>				
0		. <u></u>				
1	-					
g Fees and contracts from government agencies	-					
2 Membership dues and assessments						
3 Interest on savings and temporary cash			- -			
Investments			14	5,003.		
4 Dividends and interest from securities			14	5,003. 5,508.		
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	760.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a	_					
b	_					
C	_				·	
d	-					
	_		- - -	11 271	0	
12 Subtotal Add columns (b), (d), and (e)	<u> </u>		0.	11,271.	11,271	
13 Total. Add line 12, columns (b), (d), and (e)				13	11,2/1	
(See worksheet in line 13 instructions to verify calculations)					

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

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) 												
			ZATION							RIBU	TIONS T	O OTHE	R
												CHARI	
		CVITIES							-				
	ļ												
	<u> </u>												- <u></u>
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					····								
													
			 		<u>.</u>	_				·			
	 												
	 						···						
	1												

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

1	Did the org	ganization directly or indire	ectly engage in any o	f the following	g with any other organizatio	n described in sect	ion 501(c) of		Yes	No
	the Code (other than section 501(c)	(3) organizations) or	in section 52	7, relating to political organi	zations?				
a	Transfers 1	from the reporting founda	ition to a noncharitab	le exempt org	janization of:					
	(1) Cash							1a(1)		<u>X</u>
	(2) Other	assets						1a(2)		Х
þ	Other trans									
	• •	of assets to a noncharitat	• •					1b(1)		<u>X</u>
		ases of assets from a nor		rganization				1b(2)		X
		l of facilities, equipment, o	or other assets					1b(3)		X
		oursement arrangements						1b(4)		X
		or loan guarantees						1b(5)		X
_		rmance of services or mei		-				1b(6)	<u> </u>	X
	•	facilities, equipment, mai	• .		pioyees dule: Column (b) should alw	vave chaw the fair i	market value of the on		ate	
u		•	· · · · · ·	-	ed less than fair market valu	-			1013,	
) the value of the goods, (oo lood than lan market tale	o iii airy tianouotioi	. o. og aago	,		
a)ı		(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions	s, and sharing ar	rangeme	ents
	İ	·		N/A						
			-							
		•		-						
								·		
							<u> </u>			
										
2a	Is the four	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organiz	zations described				
		501(c) of the Code (other	·					Yes	X	☐ No
b	If "Yes," co	omplete the following sch	edule							
		(a) Name of org	anization		(b) Type of organization		(c) Description of rela	ationship		
		N/A								
			-							
					-					
	Unde	er penalties of periury. I declare	e that I have examined th	is return, includ	ing accompanying schedules and	d statements, and to ti	he best of my knowledge	and belief, it is tr	ue, com	ect,
S					ased on all information of which p					
	ere	maila	mB	eku) 11/14	/// 🛌				
		Signature of officer or tru	ıstee		Date	> -	Title			
	<u> </u>	Print/Type preparer's na		Preparer's s		Date		PTIN		
				·D.		17/10/11	self- employed			
Pá	aid	BRUCE W. R	OBINETTE (1						
Pı	eparer	Firm's name ► BRU	CE W. ROB	INETTE	, CPA		Firm's EIN ►			_
U	se Only									
		Firm's address ► 44								
		HE	RNDON, VA	20170			Phone no 70	3-834-		
								Form 99 0)-PF	(2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Name of the organization

Employer identification number

26-0016221 THE BAKER/MERINE FAMILY FOUNDATION, 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 501(c)(3) exempt private foundation Form 990-PF 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** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively \$ religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

	1	1
Page	⊥ of	l of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2010	Schedule B	(Form 990,	990-EZ, o	r 990-PF)	(2010
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Name of organization

Employer Identification number

THE BAKER/MERINE FAMILY FOUNDATION, INC.

26-0016221

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	#2 6618 MARYWOOD ROAD BETHESDA, MD 208172204	\$53,432.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2010

Name of organization

Employer identification number

THE BAKER/MERINE FAMILY FOUNDATION, INC.

26-0016221

Part II	Noncash Property (see Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (2)

	90, 990-EZ, or 990-PF) (2010)		Page of of Part II
lame of organiz	ation		Employer identification number
יאד אמעז	ER/MERINE FAMILY FOUND	ATTON INC	26-0016221
Part III	Exclusively religious, charitable, etc., inc	lividual contributions to sectio columns (a) through (e) and the is, charitable, etc , contributions	n 501(c)(7), (8), or (10) organizations aggregating following line entry. For organizations completing of
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I —			
		(e) Transfer of gift	
	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee
(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	d ZIP + 4	Relationship of transferor to transferee
(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	d ZIP + 4	Relationship of transferor to transferee
-			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
	<u> </u>	(e) Transfer of gift	1
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee

CONTINUATION FOR 990-PF, PART IV THE BAKER/MERINE FAMILY FOUNDATION, 26-0016221 INC. PAGE Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo , day, yr.) 2-story brick warehouse, or common stock, 200 shs MLC Co (mo, day, yr) 06/05/0903/23/10 1a 10 ABERCROMBIE & FITCH b 10000 FFCB P 11/16/09/10/01/10 c 10000 FHLB P 02/19/1009/10/10 12/22/0908/05/10 10000 FHLB P e 40 12/08/0603/23/10 ABERCROMBIE & FITCH P 01/23/0809/10/10 MCDONALD'S CORP P 02/05/0812/01/10 25 PACCAR INC P h 10000 WALT DISNEY CO 03/10/0910/26/10 ı m n 0 (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 444. 278. 166. а 0. 10,000. 10,000. b 10,000. 10,000. C Ō. 10,000. 10,000. d -925. 1,775. 2,700. е 232. 749. 517. 324. 1,403. 1,079. <u>g</u> 10,119. 963. 11,082. h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col (h) gain over col (k), (i) Adjusted basis (k) Excess of col (i) but not less than "-0-") (I) FMV as of 12/31/69 as of 12/31/69 over col (j), if any 166. 0. b Ō. 0. d -925. е 232. 324. g 963. h m 0

 $\{\begin{array}{c} \mbox{If gain, also enter in Part I, line 7} \\ \mbox{If (loss), enter "-0-" in Part I, line 7} \end{array}\}$

2

760.

N/A

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

2 Capital gain net income or (net capital loss)

FORM 990-PF INTEREST ON SAVI	NGS AND 1	EMPORARY C	ASH IN	IVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
CHEVY CHASE TRUST COMPANY					5,0	03.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLUMN A			5,0	03.
FORM 990-PF DIVIDEND	OS AND INT	TEREST FROM	SECUI	RITIES	STATEMENT	2
SOURCE	GRO	OSS AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
CHEVY CHASE TRUST COMPANY		5,508.		0.	5,5	08.
TOTAL TO FM 990-PF, PART I, I	LN 4	5,508.		0.	5,5	08.
FORM 990-PF	ACCOU	NTING FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOK		EST-	(C) ADJUSTED NET INCOM		
TAX RETURN PREPARATION	1,85	50.	740.			0.
TO FORM 990-PF, PG 1, LN 16B	1,85	50.	740.			0.
FORM 990-PF	ОТНЕ	R EXPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOM		/EST-	(C) ADJUSTED NET INCOM		
INVESTMENT FEES ADMINISTRATIVE EXPENSES	1,95		,956. 0.		<u> </u>	0.
TO FORM 990-PF, PG 1, LN 23	4,80	50.	,956.			0.

FORM 990-PF C	CORPORATE STOCK		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
EQUITIES-STMT ATTACHED		224,344.	224,34	14.
TOTAL TO FORM 990-PF, PART II, LI	INE 10B	224,344.	224,34	44.
FORM 990-PF C	CORPORATE BONDS		STATEMENT	6
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
INTERMEDIATE BONDS-STMT ATTACHED		154,120.	154,12	20.
TOTAL TO FORM 990-PF, PART II, LI	INE 10C	154,120.	154,1	20.
FORM 990-PF	OTHER ASSETS		STATEMENT	7
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE	Г
ACCRUED INTEREST & DIVIDENDS	1,217.	1,917.	1,9	17.
TO FORM 990-PF, PART II, LINE 15	1,217.	1,917.	1,9	17.

FORM 990-PF

STATEMENT

PAID	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
DISTRICT OF COLUMBIA ARTS CENTER 2438 18 ST NW WASHINGTON, DC 20009	N/A GENERAL FUND	PUBLIC	400.
MONTGOMERY COUNTY HUMANE SOCIETY 14645 ROTHGEB DRIVE ROCKVILLE, MD 20850		PUBLIC	1,000.
MOST VALUABLE KIDS 11122 STEPHALEE LANE ROCKVILLE, MD 20852	N/A GENERAL FUND	PUBLIC	770.
NARAL PRO-CHOICE AMERICA FOUNDATION 1156 15TH STREET, NW SUITE 700 WASHINGTON, DC 20005	n/A GENERAL FUND	PUBLIC	6,000.
SHINE GLOBAL, INC 225 MIDLAND AVENUE MONTCLAIR, NJ 07042	N/A GENERAL FUND	PUBLIC	6,150.
ROUND HOUSE THEATER P.O. BOX 30688 BETHESDA, MD 20824	N/A GENERAL FUND	PUBLIC	1,000.
THE KENNEDY CENTER 2700 F STREET NW WASHINGTON, DC 20566	N/A GENERAL FUND	PUBLIC	6,000.
JEWISH COMMUNITY CENTER OF GREATER WASHINGTON 6125 MONTROSE ROAD ROCKVILLE, MD 20852	N/A GENERAL FUND	PUBLIC	720.

GRANTS AND CONTRIBUTIONS

. THE BAKER/MERINE FAMILY FOUNDAT	CION, INC.		26-0016221
NATIONAL MS SOCIETY 1800 M STRET NW WASHINGTON, DC 20006	N/A GENERAL FUND	PUBLIC	300.
INTERNATIONAL MYELOMA FOUNDATION 12650 RIVERSIDE DRIVE, SUITE 206 NORTH HOLLYWOOD, CA 91607	N/A GENERAL FUND	PUBLIC	225.
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A		22,565.

CLIENT APPRAISAL Heritage Investors Management Corporation 1165 - BAKERMERINE FAM FOUNDAT December 31, 2010

		Purchase	Purchase Information	Curr	Current Market		Indicated	
Ousptite		Calt	Original	Unit	Total	% Market	Annual	Current
Cash	Security Description	Cost	Cost	Market	Market Value	Value	Income	Yield %
67,459.3300	SEI DAILY INCOME TRUST GOVERNMENT II FUND-B	\$ 1.00	67,459.33	\$ 1.00	\$ 67,459.33	15.06%	\$ 6.75	0.01%
lotal cash			67,459.33		67,459.33	15.06%		0.01%
Equity And Related	70							
Consumer Discretionary	retionary							
100.000	ABERCROMBIE & FITCH CO	27.84	2,784,00	57.63	5 763 00	4 20%	00 02	4 240
200.0000	HARLEY DAVIDSON INC	35.07	7.014.84	34 67	6 934 00	1.53%	00.0	1.5.1
150.0000	HOME DEPOT INC	28.13	4.219.90	35.06	5 259 00	1.32%	141.75	2 70%
150.0000	LIZ CLAIBORNE INC	36.33	5,449.88	7.16	1,074.00	0.24%	0.00	0.00%
70.0000	MCDONALDS CORP	51.66	3,616.36	76.76	5,373.20	1.20%	170.80	3.18%
lotal Consumer Discretionary	r Discretionary		23,084.98		24,403.20	5.45%	462.55	1.90%
150.0000	ALTRIA GROUP INC	14.42	2,163.01	24.62	3,693.00	0.82%	228.00	6.17%
80.0000	COCACOLACO	42.04	3,363.20	65.77	5,261.60	1.17%	140.80	2.68%
150.0000	CONSTELLATION BRANDS INC CL A	28.44	4,266.50	22.15	3,322.50	0.74%	0.00	0.00%
75.0000	PEPSICO INC	61.48	4,610.91	65.33	4,899.75	1.09%	144.00	2.94%
75.0000	PHILIP MORHIS INTL INC	22.51	1,688.03	58.53	4,389.75	0.98%	192.00	4.37%
100.0000	WAL MAH! STOHES INC	52.91	5,290.51	53.93	5,393.00	1.20%	121.00	2.24%
lotal Consumer Staples	Staples		21,382.16		26,959.60	6.02%	825.80	3.07%
Energy					•			
000000	APACHE CORP	63.32	3,799.33	119.23	7.153.80	1.60%	36.00	0.50%
75.0000	CHEVRON CORP	43.05	3,228.78	91.25	6,843.75	1.53%	216.00	3.16%
100.0000	CONOCOPHILLIPS	57.42	5,741.99	68.10	6,810.00	1.52%	220.00	3.23%
75.0000	SCHLUMBERGER LTD	64.39	4,829.02	83.50	6,262.50	1.40%	63.00	1.01%
lotal Energy Financiate			17,599.12		27,070.05	6.04%	535.00	1.98%
. 140.0000	AMERICAN EXPRESS CO	97.44	0000	9		,		
000000		14.70	5,237.24	42.92	08.800,0	1.34%	100.80	1.68%
125,000	DMODGAN CHAST & CO	37.72	2,640.40	4.73	331.10	0.07%	0.00	0.00%
20000	MODOWN CHANE & CO	37.37	4,670.99	42.42	5,302.50	1.18%	25.00	0.47%
200.000	MODEN OF ANCEY	34.88	6,975.46	27.21	5,442.00	1.22%	40.00	0.74%
200.0000	SEM CORP	29.04	5,808.97	12.59	2,518.00	0.56%	00.0	0.00%

Page 5 of 21

Heritage Investors Management Corporation 1165 - BAKERINE FAM FOUNDAT December 31, 2010 **CLIENT APPRAISAL**

		Purchase	Purchase Information	Curre	Current Market		Indicated	
Quantity	Security Description	Contract	Original	Unit	Total	% Market	Annual	Current
Total Fire and	Touching Carrier	1800	1802	Market	Market value	value	псоше	Yield %
Health Care			25,333.06		19,602.40	4.38%	165.80	0.85%
80.000	AMGEN INC	48.95	3.916.00	54.90	4 392 00	0 98%	0	%000
100.0000	BAXTER INTERNATIONAL INC	48.17	4.816.78	50.62	5.062.00	1 13%	124 00	2.65%
75.0000	JOHNSON & JOHNSON	54.62	4.096.50	61.85	4 638 75	1 04%	162.00	3.40%
150.0000	MEDTRONIC INC	34.04	5.106.34	37.09	5.563.50	1.24%	135.00	2.43%
225.0000	PFIZER INC	27.56	6,201.51	17.51	3,939.75	0.88%	180.00	4.57%
75.0000	TEVA PHARMACEUTICAL SP ADR	43.67	3,275.62	52.13	3,909.75	0.87%	50.03	1.28%
Total Health Care		I	27,412.75	•	27,505.75	6.14%	651.03	2.37%
Industrials					•			
	зм со	78.82	3,941.00	86.30	4,315.00	0.96%	105.00	2.43%
100.0000	BOEING CO	63.90	6,389.59	65.26	6,526.00	1.46%	168.00	2.57%
150.0000	GENERAL ELECTRIC CO	27.06	4,058.73	18.29	2,743.50	0.61%	84.00	3.06%
125.0000	PACCAR INC	37.40	4,674.38	57.34	7,167.50	1.60%	00.00	0.84%
80.0000	UNITED TECHNOLOGIES CORP	42.00	3,360.24	78.72	6,297.60	1.41%	136.00	2.16%
Total Industrials		•	22,423.94	•	27.049.60	6.04%	553.00	2.05%
Information Technology	nology							
100.0000	AUTOMATIC DATA PROCESSING INC	42.43	4,242.60	46.28	4,628.00	1.03%	144.00	3.11%
	CISCO SYSTEMS INC	23.25	4,650.34	20.23	4,046.00	0.90%	0.00	0.00%
300.0000	EMCCORP	15.42	4,626.75	22.90	6,870.00	1.53%	0.00	0.00%
	HEWLETT PACKARD CO	45.56	5,695.19	42.10	5,262.50	1.18%	40.00	0.76%
	INTEL CORP	15.40	3,080.50	21.03	4,206.00	0.94%	126.00	3.00%
	INTERNATIONAL BUSINESS MACHINES	91.06	3,642.40	146.76	5,870.40	1.31%	104.00	1.77%
	MASTERCARD INC	168.21	4,205.20	224.11	5,602.75	1.25%	15.00	0.27%
200.0000	MICROSOFT CORP	30.13	6,025.86	27.91	5,582.00	1.25%	128.00	2.29%
Total Information Technology	Technology	l	36,168,84	•	42.067.65	9.39%	557.00	1.33%
Materials			•					
	AIR PRODUCTS & CHEMICALS INC	51.84	3,369.70	90.95	5,911.75	1.32%	127.40	2.16%
	ALCOA INC	14.96	4,488.30	15.39	4,617.00	1.03%	36.00	0.78%
	BROWN FORMAN CORP CL B	51.90	3,217.87	69.62	4,316.44	0.96%	79.36	1.84%
	MARTIN MARIETTA MATERIALS INC	108.97	5,448.51	92.24	4,612.00	1.03%	80.00	1.73%
Total Materials			16,524.38		19,457.19	4.34%	322.76	1.66%

Heritage Investors Management Corporation 1165 - BAKERMERINE FAM FOUNDAT December 31, 2010 **CLIENT APPRAISAL**

		Purchase	Purchase Information	Curre	Current Market		Indicated	
		Onit	Original	Unit	Total	% Market	Annual	Current
Cuanny Other Francis	Security Description	Cost	Cost	Market	Market Value	Value	Income	Yield %
Ouner Equales 100.0000 IS	ISHARES TRIMSCI FAFE IDX	1						
ŧ		70.00	60:755,09	58.22	5,822.00	1.30%	139.70	2.40%
Telecommunication Services	Services		6,557.09		5,822.00	1.30%	139.70	2.40%
150.0000 AT&T INC	RAT INC	21.26	3,189.19	29.38	4,407.00	0.98%	258.00	5.85%
Total Equip, And Deleted	cation Services	J	3,189.19		4,407.00	0.98%	258.00	5.85%
iotal Equity Autu neiat			199,675.51		224,344.44	20.09%	4,470.64	1.99%
Fixed Income And Related	ıted							
Intermediate								
	GENERAL ELECTRIC CO 5.250 12/06/2017	99.80	9.980.00	108.01	10.800.94	2 41%	525 00	4 86%
	VERIZON COMMUNICATIONS 5.500 02/15/2018	99.95	9,994.50	109.89	10,989,42	2.45%	550.00	5.00%
	FPL GHOUP CAP INC 6.000 03/01/2019	103.44	10,343.80	110.84	11,083.66	2.47%	00.009	.5.41%
10,000,0000 10,000,000	DU PUNI E I DE NEMOURS 5.750 03/15/2019	97.00	9,700.00	113.38	11,338.45	2.53%	575.00	5.07%
	OFFICIAL POSTER AUTH REV BABS OFF 4.58 10/01/2019	99.85	9,984.70	99.18	9,918.30	2.21%	458.00	4.62%
	PODTI AND OFF LIPEAS PRINCE OF A 125 03/13/2020	99.50	9,950.00	104.30	10,429.85	2.33%	412.50	3.95%
	PONICAND ONE UNBAN HENEWA OR 5.374 06/15/2020	103.79	10,379.10	98.58	9,858.20	2.20%	537.40	5.45%
	CECIL CIVIT MID GO BAB MID 5,000 08/01/2024	100.65	10,064.70	102.34	10,234.30	2.29%	500.00	4.89%
Long Term			80,396.80		84,653.12	18.90%	4,157.90	4.91%
00 8	NEW YORK BUILD AMERICA BONDS NY 5.199 12/01/2022	97.60	9,759.90	97.21	9,720.50	2.17%	519.90	5.35%
10,000,0000 PE		105.55	10,554.90	112.16	11,215.82	2.50%	522.00	4.65%
	NEW TORK STORBAN DEV COR BAB NY 5.510 03/15/2025	97.11	9,711.30	98.44	9,844.10	2.20%	551.00	2.60%
	SACHAMENTO MET FIRE HEV CA 5.320 05/15/2025	100.00	10,000.00	93.04	9,304.30	2.08%	532.00	5.72%
	MEDINA OLIO PAR GO NY 5.14/ 10/01/2025	100.50	10,050.00	93.95	9,395.20	2.10%	514.70	5.48%
-	MEDIIVA ORIO BAB HEV OH 5.625 12/01/2025	100.00 I	10,000.00	99.74	9,974.40	2.23%	562.50	5.64%
Short Term			60,076.10		59,454.32	13.28%	3,202.10	2.39%
10,000.0000 FE	FEDERAL HOME LOAN BANKS 4.480 01/14/2020	99.84	9,984.00	100.12	10,012.22	2.24%	448.00	4.47%
Total Fived Income And Belated	Defete	l	9,984.00	ľ	10,012.22	2.24%	448.00	4.47%
			150,456.90		154,119.66	34.41%	7,808.00	2.06%

Form 8868 (Rev. 1-2011)					Page 2			
If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II and check this box	κ		▼ X			
Note. Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously filed I	Form 8	868.				
 If you are filing for an Automatic 3-Month Extension, complet 								
Part II Additional (Not Automatic) 3-Month Ex	xtensio	n of Time. Only file the original (no co	pies n	eeded).				
or Name of exempt organization Employer identification number								
THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016221								
Number, street, and room or suite no. If a P.O. box, see instructions. due date for C/O BRUCE W. ROBINETTE, 449-A CARLISLE DRIVE								
filing your								
return See City, town or post office, state, and ZIP code. For a foinstructions HERNDON, VA 20170	ereign add	ress, see instructions.						
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4			
Application	Return	Application			Return			
ls For	Code	Is For			Code			
Form 990	01							
Form 990-BL	02	Form 1041-A			08			
Form 990-EZ	03	Form 4720			09			
Form 990-PF	04	Form 5227			10			
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990-T (trust other than above)	06	Form 8870			12			
STOP! Do not complete Part II if you were not already granted	an auton	natic 3-month extension on a previous	sly file	d Form 8868.				
THE DIRECTORS	00 A D	DEMILECUA NO 200	17	2204				
• The books are in the care of \triangleright 6618 MARYWOOD F	ROAD,		1/-	2204	<u> </u>			
Telephone No. ► 301-469-8997		FAX No. ►		 ,	_			
If the organization does not have an office or place of business			f	itha whala araw	e shook this			
If this is for a Group Return, enter the organization's four digit (If this is for a Group Return, enter the organization's four digit (If this is for a Group Return, enter the organization's four digit (If this is for a Group Return, enter the organization's four digit (If this is for a Group Return, enter the organization's four digit (If this is for a Group Return, enter the organization's four digit (If this is for a Group Return, enter the organization) is four digit (If this is for a Group Return, enter the organization) is four digit (If this is for a Group Return, enter the organization) is four digit (If this is for a Group Return, enter the organization) is four digit (If this is for a Group Return, enter the organization) is four digit (If this is for a Group Return) is found to the following the organization is found to the following the following the organization is found to the following th		emption Number (GEN) if this ich a list with the names and EINs of all						
box . If it is for part of the group, check this box	•		nemo	ers the extension	t is joi.			
4 I request an additional 3-month extension of time until NOVEMBER 15, 2011.								
5 For calendar year 2010, or other tax year beginning, and ending 6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return								
6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period								
7 State in detail why you need the extension								
ADDITIONAL TIME IS REQUIRED TO	OBT	AIN FINANCIAL INFORM	ATI	ON AND M	ONTHLY			
		TE AND ACCURATE RETU		-				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, 6	or 6069, e	enter the tentative tax, less any						
nonrefundable credits. See instructions.			8a	\$	200.			
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated						
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid								
previously with Form 8868.			8b	\$	200.			
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using								
EFTPS (Electronic Federal Tax Payment System). See instru			8c_	\$	0.			
<u> </u>		nd Verification			_			
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form								
Signature ► Title ►	ature ▶ Title ▶			>				