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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

2010

Department of the Treasury Internal Revenue Service

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

| FOR Ca | ijenda | r year 2010, or ta | x year beginning | , 2010 | l, and ending | | |
|-----------------------------|----------|---------------------------------------------------|-----------------------------------------------|-----------------------------------------|---------------------------------------|------------------------------------------------------------|-------------------------------|
| G C | ieck a | II that apply | Initial return 🔲 In | tial Return of a former p | ublic charity | Fin | al return |
| | | | Amended return | Address | change Name | e change | |
| Name | of found | ation | | | 1 | Employer identification nu | mber |
| John | ı Ed | ward Fowle | r Memorial Fou | ındation | | 51-6019469 | |
| | | • | per if mail is not delivered to | street address) | Room/suite E | - , , | • |
| 4341 City or | | st-West Hi | ghway | State | ZIP code | (301) 654-27 | |
| | | _ | | | | F F F | |
| BET! | _ | | V C+ F(| MD | | 1 Foreign organizations, che | |
| п | | type of organizat | nonexempt charitable | 01(c)(3) exempt private f | oundation private foundation | 2 Foreign organizations mee here and attach computation | on Property test, check |
| | | rket value of all asset | | counting method. X C | | E If private foundation status | |
| • | (from P | art II, column (c), line | 16) | Other (specify) | _ | under section 507(b)(1)(A) | |
| • | \$ | 33,032, | ,630. (Part | I, column (d) must be or | | F If the foundation is in a 60 under section 507(b)(1)(B) | |
| Part | IA | nalysis of Re | | (a) Revenue and | (b) Net investment | | (d) Disbursements |
| | E | xpenses (The | total of amounts in | expenses per books | income | income | for charitable |
| | | | and (d) may not neces nounts in column (a) | | | | purposes (cash basis only) |
| | | see the instruction | ns)) | | | | |
| | 1 | | grants, etc, received (att sch) | | * ' ' ' ' ' | * ** ** * | ', |
| | 2 | | oundn is not req to att Sch B | | | | |
| | 3 | cash investmen | ings and temporary | 40. | 41 | | 3 77 . 65 |
| | 4 | Dividends and inter | rest from securities | 243,085. | 243,085 | | |
| | | a Gross rents | | 1,291,547. | 1,291,547 | 7. | * * |
| _ | | b Net rental income or (loss) | | | | | ٥ |
| R E V | | a Net gain/(loss) from b Gross sales price for | sale of assets not on line 10 | -113,019. | 7 | * | |
| ⊽ | _ | assets on line 6a | | • * * * * | | , | |
| Ē | 8 | Net short-term | ome (from Part IV, line 2) | A A A A | * * * . |). | * \ % |
| U | 9 | Income modific | | | , , , , , , , , , , , , , , , , , , , | | |
| Ε | 10: | a Gross sales less returns and | | ₹ * ; * * | , · · | | Ů, |
| | | allowances h Less Cost of | | | | *************************************** | |
| | | goods sold | | * * * | | | |
| | | c Gross profit/(loss) | • • | | W | , | · / 81 |
| | '' | Other income (a | attach schedule) | | | | |
| | 12 | Total. Add lines | s 1 through 11 | 1,421,653. | 1,534,673 | 3. | 4 3 |
| | 13 | | ficers, directors, trustees, etc | 165,000. | 68,500 | | 96,500. |
| | 14 | Other employee sala | aries and wages | | | | |
| | | | employee benefits | 20,374. | 10,187 | | 10,187. |
| A | 16 | a Legatifees (attach)s | tan star L-16a Stm | 45,960. | 11,490 | | 34,470. |
| Ñ | ין וי | b Accounting Yees Cat | tach schill 1-16b Stm | 5,500. | 1,375 | | 4,125. |
| 0 N | | putner prof fees (att | 1261 Stm 1262 Stm 1262 Stm 1261 Q | 84,176. | 33,101 | L • | 51,075. |
| O IS P S R A A T T | 196 | nteresty 1 6 | 2011 ee instr) See Spe 18 Stra | nt 26,276. | 12,414 | | 0. |
| RAA | 19 | _ Depreciation (a | ttach | 20,270. | 12,111 | | 1 |
| ŢŢ | | soft) and deplet | ion T−19 Stmi | | | | |
| -NG AND | 1 - | | | 47,802. | 9,322 | 2. | 38,480. |
| CA E | 21 | Printing and pu | nces, and meetings | 312. 1,167. | 427 | 7 | 156. 740. |
| C N X | 23 | | s (attach schedule) | 1,107. | 12, | · · · | 740. |
| e E | | | ffice expense | 4,989. | 1,682 | 2. | 3,307. |
| | | | and administrative | | | | |
| ≥ § | 25 | | lines 13 through 23 | 404,275. 1,215,000. | 148,498 | 5. | 239,040. |
| = | 25 | Contributions, gifts, | | 1,213,000. | | | 1,215,000. |
| <u>C</u> . | 26 | Add lines 24 an | s and disbursements. nd 25 | 1,619,275. | 148,498 | 3. | 1,454,040. |
| | 27 | Subtract line 26 | from line 12: | , , , , , , , , , , , , , , , , , , , , | | | |
| Z | | Excess of reve | nue over expenses | 107 (00 | | | |
| SCAZZANA UAS | | and disbursem | pme (if negative, enter -0-) | -197,622. | 1,386,175 | , | |
| Ť, | | | e (if negative, enter -0-) | | 1,300,173 | · · · · · · · · · · · · · · · · · · · | |
| | <u>'</u> | | w (" negotive, cliter 'U') | 1 | 1 | J | L |

3 914

| 1a | | | | | | | |
|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| b | (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) (b) How a P — Pur D — Dor | | | | | | (d) Date sold (month, day, year) |
| | 1a.RBC - WENTWORTH HAUSER & VIOLICH P | | | | | | various |
| С | b RBC - LATEEF MANAGEMENT ASSOCIATES P | | | | | | various |
| | c RBC - TRADEWINDS GLOBAL INVESTMENT MGMT P | | | | | | various |
| d RBC - SNOW CAPITAL MGMT | | | | | | various | various |
| e See Columns (a) thru (d) | | | | | | | |
| (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale | | | | | · · · | (h) Gain or (e) plus (f) m | |
| а | 10,500. | | 1: | 5,202. | | | -4,702. |
| b | 282,566. | | 285 | 5,168. | | | -2,602. |
| С | 138,738. | | 12: | 1,337. | | | 17,401. |
| d | 285,078. | | 30: | 1,920. | | | -16,842. |
| ее | See Columns (e) thru (h) | | 1,983 | 3,869. | | | -106,274. |
| | Complete only for assets shown | ng gain in column (h) and owned by | the foundation on 12/31/69 | | | (I) Gains (Colu | ımn (h) |
| | (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column over column (j), if an | | | ain minus column (k an -0-) or Losses (fr | (), but not less |
| a | | | | | | ·= ·- ·- ·- | -4,702. |
| <u>b</u> | | | | | | | -2,602. |
| c | | 0. | | 0. | | | 17,401. |
| d | | | | | | | -16,842. |
| e | See Columns (i) thru (l) | 0. | | 0. | | | -106,274. |
| 2 | Capital gain net income or (net | capital loss) — If gain, also | enter in Part I, line 7 ter -0- in Part I, line 7 | | 2 | | -113,019. |
| 3 | Net short-term capital gain or (I | oss) as defined in sections 1222(5) | and (6) | | | | |
| | If gain, also enter in Part I, line in Part I, line 8 | 8, column (c) (see the instructions) | If (loss), enter -0- | | 3 | | |
| Par | Qualification Under | Section 4940(e) for Reduce | d Tax on Net Investme | ent Inco | me | | |
| (For | optional use by domestic private | foundations subject to the section 4 | 940(a) tax on net investmer | nt income ` |) | | |
| Was | | is part blank ion 4942 tax on the distributable am | | | | | |
| | | | | period? | | Yes | X No |
| | | fy under section 4940(e). Do not co | mplete this part | | 25 | Yes | X No |
| | (a) Base period years Calendar year (or tax year beginning in) | | mplete this part | any entrie | | (d) Distribution umn (b) divided | ı ratıo |
| | (a) Base period years Calendar year (or tax year beginning in) | fy under section 4940(e). Do not content of each column for each year, see the (b) Adjusted qualifying distributions | mplete this part instructions before making (c) Net value of noncharitable-use ass | any entrie | | (d) Distribution | ratio by column (c)) |
| | (a) Base period years Calendar year (or tax year beginning in) 2009 | fy under section 4940(e). Do not content each column for each year, see the (b) Adjusted qualifying distributions 1,486,714. | mplete this part e instructions before making (c) Net value of noncharitable use ass | any entrie | | (d) Distribution | ratio by column (c)) 0.051025 |
| - | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 | fy under section 4940(e). Do not content each column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. | mplete this part e instructions before making (c) Net value of noncharitable use ass 29,13 | any entriesets 7,091. | | (d) Distribution | 0.051025 0.044558 |
| - | (a) Base period years Calendar year (or tax year beginning in) 2009 | fy under section 4940(e). Do not contain each column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. | mplete this part e instructions before making (c) Net value of noncharitable use ass 29, 13 31, 645 33, 43 | any entries sets 7,091. 5,087. | | (d) Distribution | 0.051025 0.044558 0.041101 |
| - | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 | fy under section 4940(e). Do not contain each column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. | mplete this part e instructions before making (c) Net value of noncharitable use ass 29,13 31,645 33,433 24,684 | any entries 7,091. 5,087. 1,821. 1,994. | | (d) Distribution | 0.051025 0.044558 0.041101 0.045205 |
| | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 | fy under section 4940(e). Do not contain each column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. | mplete this part e instructions before making (c) Net value of noncharitable use ass 29, 13 31, 645 33, 43 | any entries 7,091. 5,087. 1,821. 1,994. | | (d) Distribution | 0.051025 0.044558 0.041101 |
| | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 | fy under section 4940(e). Do not contain each column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. | mplete this part e instructions before making (c) Net value of noncharitable use ass 29,13 31,645 33,433 24,684 | any entries 7,091. 5,087. 1,821. 1,994. | (colu | (d) Distribution | 0.051025 0.044558 0.041101 0.045205 0.045382 |
| | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the | fy under section 4940(e). Do not conteach column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,645 33,43 24,684 23,146 al on line 2 by 5, or by the | any entries 7,091. 5,087. 1,821. 1,994. | (colu | (d) Distribution | 0.051025 0.044558 0.041101 0.045205 0.045382 |
| 3 | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the number of years the foundation | fy under section 4940(e). Do not contend to be a column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,64 33,43 24,68 23,146 al on line 2 by 5, or by the e years | any entries 7,091. 5,087. 1,821. 1,994. | 2 | (d) Distribution umn (b) divided | 0.045454 |
| | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the number of years the foundation | fy under section 4940(e). Do not conteach column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,64 33,43 24,68 23,146 al on line 2 by 5, or by the e years | any entries 7,091. 5,087. 1,821. 1,994. | (colu | (d) Distribution umn (b) divided | 0.051025 0.044558 0.041101 0.045205 0.045382 |
| 3 | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the number of years the foundation | fy under section 4940(e). Do not contend to be a column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,64 33,43 24,68 23,146 al on line 2 by 5, or by the e years | any entries 7,091. 5,087. 1,821. 1,994. | 2 | (d) Distribution umn (b) divided | 0.045454 |
| 3 | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit | fy under section 4940(e). Do not conteach column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,64 33,43 24,68 23,146 al on line 2 by 5, or by the e years | any entries 7,091. 5,087. 1,821. 1,994. | 2 3 4 | (d) Distribution umn (b) divided | 0.051025 0.044558 0.041101 0.045205 0.045382 0.227271 0.045454 |
| 3 4 5 6 | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit Multiply line 4 by line 3 | fy under section 4940(e). Do not conteach column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,64 33,43 24,68 23,146 al on line 2 by 5, or by the e years | any entries 7,091. 5,087. 1,821. 1,994. | 2 3 4 | (d) Distribution umn (b) divided | 0.051025 0.044558 0.041101 0.045205 0.045382 0.227271 0.045454 1,001,812. |
| 3 4 5 6 7 | (a) Base period years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit Multiply line 4 by line 3 Enter 1% of net investment income | fy under section 4940(e). Do not conteach column for each year, see the (b) Adjusted qualifying distributions 1,486,714. 1,410,056. 1,374,066. 1,115,884. 1,050,442. 25-year base period – divide the tot has been in existence if less than 5 able-use assets for 2010 from Part 10 me (1% of Part I, line 27b) | mplete this part e instructions before making (c) Net value of noncharitable-use ass 29,13 31,64 33,43 24,68 23,146 al on line 2 by 5, or by the e years | any entries 7,091. 5,087. 1,821. 1,994. | 2 3 4 5 | (d) Distribution umn (b) divided | 0.051025 0.044558 0.041101 0.045205 0.045382 0.227271 0.045454 1,001,812. 1,409,156. |

| | 990-PF (2010) John Edward Fowler Memorial Foundation | 51-601 | | Page 4 |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------|--------------------|
| Par | t VI 🚚 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – | see the ir | ıstructions) | |
| 1 a | 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 instr.) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | ~ 1 | 1 | 3,862. |
| | check here ► X and enter 1% 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, column (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | 3.5 | |
| | foundations only Others enter -0-) | 2 | | 0. |
| 3 | Add lines 1 and 2 | 3 | 1 | 3,862. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0- | | _ | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | 5 | 1 | 3,862. |
| 6 | Credits/Payments ⁻ | | | |
| | 2010 estimated tax pmts and 2009 overpayment credited to 2010 6a 32,8 | 29. | | |
| | Exempt foreign organizations — tax withheld at source 6b | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c | | 4.0 | |
| | Backup withholding erroneously withheld 6d | | | |
| _ | Total credits and payments Add lines 6a through 6d | 7 | 3 | 32,829. |
| 8 | 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 | <u> </u> | |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | 1 | 8,967. |
| 11 Day | Enter the amount of line 10 to be Credited to 2011 estimated tax 18,967. Refunded | ▶ 11 | <u> </u> | |
| | | | [2.4] | Yes No |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | 1a | Yes No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | | 1b | X |
| | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities | published | | |
| | 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 (1) On the foundation (2) On foundation managers | | | |
| е | (1) On the foundation (2) On foundation managers Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos | ed on | | |
| | foundation managers >\$ | ou o | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | X |
| | If 'Yes,' attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | cles | 3 | X |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4a | X |
| | If 'Yes,' has it filed a tax return on Form 990-T for this year? | | 4b | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | Х |
| | If 'Yes,' attach the statement required by General Instruction T | | 100 | . 2 % |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | |
| | ● By language in the governing instrument, or | | *5.1 | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | at conflict | <u> </u> | |
| | with the state law remain in the governing instrument? | | 6 | Х |
| | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | | 7 | X |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see the instructions) | | _ 1 :1 | 1.12 |
| | See States Registered In | | _ [: :], | 1 |
| b | If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | | 8b | X |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' compared to the section of the sec |) or 4942(j) olete Part) |)(5) X/V 9 | X |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses | ır names | 10 | x |
| BAA | | | Form 990 | - PF (2010) |

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| | 990-PF (2010) John Edward Fowler Memorial Foundation | 51- | 601946 | 9 | F | age 5 |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------|--------------|--------------|--------------|
| Par | t 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 a | pplication | n ^o | 13 | _X | |
| | Website address ► http:\\Fdncenter.org | | | | | |
| 14 | The books are in care of ► Richard H. Lee Telephone | no 🟲 | _(301)_ | 654 | <u>-27</u> 0 | 00 |
| | Located at ► 4340 East-West Hwy, Ste 206, Bethesda, MD ZIP + 4 ► | 208 | 14 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | Ī. | 1 | | • | |
| | and enter the amount of tax-exempt interest received or accrued during the year | ▶ | 15 | - | | |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authbank, securities, or other financial account in a foreign country? | nority ove | era | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the nam foreign country ► | e of the | | ٠ | 4 | |
| Par | t 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 |
| 1 a | During the year did the foundation (either directly or indirectly): | _ | | هه سا | | |
| | (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 | | | , 4 |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | Yes | X No | \$. S | | 0 4 |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | X Yes | ☐ No | [| | 1 |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | _ | _ | * Y | | |
| | for the benefit or use of a disqualified person)? | Yes | X No | > | 4, | ~ |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the | | | ائم ب | 9" | % |
| | 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) | Yes | X No | | W. | |
| t | of 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 the instruction | s)? | г | 1 b | | X |
| | Organizations relying on a current notice regarding disaster assistance check here | | | 4 | 46 | Z, |
| 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? | | | 1 c | | 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)) | | | | ě. | * 1 \$ |
| a | 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 ▶ 20, 20, 20 | | | | | |
| t | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) |)(2) | | 1.0 | | , |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) all years listed, answer 'No' and attach statement — see the instructions.) | (2) to | | <u> </u> | | |
| | , , | | | 2b | | <i>b</i> |
| , | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years her 20, 20, 20, 20 | e | | | , ` | |
| _ | | | | * -% | + X' | 34 |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | Yes | X No | | | ٥ |
| | | | EEJ *** | | | |
| | of 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 beguest; or | | | | | _ |
| | (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule Č, Form 4720, to determine if the foundation had excess business holdings in 2010.) | | | 3b | | |
| Δa | Did the foundation invest during the year any amount in a manner that would jeopardize its | | | | | |
| 70 | charitable purposes? | | | 4a | | <u>x</u> |
| | | | | | | |
| t | 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 |
| BAA | | | Fo | rm 99 | 0-PF | (2010) |

| Form 990-PF (2010) John Edward Fowle | | | 51-601 | 9469 | Page (|
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------|-------------|----------------------------------------|
| Part VII-B Statements Regarding Activit | ies for Which Form | 1 4720 May Be Req | uired (continued) | | |
| 5a During the year did the foundation pay or incur | any amount to | | | | |
| (1) Carry on propaganda, or otherwise attemp | t to influence legislation | (section 4945(e))? | Yes X | No | |
| (2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra | ic election (see section attion drive? | 4955), or to carry | Yes X | No A. | |
| (3) Provide a grant to an individual for travel, | study, or other similar p | urposes? | Yes X | No , | |
| (4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section | an a charitable, etc, org 4940(d)(2)? (see instru | janization described ctions) | Yes X | No F* | , , |
| (5) Provide for any purpose other than religious educational purposes, or for the prevention | is, charitable, scientific, n of cruelty to children o | literary, or r animals? | Yes X | No . | , * o |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)? | he transactions fail to q a current notice regard | ualify under the exception ing disaster assistance | ons | * 5b | , /W |
| Organizations relying on a current notice regar | ding disaster assistance | e check here | ▶ 🗌 | ¿^ % | |
| c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure respons | | mption from the | Yes | No 🐇 | ~\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| If 'Yes,' attach the statement required by Regu | lations section 53 4945 | ·5(d) | | Ų | |
| 6a Did the foundation, during the year, receive an on a personal benefit contract? | y funds, directly or indir | ectly, to pay premiums | Yes X | No | · · · |
| b Did the foundation, during the year, pay premit | ums, directly or indirectl | y, on a personal benefit | contract? | 6b | |
| If 'Yes' to 6b, file Form 8870 | | | | | , 3 |
| 7a At any time during the tax year, was the found | | | | | ــــــــــــــــــــــــــــــــــــــ |
| b If yes, did the foundation receive any proceeds Part VIII Information About Officers. D | | | | 7b | <u> </u> |
| Part VIII Information About Officers, D and Contractors | irectors, irustees, | Foundation Manag | gers, Hignly Pald E | .mpioyee | s, |
| 1 List all officers, directors, trustees, foundation | n managers and their co | omnensation (see instri | ıctions) | | |
| | (b) Title and average | (c) Compensation | (d) Contributions to | (e) Expens | se account, |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | | lowances |
| Richard H. Lee | | | | | |
| 4340 East West Highway | President | | | | |
| Bethesda, MD 20814 | 15.00 | 132,500. | 0. | | 0. |
| <pre>Michael P. Bentzen 888 17th ST, NW,</pre> | Director | | | | |
| Washington, DC 20005 | 2.00 | 32,500. | 0. | | 0. |
| Jeffery P. Capron | | · | | | |
| 805 King Farm Blvd, Ste 300, | Director | | | | |
| Rockville, MD 20850 | 2.00 | 0. | 32,500. | | 0. |
| | | | | | |
| 2 Compensation of five highest-paid employee | s (other than those incl | uded on line 1— see ins | tructions). If none. ente | r 'NONE.' | |
| (a) Name and address of each employee | (b) Title and average | (c) Compensation | (d) Contributions to | | se account, |
| paid more than \$50,000 | hours per week devoted to position | (,) | employee benefit plans and deferred compensation | other all | lowances |
| NONE | | | | | |
| 0 | | | | | |
| <u> </u> | | | | | |
| 0 | | | | | |
| | | | | | |
| 0 | · | | | | |
| | | | | | |
| 0 | | | | | |
| | <u> </u> | | | | |
| Total number of other employees paid over \$50,000 | | | • | | None |
| BAA | TEEA0306 0 | 7/23/10 | | Form 99 | 0-PF (2010) |

| 3 `Five highest-paid independent contractors for professional carvices (see instructions). If none | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 3 `Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.' | |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| None | |
| | |
| | |
| | |
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| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services ▶ | None |
| Partix-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 N/A | |
| | 0. |
| 2 | |
| | |
| 3 | |
| | |
| 4 | |
| | |
| | |
| Park X-B Summary of Program-Related Investments (see instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 <u>N/A</u> | |
| | 0 |
| 2 | 0. |
| | |
| All other program-related investments See instructions | |
| 3 | |
| | |
| | |
| Total. Add lines 1 through 3 ▶ | None |

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Form 990-PF (2010) John Edward Fowler Memorial Foundation

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

Form 990-PF (2010)

13,862.

1,440,178.

5

6

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 | | | | 1,536,229. |
| 2 Undistributed income, if any, as of the end of 2010 | | | *** | 1,330,223. |
| a Enter amount for 2009 only | | | 0. | |
| b Total for prior years 20 , 20 , 20 | | | | |
| 3 Excess distributions carryover, if any, to 2010 | | | | |
| |). | | 4 | |
| b From 2006 | <u>).</u> | | , | |
| c From 2007 | <u>).</u> | | | |
| d From 2008 |). | | | , |
| e From 2009 63, 326 | 5. | | | |
| f Total of lines 3a through e | 63,326. | | | |
| 4 Qualifying distributions for 2010 from Part | · · · · · · · · · · · · · · · · · · · | | | |
| XII, line 4 ► \$ 1,454,040. | | • | | |
| a Applied to 2009, but not more than line 2a | | | | |
| b Applied to undistributed income of prior year | re | | | |
| (Election required — see instructions) | · * * * *· | | | |
| c Treated as distributions out of corpus (Election required – see instructions) | | | | |
| d Applied to 2010 distributable amount | yy 100 100 × × | | ? | 1,454,040. |
| e Remaining amount distributed out of corpus | 0. | 3 | > 0 # e | |
| 5 Excess distributions carryover applied to 2010 | 63,326. | | | 63,326. |
| (If an amount appears in column (d), the | * * * * : * | * * ' | 2 % 4 % | (4. 3 (4. 4.) |
| same amount must be shown in column (a) | <i>/</i> | | | |
| 6 Enter the net total of each column as | | | | 4 * |
| indicated below: | * ' | | * * | > % % |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | . * * | * * * | ` |
| b Prior years' undistributed income Subtract line 4b from line 2b | * | 0. | * . | ~ ^~ |
| c Enter the amount of prior years' undistribut- | ** . | | * | |
| ed income for which a notice of deficiency | 7 | | | |
| has been issued, or on which the section 4942(a) tax has been previously assessed | * , | | ** | |
| | | | · · · · · · · · · · · · · · · · · · · | ······································ |
| d Subtract line 6c from line 6b Taxable amount — see instructions | | 0. | | |
| e Undistributed income for 2009 Subtract line 4a from | | | | • |
| line 2a Taxable amount — see instructions | | | 0. | |
| & Undertwhysted spaces for 2010. Cylindrich live | _ | | | |
| f Undistributed income for 2010 Subtract line 4d and 5 from line 1. This amount must be | 5 | | | |
| distributed in 2011 | | <u>-</u> | | 18,863. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed | | | | |
| by section 170(b)(1)(F) or 4942(g)(3) | | | | · |
| (see instructions) | | . , , , | | . |
| 8 Excess distributions carryover from 2005 no | t | | | |
| applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9. | | | | |
| a Excess from 2006 | <u>).</u> | | | |
| b Excess from 2007 | <u>).</u> | | | |
| | <u>).</u> | | | |
| | <u>).</u> | | | |
| e Excess from 2010 |). | | | |

| orm 990-PF (2010) John Edward Fowl | | | | 51-6019469 | Page 10 |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------|----------------------------------------------|------------------------------------------------|----------------------------|
| Part XIV. Private Operating Foundation | | | | | N/A |
| 1a If the foundation has received a ruling or d is effective for 2010, enter the date of the r | uling | | - | ▶ [| |
| b Check box to indicate whether the foundation | on is a private oper | rating foundation des | scribed in section | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | |
| investment return from Part X for each year listed | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | (e) Total |
| 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 | | <u> </u> | | | |
| Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets' alternative test — enter | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | 1 | | | |
| art XV Supplementary Information assets at any time during the | (Complete this e year – see in | part only if the structions.) | organization ha | ad \$5,000 or more | e in |
| 1 Information Regarding Foundation Manag | | | | | |
| a List any managers of the foundation who h close of any tax year (but only if they have | ave contributed mo | re than 2% of the to | ection 507(d)(2) | erved by the foundation | on before the |
| NONE | contributed more to | man \$5,000) (See 3 | ection 307 (α)(2)) | | |
| b List any managers of the foundation who o a partnership or other entity) of which the f NONE | wn 10% or more of oundation has a 10 | the stock of a corpo % or greater interes | oration (or an equall st | y large portion of the | ownership of |
| 2 Information Regarding Contribution, Gran | t, Gift, Loan, Schol | arship, etc, Progran | ns: | | |
| Check here I If the foundation only makes requests for funds. If the foundation makes complete items 2a, b, c, and d | nakes contributions gifts, grants, etc, (| to preselected char (see instructions) to | itable organizations individuals or organ | and does not accept nizations under other o | unsolicited conditions, |
| a The name, address, and telephone number | of the person to w | hom applications sh | ould be addressed | | |
| Suzanne F. Martin | -1+- 005 | | | | |
| 4340 East West Highway, St Bethesda | | 4 (20 | 11 654 0300 | | |
| b The form in which applications should be s Grant Application Attac | | | | e | |
| c Any submission deadlines: | | | | <u>.</u> | |
| None | | | | | |
| d Any restrictions or limitations on awards, s Grants generally limited | | | | | etors. |

Page 11

| 3 Grants and Contributions Paid During the Y | ear or Approved for Futu | | | |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|----------------------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) a Paid during the year Anne Frank House 2850 Quebec Street, NW Washington DC 2000 | 8 N/A | 501(C)(3) | General Operating Support | 10,000. |
| Archbishop Carroll HS 4300 Harewood Rd, NE Washington DC 2001 | N/A | | General Operating Support | 45,000. |
| Arlington Street Peoples Assistance Network Arlington VA 2220 | N/A | | General Operating Support | 15,000. |
| Arlingtonians Meeting Emergency Need PO Box 7429 Arlington VA 2220 | N/A | 1 | General Operating Support | 15,000. |
| Art Enables, Inc. 411 New York Ave, NE Washington DC 2000 See Line 3a statement | 2 N/A | | General Operating Support | 10,000. |
| Total | | 1 | <u> </u> | 1,120,000. a 1,215,000. |
| b Approved for future payment | | | | |
| | | | | |
| | | | | |
| Total | | <u> </u> | ▶ 3 | b |

Part XVI-A Analysis of Income-Producing Activities

| inter gross amounts unless otherwise indicated. | Unrelat | ed business income | Excluded | 1 by section 512, 513, or 514 | (e) | |
|------------------------------------------------------------|-------------------------|--------------------------------------|-------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (see the instructions) | |
| a | | | | | | |
| b | | | i | <u> </u> | | |
| c | | | | | | |
| d | | | | | | |
| е | 1 | | | | | |
| f | | | | <u></u> | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 40. | | |
| 4 Dividends and interest from securities | | | 14 | 243,085. | | |
| 5 Net rental income or (loss) from real estate | , , , , , , | | | | · ` | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | 16 | 1,291,547. | | |
| 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 | -113,019. | | |
| 9 Net income or (loss) from special events | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue | ėdie Titurėdo | t with the destruction of the second | | erija i stalika kalaba | (¹ ¹ ¹ ¹ ¹ ¹ ¹ · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) · (1) | |
| a | | | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | 1~ | 1,421,653. | | |
| 13 Total. Add line 12, columns (b) (d), and (e) | | | | 13 | 1,421,653 | |

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

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions.) |
|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | N/A |
| | |
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Yes No

Form 990-PF (2010) John Edward Fowler Memorial Foundation 51-6019469 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| describe | organization directly o ed in section 501(c) of to political organization | f the Code (other th | an section 501(c)(3) organi | zations) o | er organization or in section 52 | 7, | | |
|-------------------------|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------------|-------------------------------------------|-----------------------|----------|
| a Transfe | rs from the reporting f | foundation to a non- | charitable exempt organiza | tion of | | | | |
| (1) Cas | | | | | | | 1 a (1) | Х |
| (2) Oth | er assets | | | | | | 1 a (2) | X |
| b Other tr | ansactions | | | | | | | |
| (1) Sal | es of assets to a nonc | charitable exempt of | rganization | | | | 1 b (1) | X |
| (2) Pur | chases of assets from | n a noncharitable ex | empt organization | | | | 1 b (2) | X |
| (3) Rer | ntal of facilities, equipi | ment, or other asse | ts | | | | 1 b (3) | X |
| (4) Rei | mbursement arrangen | nents | | | | | 1 b (4) | X |
| (5) Loa | ns or loan guarantees | 5 | | | | | 1 b (5) | Х |
| (6) Per | formance of services | or membership or f | undraising solicitations | | | | 1 b (6) | X |
| c Sharing | of facilities, equipme | nt, mailing lists, oth | ner assets, or paid employe | es | | | 1 c | _ X |
| the goo any tran | ds, other assets, or sensets or sensetion or sharing are | ervices given by the rangement, show in | ete the following schedule reporting foundation If the column (d) the value of the | foundation goods, or | on received less other assets, or | s than fair market v services received | value in | |
| (a) Line no. | (b) Amount involved | (c) Name of nonc | haritable exempt organization | (a) | Description of trans | sfers, transactions, and | snaring arrangem | ients |
| - | | | | | | | | |
| | | | | | | | | <u>-</u> |
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| | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| describe b If 'Yes,' | oundation directly or in ed in section 501(c) of complete the followin a) Name of organization | f the Code (other thing schedule | rith, or related to, one or mo an section 501(c)(3)) or in (b) Type of organization | section 52 | 27? | ons Description of relationships | Yes | X No |
| | | | | 1 | | | | _ |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | - - | | |
| Under correct | penalties of perjury, I declare, and complete Declaration of | e that I have examined the of preparer (other than ta | is return, including accompanying s xpayer or fiduciary) is based on all | chedules and information of | I statements, and to of which preparer ha | the best of my knowledges any knowledge | e and belief, it is t | true, |
| lere | KILLON F | 4 200 | | /ذا | /४/// | Trosid- | en/ | |
| | gnature of officer or trustee | | / | Date | | Title | | |
| | Print/Type preparer's nam | ne | Preparer's signature | | Date | Check ifif | PTIN | |
| Paid | | | 1 | | <u> </u> | self-employed | <u> </u> | |
| Preparer | Fishe dathe Prepar | red | | | | Firm's EIN ► | | |
| Jse Only | Firm's address | | | | | | | |
| BAA | 1 | - | | | | Phone no | Form 990-P | F (2010) |
| | | | | | | | | |

Form **4562**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2010

Attachment Sequence No 67

Identifying number

| | nn Edward Fowler | | undation | | _ | | 5 | 1-6019469 | _ |
|-------|--------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------|---------------------------------------------|-------------------|---------------|------|---------------------------------------|---------------------------------------|
| Busin | ess or activity to which this form rela | ates | | | _ | | | | |
| | m 990-PF page 1 | | | | | | | | <u>-</u> |
| Pa | Election To Exp Note: If you have a | pense Certain I ny listed property, | Property Under Sec complete Part V before | ction 1 <mark>79</mark> you complete Pai | rt I | _ | | | |
| 1 | Maximum amount (see ins | structions) | | | | | 1 | | |
| 2 | Total cost of section 179 p | property placed in s | service (see instructions) |) | | | 2 | | |
| 3 | Threshold cost of section | 179 property before | e reduction in limitation (| (see instructions) | | | 3 | | |
| 4 | Reduction in limitation Su | btract line 3 from I | ine 2 If zero or less, en | ter -0- | | | 4 | | |
| 5 | Dollar limitation for tax yea separately, see instruction | ar Subtract line 4 | from line 1 If zero or les | ss, enter -0- If m | arried filing | | 5 | | |
| 6 | (a) | Description of property | | (b) Cost (business | use only) | c) Elected co | st | ; * | ş |
| _ | | | | | | | | , | ÷ |
| | | | | | | | | 3 * | <i>></i> |
| 7 | Listed property Enter the | amount from line 2 | 29 | _ | 7 | | | · · · · · · · · · · · · · · · · · · · | : 🛊 |
| 8 | Total elected cost of section | on 179 property Ad | dd amounts in column (c | ;), lines 6 and 7 | | | 8 | | |
| 9 | Tentative deduction. Enter | | | | | | 9 | | |
| 10 | Carryover of disallowed de | | | | | | 10 | | |
| 11 | Business income limitation | | | | | ınstrs) | 11 | | |
| 12 | Section 179 expense dedu | | | | | · · · | 12 | | |
| | Carryover of disallowed de | | | | ▶ 13 | | | 1.5 \$ 63 2 m | - |
| | : Do not use Part II or Part | | | | | | | | |
| Rai | t II Special Deprec | lation Allowan | ce and Other Depre | eciation (Do no | t include listed | property) | (See | e instructions.) | |
| 14 | Special depreciation allow tax year (see instructions) | ance for qualified p | property (other than liste | d property) place | d in service du | iring the | 14 | | |
| 15 | Property subject to section | n 168(f)(1) election | | | | | 15 | | |
| 16 | Other depreciation (include | ing ACRS) | | | | | 16 | | |
| Pai | t III. MACRS Depre | ciation (Do not in | nclude listed property) (| See instructions) | | | • | - · | |
| | | | Section | | | | | | |
| 17 | MACRS deductions for ass | sets placed in servi | ce in tax vears beginnin | a before 2010 | | | 17 | 2,7 | 19. |
| | If you are electing to group asset accounts, check here | o any assets place | | _ | or more genera | " ► □ | 8 | y * . | |
| • | Section B | B - Assets Placed | in Service During 2010 | Tax Year Using t | he General De | preciation | Syst | em | |
| | (a) Classification of property | (b) Month and year placed in service | (C) Basis for depreciation (business/investment use only — see instructions) | (d) Recovery period | (e) Convention | (f) Metho | | (g) Depreciation deduction | · · · · · · · · · · · · · · · · · · · |
| 19 a | 3-year property | | | | | | | | |
| | 5-year property | 1 、 | | · | | | | | |
| | 7-year property | 1 | | | | | | | |
| | 10-year property | 1, | | | | | | | |
| | 15-year property | 1 . | | | | | | | |
| | 20-year property | - | | | | _ | | | |
| | 25-year property | = | | 25 yrs | 1 | S/I | | | |
| | Residential rental | | _ | 27.5 yrs | мм | S/I | | - | |
| • | property | | | 27.5 yrs | MM | S/I | | | |
| | Nonresidential real | | | | | S/I | | | |
| • | property | | | 39 yrs | MM | | | | |
| | -:-: | Access Discording | Ci Di 2010 T | | MM | S/I | | <u> </u> | |
| 20. | | – Assets Placed In | Service During 2010 Ta | ax Year Using the | e Alternative D | | | stem | |
| | Class life | - | | | ļ | S/I | | | |
| | 12-year | | | 12 yrs | | S/I | | | |
| | : 40-year | | | 40 yrs | MM | S/I | | | |
| | t IV Summary (See in | | | = | | | | - | |
| | Listed property Enter amo | | | | | | 21 | _ | 0. |
| 22 | Total Add amounts from line 12 | 1 140 1 17 1 | | | | | | | |
| | Total Add amounts from line 12, the appropriate lines of your retuine. For assets shown above as | | | | and on | | 22 | 2,7 | 19. |

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

| | | (a) through (b) | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | ₩P.F. | ,000,0 | | | | | | | |
|--------------|----------------------------------------------------|-----------------------------------------|-----------------------------------------|------------------------|----------------------------------------|----------------------|--------------------------------------------|----------------|----------------|------------------------|--------------------|--------------------------|----------------------------------------|----------------------------|-----------------------------------|------------------------|
| 24: | Sectio Do you have evidence | n A — Deprecia | | | | | See the I | | | | | passen | | | Yes | No |
| | (a) rpe of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost other b |) or | Basis fo | (e) or deprecia ess/investruse only) | ation | Rec | (f) covery criod | Me | (g) ethod/ vention | Depr | (h) ecration luction | Ele secti | (i) ected on 179 |
| 25 | Special depreci | ation allowance 50% in a quali | for qualified fied business | listed propuse (see | perty pla | ced in s | service o | lurınç | the t | ax yea | r and | 25 | | - | * | ** Jan |
| 26 | Property used r | nore than 50% | in a qualified | business | use. | | | | | | | | | | | |
| Te | Lephones | 05/01/97 | 100.00 | 2 | ,828. | | 2,8 | 28. | 7. | .00 | SL-I | HY | | 0 | | |
| | | | | | | | | | | | | | | | | |
| | Property used 5 | 0% or less in a | qualified bus | iness iise | | | | | | | | | | | | |
| | | | T | | | | | | | | | | | | \$ 64%. V | \$## W |
| | | | | | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | | | | |
| 28 | Add amounts in | column (h), line | es 25 through | 27 Ente | r here an | d on lin | e 21, pa | age 1 | | | | 28 | | 0 | | 4.00% |
| _29 | Add amounts in | column (ı), line | 26 Enter he | re and on | line 7, p | age 1 | | | | | | | | 29 | | |
| Com to yo | iplete this section our employees, fi | for vehicles us | ed by a sole questions in S | ection C 1 | , partner to see if | , or othe | er 'more et an ex | thar | 5% o | wner,' | eting thi | is section | son If yo | ou provid | les | |
| 30 | Total business/iduring the year commuting mile | (do not include | | | a) icle 1 | • | b) cle 2 | _\ | (c) /ehicle | 3 | Vehic | • | | cle 5 | Vehi | |
| 31 | Total commuting m | • | ne year | | | | | | | | | | | | | |
| 32 | Total other pers | sonal (noncomm | nuting) | | | | | | | | | | | | | |
| 33 | Total miles driv lines 30 through | en during the ye i 32 | ear Add | | | | | | | | | | - | | | |
| 34 | Was the vehicle | | ersonal use | Yes | No | Yes | No | Ye | s | No | Yes | No | Yes | No | Yes | Мо |
| 35 | during off-duty l | used primarily | by a more | | | | | | | | | | | | | |
| 36 | than 5% owner Is another vehic personal use? | · | | | | | | | | | | | | | | |
| | personal use | Section | C – Question | s for Em | lovers V | Vho Pro | vida Va | hicle | e for i | lse by | Their | Employ | 000 | <u> </u> | | |
| Ansv 5% | wer these question | ns to determine | e if you meet a | - | - | | | | | - | | | | are not | more t | han |
| 37 | Do you maintair by your employe | n a written polic ees? | y statement t | hat prohib | ıts all pe | rsonal ι | use of v | ehicle | es, inc | luding | comm | uting, | | | Yes | No |
| 38 | Do you maintair employees? See | n a written policy e the instruction | y statement this for vehicles | hat prohib used by | its perso corporate | nal use e officer | of vehics, direc | cles, tors, | excep or 1% | t comr | nuting, ore own | by your ers | | | | |
| 39 | Do you treat all | use of vehicles | by employee | s as perso | onal use? | > | | | | | | | | | | |
| 40 | Do you provide vehicles, and re | more than five v | vehicles to yo ation received | ur employ | ees, obt | aın ınfo | rmation | from | your | emplo | yees ab | out the | use of t | he | | |
| 41 | Do you meet the Note: If your an | | | | | | | | | | | | | <u> </u> | | . A. A. A. |
| Pai | rt'VI Amorti | zation | | | | | | | | | | | | | | |
| | | (a) cription of costs | | Date an | (b) nortization egins | | (c) Amortizab amount | | | Coc sect | le | Amo per | (e) rtization riod or centage | Ai fo | (f) mortization ir this yea | n r |
| 42 | Amortization of | costs that begin | ns during you | r 2010 tax | year (se | e instru | uctions) | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| 43 44 | | costs that bega ounts in column | - | | • | ere to re | port | | | _ | | | 43 | | | |
| | | | | | | | | | | | | | | | | |

<u>0.</u>

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Total

| Taxes (see the instructions) | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb_ |
|------------------------------|--------------|-------------|-------------|---------------|
| Gross receipts | 6,537. | 6,537. | | 0. |
| Foreign tax withheld | 5,709. | 5,709. | | 0. |
| Real estate tax | 168. | 168. | | 0. |
| Federal excise tax | 13,862. | 0. | | 0. |
| | | | | |

26,276. 12,414.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) | (b) How acquired P-Purchase D-Donation | (c) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------|-------------------------------------------|
| Schwab (#2507) | P | various | various |
| Capital gain distributions | P | various | various |

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income **Columns (e) thru (h)**

| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|--------------------------|-----------------------------------------|----------------------------------------------|----------------------------------------------|
| 1,804,913. 72,682. | | <u>1,983,869.</u> 0. | -178,956. 72,682. |
| Total | | 1,983,869. | -106,274. |

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (i) thru (I)

| Complete only for asset by the foundation on 12 | (I) Gains (column (h) gain minus column (k), | | |
|-------------------------------------------------|----------------------------------------------|--------------------------------------------------|------------------------------------------------------|
| (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column (i) over column (j), if any | but not less than -0-) or losses (from column (h)) |
| 0. | 0. | 0. | -178,956. 72,682. |
| Total | 0. | 0. | |

Form 990-PF, Page 4, Part VII-A, Line 8a States Registered In

| DE | _ | Delaware | |
|----|---|----------|--|
| VA | _ | Virginia | |
| MD | - | Maryland | |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------------|
| a Paid during the year | | | | |
| | | | | Person or Business |
| Arts for the Aging 6917 Arlington Road 6917 Arlington Road MD 20814 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 5,000. Person or Business |
| Barker Foundation 7979 Old Georgetown Rd Bethesda MD 20814 | N/A | 501 (C) (3) 509 (a) | General Operating Support | Person or Business X 15,000. Person or Business |
| Beacon House Community Ministry 601 Edgewood St, NE Washington DC 20017 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 10,000. Person or Business |
| Bethany House of N. VA 6121 Lincolnia Rd Alexandria VA 22312 | N/A | 501 (C) (3) 509 (a) | General Operating Support | Person or Business X 10,000. Person or Business |
| Bishop John T. Walker School Mount St. Alban Washington DC 20016 | N/A | 501 (C) (3) 509 (a) | General Operating Support | Person or Business X 25,000. Person or Business |
| Boys/Girls Clubs Wash, DC 4103 Benning Rd, NE Washington DC 20019 | N/A | 501 (C) (3) 509 (a) | General Operating Support | Person or Business X 75,000. Person or Business |
| Bucknell Marts Hall Lewisburg PA 17837 | N/A | 501 (C) (3) 509 (a) | General Operating Support | Person or Business X 10,000. Person or Business |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------|
| a Paid during the year | | | , | |
| Building Bridges Across the River | | | | Person or |
| 1901 Mississippi Ave, SE | | 501 (C) (3) | General | Business X |
| Washington DC 20020 | N/A | 509(a) | Operating Support | 75,000. |
| | | | | Person or |
| | | | | Business |
| Byte Back | | - | | Person or |
| 815 Monroe St, NE | - - | 501 (C) (3) | General | Business X |
| Washington DC 20017 | N/A | 509(a) | Operating Support | 10,000. |
| | , | | | Person or |
| | | | | Business |
| | | | | |
| Capital Area Food Bank | | | | Person or |
| 645 Taylor St, NE | N/A | 501 (C) (3) | | Business X |
| Washington DC 20017 | N/A | 509(a) | Operating Support | 20,000. Person or |
| | | | | Business |
| | | | | Business [] |
| Catalogue for Philanthropy | | | | Person or |
| 1101 Pennsylvania Ave, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20004 | N/A | 509(a) | Operating Support | 5,000. |
| | | | | Person or |
| | | | | Business |
| Charity Clabal Tag | | | | Porcon or |
| Charity Global, Inc. 200 Varick Street | | | General | Person or Business X |
| New York NY 10014 | N/A | 501 (C) (3) 509 (a) | Operating Support | 20,000. |
| NOW TOTAL | 11,721 | 303(4) | poperating support | Person or |
| | | | | Business |
| | | | | |
| Christian Communities Group Homes | | | | Person or |
| P.O. Box 29643, NE | | 501 (C) (3) | General | Business X |
| Washington DC 20017 | N/A | 509(a) | Operating Support | 10,000. |
| | | | | Person or |
| | | | | Business |
| Columbia Road Health Services | | | | Person or |
| 1660 Columbia Road, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20009 | N/A_ | 509(a) | Operating Support | 15,000. |
| | | | | Person or |
| | | | | Business |
| Community Lodgings, Inc. | | | | Person or |
| 3912 Elbert Avenue | | 501 (C) (3) | General | Business X |
| Alexandria VA 22305 | N/A | 509(a) | | 10,000. |
| | 1 -17 | 1000(4) | , sporading bapport | |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------|
| a Paid during the year | | | | |
| | | | | Person or |
| | | | | Business |
| Dance Institute of Washington | - | | | Person or |
| 3400 14th St, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20010 | N/A | 509(a) | Operating Support | 10,000. |
| | | | | Person or |
| | | | | Business |
| | | | | . , , |
| Don Bosco Cristo Rey HS_ | | | | Person or |
| 1010 Larch Ave | | 501 (C) (3) | | Business X |
| Takoma Park MD 20912 | N/A | 509(a) | Operating Support | 25,000. |
| | | | | Person or Business |
| | | | | Dusiriess [|
| Doorways for Women & Families | | | | Person or |
| PO_Box_100185 | | 501 (C) (3) | General | Business X |
| Arlington VA 22210 | N/A | 509(a) | Operating Support | 20,000. |
| | | | | Person or |
| | | | | Business |
| Parataur Glastaula Para Gras Gha | | - | | Person or |
| Downtown Cluster's Day Care Ctr 926 Eleventh St, NW | | | General | Business X |
| Washington DC 20001 | N/A | 501 (C) (3) 509 (a) | Operating Support | 25,000. |
| 20 2002 | | 303(4) | operating support | Person or |
| - | | | | Business |
| | | | | |
| Emerging Scholars Program | | | | Person or |
| 3320 Jermantown Rd | | 501 (C) (3) | | Business X |
| Oakton VA 22124 | N/A | 509(a) | Operating Support | 15,000. |
| | - | | | Person or |
| | | | | Business |
| Everybody Wins | | | | Person or |
| 666 11th Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20001 | N/A | 509(a) | Operating Support | 10,000. |
| | | | | Person or |
| | | | | Business |
| Point Change | | | | D |
| Fair Chance | | | | Person or |
| 1413 K_Street, NW DC 20005 | N/A | 501 (C) (3) | General Characters | Business X |
| nashington DC 20005 | 11/15 | 509(a) | Operating Support | 10,000. Person or |
| | | | | Business |
| | | | | |
| | | | · | |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|-------------------------------------------------|
| a Paid during the year Faith in the Family 8001 Braddock Rd Springfield VA 22151 | | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 25,000. Person or Business |
| Fellowship of Christian Athletes 801 G Street, NW Washington DC 20001 | | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 45,000. Person or Business |
| First Time Computers 6407 32nd Street, NW Washington DC 20015 | N/A | 501 (c) (3) 509 (a) | | Person or Business X 10,000. Person or Business |
| Fishing School 4737 Meade St, NE Washington DC 20019 | | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 10,000. Person or Business |
| Food & Friends 219 Riggs Road, NE Washington DC 20011 | N/A | 501 (C) (3) 509 (a) | | Person or Business X 20,000. Person or Business |
| For Love of Children 1763 Columbia Road, NW Washington DC 20009 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 20,000. Person or Business |
| Foundation Center 1627 K Street, NW Washington DC 20006 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 5,000. Person or Business |
| Freshfarm Markets, Inc. P.O. Box 15691 Washington DC 20001 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 5,000. |

| | | | <u></u> | |
|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
| a Paid during the year | | | | |
| a raid during the year | | | | Person or |
| | | | | Business |
| Growing Together | | | | Person or |
| 9023 Flower Ave | | 501 (C) (3) | General | Business X |
| Silver Spring MD 20901 | N/A | 509(a) | Operating Support | 20,000. |
| | | | | Person or |
| | | | | Business |
| | | | | Darage or |
| Homeless Children's Playtime Project 1525 Newton St, NW | | 501 (C) (3) | General | Person or Business X |
| Washington DC 20010 | N/A | 509 (a) | Operating Support | 5,000. |
| | , | 333 (4) | operating support | Person or |
| | | | | Business |
| | | | | |
| Homestretch, Inc. | | | | Person or |
| 370 S. Washington St | | 501 (C) (3) | General | Business X |
| Fairfax VA 22046 | N/A | 509(a) | Operating Support | 15,000. Person or |
| | | | | Business |
| | | | | |
| Hope & A Home | | | | Person or |
| 1816 12th Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20009 | N/A | 509(a) | Operating Support | 15,000. |
| | | | | Person or |
| | | | | Business |
| Hope House DC | | | | Person or |
| PO Box 60602 | | 501 (C) (3) | General | Business X |
| Washington DC 20039 | N/A | 509(a) | 1 | 5,000. |
| | | | | Person or |
| | | | | Business |
| Hooping Coming To | | | | Porce and |
| Hospice Caring, Inc. 518 South Frederick Ave | | | General | Person or Business X |
| Gaithersburg MD 20877 | N/A | 501 (c) (3) 509 (a) | Operating Support | 15,000. |
| | | | portioning support | Person or |
| | | | | Business |
| | | <u> </u> | | |
| Housing Unlimited | | | | Person or |
| 1398 Lamberton Drive | | 501 (C) (3) | General | Business X |
| Silver Spring MD 20902 | N/A | 509(a) | Operating Support | 10,000. |
| | | | | Person or Business |
| | | | | |
| | | 1 | 1 | 1 |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------------|
| a Paid during the year Joffrey Ballet 70 East Lake Blvd Chicago IL 60601 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 15,000. Person or Business |
| Koinonia Foundation 6037 Franconia Road Alexandria VA 22310 | N/A | | General Operating Support | Person or Business X 15,000. Person or Business |
| Liberty's Promise 1010 Pendleton St Alexandria VA 22314 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 5,000. Person or Business |
| Life Pieces to Masterpieces 5002 Hayes St, NE Washington DC 20019 | N/A | 501 (c) (3) 509 (a) | | Person or Business X 10,000. Person or Business |
| Literacy Council of No. VA. 2855 Annandale Road Falls Church VA 22042 | N/A | | General Operating Support | Person or Business X 10,000. Person or Business |
| Horizons @ Maret 3000 Cathedral Ave, NW Washington DC 20008 | N/A | 501 (C) (3) 509 (a) | General Operating Support | Person or Business X 10,000. Person or Business |
| Mary House 4303 13th St, NE Washington DC 20017 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 25,000. Person or Business |
| Mi Casa, Inc. 6230 3rd St, NW Washington DC 20011 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 10,000. |

| | | | · | |
|----------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
| a Paid during the year | | | | Person or |
| | | | | Business |
| National Symphony Orchestra | | | | Person or |
| 2700 F St, NW | | 501 (C) (3) | | Business X |
| Washington DC 20566 | N/A | 509(a) | Operating Support | 5,000. |
| | | | | Person or |
| ~ | | | | Business |
| Neediest Kids, Inc. | | | | Person or |
| 8283 Greensboro Drive | | 501 (C) (3) | General | Business X |
| Mclean VA 22102 | N/A | 509(a) | Operating Support | 10,000. |
| | | | | Person or |
| | | | | Business |
| | | | | |
| New Futures | | | | Person or |
| 1965 Biltmore Street, NW Washington DC 20009 | | 501 (C) (3) 509 (a) | General Operating Support | Business X 10,000. |
| washington be zooos | N/A | 309(a) | operating support | Person or |
| | | | | Business |
| | | | | |
| Noves Children's Library Fdn | | | | Person or |
| PO_Box_31 | | 501 (C) (3) | | Business X |
| Kensington MD 20895 | N/A | 509(a) | Operating Support | 10,000. |
| | | | | Person or Business |
| | | | | Dusiness |
| Our Daily Bread | | | | Person or |
| 10777 Main Street | | 501 (C) (3) | General | Business X |
| Fairfax VA 22030 | N/A | 509(a) | I. | 10,000. |
| | | | | Person or |
| | | | | Business |
| Posse Foundation | - | | | Person or |
| 1319 F_Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20004 | N/A | 509 (a) | | 10,000. |
| | | | | Person or |
| | | | | Business |
| Providence Health Paraday' | | - | | Porcon or |
| Providence Health Foundation 1150 Varnum St, NE | | 501 (6) (3) | General | Person or Business X |
| Washington DC 20017 | | 501 (C) (3) 509 (a) | Operating Support | 15,000. |
| 20017 | | 505(4) | portacing support | Person or |
| | | | | Business |
| | | | | |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------|
| a Paid during the year | | | | |
| Dooch for College | | | | Person or |
| 700 12th Street, NW | · | 501 (C) (3) | General | Business X |
| Washington DC 20005 | | 509 (a) | | 10,000. |
| <u> </u> | <u>// </u> | 003(4) | operating support | Person or |
| | | | | Business |
| | | | | |
| Round House Theatre | | | | Person or |
| 4545 East West Hwy | | 501 (C) (3) | General | Business X |
| Bethesda MD 20814 | N/A | 509(a) | | 10,000. |
| | . | | | Person or |
| | . | | | Business |
| | _ | | | |
| Samaritan Inns, Inc. | | | | Person or |
| 2523 14th Street, NW | | 501 (C) (3) | | Business X |
| Washington DC 20009 | N/A | 509(a) | Operating Support | 20,000. |
| | | | | Person or |
| | | | | Business |
| Sarah's Circle | | | | Person or |
| 2551 17th Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20009 | | 509(a) | | 10,000. |
| <u> </u> | 7 11/11 | 303(4) | operating support | Person or |
| | | | | Business |
| | | | | |
| Silver Spring Housing Coalition | 1 | | | Person or |
| 914 Silver Spring Ave | | 501 (C) (3) | General | Business X |
| Silver Spring MD 20910 | N/A | 1 | Operating Support | 10,000. |
| | . | | | Person or |
| | | | | Business |
| | | | | 1 |
| St. Aloysius Church | | | | Person or |
| 19 Eye Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20001 | N/A | 509(a) | Operating Support | 20,000. |
| | | | | Person or |
| | | | | Business |
| St. Stephen Church | | | - | Person or |
| 1525 Newton St, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20010 | N/A | 509 (a) | Operating Support | 10,000. |
| | | | - Francisco | Person or |
| | | | | Business |
| | | | | |
| The Ellington Fund, Inc. | | | | Person or |
| 3500 R Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20007 | N/A | 509(a) | Operating Support | 15,000. |

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|---------------------------------------------|
| a Paid during the year | | | | |
| | | l | | Person or |
| | | | | Business |
| Transitional Housing Corp. | | | | Person or |
| 5101 16th Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20011 | N/A | 1 | Operating Support | 15,000. |
| | | | | Person or |
| | | | | Business |
| One Ministries' UNIQUE Learning Ctr | | - | | Person or |
| 1615 3rd Street, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20001 | | | Operating Support | 15,000. |
| | | | | Person or |
| | | | | Business |
| WANADA Education Institute | | | | Person or |
| 5301 Wisconsin Ave, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20015 | N/A | 509(a) | Operating Support | 20,000. |
| | | | | Person or |
| | | | | Business |
| Washington Ballet | | | | Person or |
| 3515 Wisconsin Ave, NW | | 501 (C) (3) | General | Business X |
| Washington DC 20016 | N/A | 509(a) | | 40,000. |
| | | | | Person or |
| | | | | Business |
| | | | | |
| Washington Jesuit Academy 900 Varnum Street, NE | | | | Person or |
| Washington DC 20017 | N/A | 501 (c) (3) 509 (a) (2) | General Operating Support | Business X 25,000. |
| <u> </u> | 11/11 | 305(a) (2) | operating support | Person or |
| | | | | Business |
| | | | | |
| Washington Legal Clinic | | | | Person or |
| 1200 U Street, NW Washington DC 20009 | N/A | 501 (C) (3) | | Business X |
| washington DC 20009 | N/A | 509(a) | Operating Support | 10,000. Person or |
| | | | | Business |
| | | _ _ | | |
| Washington Middle School for Girls | | | | Person or |
| 1901 Mississippi Ave, SE | - | 501 (C) (3) | General | Business X |
| Washington DC 20020 | N/A | 509(a) | Operating Support | 25,000. |
| | | | | Person or Business |
| | | | | Dusiness |
| | L | ــــــــــــــــــــــــــــــــــــــ | | |

Continued

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun- dation status of re- cipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|-------------------------------------------------|
| a Paid during the year We are Family Senior Outreach 1405 Monroe St, NW Washington DC 20010 | | 501 (c) (3) 509 (a) | | Person or Business X 5,000. Person or Business |
| A Wider Circle, Inc. 4808 Moorland Lane Bethesda MD 20814 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X 5,000. Person or Business |
| Wolf Trap Foundation 1645 Trap Road Vienna VA 22182 | N/A | 501 (c) (3) 509 (a) | | Person or Business X 10,000. Person or Business |
| Young Playwright's Theatre 2437 15th St, NW Washington DC 20009 | N/A | 501 (C) (3) 509 (a) | | Person or Business X 10,000. Person or Business |
| Youth Leadership Foundation 4101 Yuma Street, NW Washington DC 20016 | N/A | 501 (c) (3) 509 (a) | General Operating Support | Person or Business X |

Total

1,120,000.

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---------------------------------------------|
| Curtin, Law | Legal | 45,960. | 11,490. | | 34,470. |

Total

45,960.

11,490.

34,470.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---------------------------------------------|
| Matthews, Carter Boy | Audit | 5,500. | 1,375. | | 4,125. |
| Total | | 5.500. | 1.375. | | 4.125. |

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---------------------------------------------|
| S. Martin | Grants consulting | 50,350. | 0. | | 50,350. |
| RBC Securities | Invstmnt Fees | 32,376. | 32,376. | | 0. |
| Millenium Services | Appraisal | 1,450. | 725. | | 725. |
| Total | | 84,176. | 33,101. | | 51,075. |

Form 990-PF, Line 19

Allocated Depreciation

| | | | | | | | | |
|------------------------|-----------------|------------------|-------------------|------|------|-----------------|-------------------------|---------------------------|
| Description | Date Acquire | Cost or Basis | Prior Yr. Depr | Mthd | Life | Current Depr | Net Invest Income | Adjusted Net Income |
| Telephones | 05/01/97 | 2828 | 2828 | SL | 7.00 | 0 | | |
| Computer (Network Serv | 11/01/99 | 2653 | 2653 | SL | 5.00 | 0 | | |
| HO Laser Jet 2100 prin | 11/01/99 | 730 | 730 | SL | 5.00 | 0 | | |
| Dell 17" Monitor | 01/30/02 | 201 | 201 | SL | 5.00 | 0 | | |
| Internal tape and hard | 01/31/02 | 778 | 778 | SL | 5.00 | 0 | | |
| Grants software | 05/15/02 | 1677 | 1677 | SL | 5.00 | 0 | | |
| Dell Computer XP | 08/15/05 | 2515 | 2264 | SL | 5.00 | 251 | | |
| Dell Inkjet printer | 08/15/05 | 176 | 158 | SL | 5.00 | 18 | | |
| Dell Computers XP | 01/11/06 | 5884 | 4119 | SL | 5.00 | 1177 | | |
| Brother Laser Printer | 12/05/06 | 420 | 294 | SL | 5.00 | 84 | | |
| Conference table/chair | 06/21/07 | 3000 | 1072 | SL | 7.00 | 428 | | |
| Exec HBK Chair (SFM) | 08/15/07 | 210 | 75 | SL | 7.00 | 30 | | |
| Brother Typewriter | 08/22/07 | 446 | 223 | SL | 5.00 | 89 | | |
| Safford chair (RHL) | 08/22/07 | 105 | 38 | SL | 7.00 | 15 | | |
| Drapes (Bethesda) | 12/01/07 | 2892 | 1446 | SL | 5.00 | 578 | | |
| HP 1040 Fax | 01/02/08 | 100 | 30 | SL | 5.00 | 20 | | |
| HP 1006 Laser printer | 01/03/08 | 147 | 44 | SL | 5.00 | 29 | | |
| | | | | | | | | |

Total

.Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

| | End of Year | | |
|----------------------------------------------|---------------|----------------------|--|
| Line 10b - Investments - Corporate Stock: | Book Value | Fair Market Value | |
| RBC Securities - Wentworth Hauser & Violich | 219,470. | 212,032. | |
| RBC Securities - Lateef Mgmt Associates | 832,947. | 1,133,022. | |
| RBC Securities - Tradewinds Global Investors | 519,137. | 536,121. | |
| RBC Securities - Snow Capital Mgmt | 851,883. | 968,637. | |
| Charles Schwab (#2507) | 11,034,535. | 11,394,170. | |
| Charles Schwab (#7436) | 96,955. | 99,934. | |
| Vanguard - Short-term Federal Fund | 160,784. | 163,207. | |
| Unrealized gain | 791,412. | 0. | |

Total

14,507,123. 14,507,123.

Form 990-PF, Page 2, Part II, Line 11

L-11 Stmt

| Line 11b - Description of Investments Land, Buildings and Equipment | (a) Cost/Other Basıs | (b) Accumulated Depreciation | (c) Book Value |
|---------------------------------------------------------------------------|----------------------------|-------------------------------------|--------------------------|
| Commercial Real Estate, Rosslyn, Va Undeveloped Land, Augusta Cnty, Va | 2,933,818. 4,500. | 0. | 2,933,818. 4,500. |
| Total | 2,938,318. | 0. | 2,938,318. |

Form 990-PF, Page 2, Part II, Line 14

L-14 Stmt

| Line 14b - Description of Land, Buildings, and Equipment | (a) Cost/Other Basis | (b) Accumulated Depreciation | (c) Book Value |
|-------------------------------------------------------------|----------------------------|------------------------------|--------------------------|
| Per Form 4562 Depreciation Report | 24,763. | 21,351. | 3,412. |
| Total | 24,763. | 21,351. | 3,412. |

JOHN EDWARD FOWLER MEMORIAL FOUNDATION

4340 EAST-WEST HIGHWAY, SUITE 206, BETHESDA, MD 20814

GRANT APPLICATION

| FULL NAME OF ORGANIZATION | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--|--|
| ADDRESS | | | |
| MAILING ADDRESS (IF OTHER THAN ABOVE) | | | |
| TELEPHONE NUMBER OF ORGANIZATION | | | |
| CONTACT PERSON/TEL. NUMBER | | | |
| BRIEF (35 WORDS) DESCRIPTION OF THE PROJECT FOR WHIC | TH YOU ARE REQUESTING A GRANT | | |
| | | | |
| | | | |
| | | | |
| BY WHAT DATE DO YOU NEED THIS GRANT? | | | |
| SNEEDED FOR PROJECT. S | | | |
| WHAT OTHER SOURCES DO YOU HAVE OR ANTICIPATE FOR I | FUNDING THE PROJECT? | | |
| | | | |
| | | | |
| HE AN ONCOING PROJECT HOW BO VOU INTEND TO FIND IT | IN THE FUTURE? | | |
| A ALL ONG THE PARTY OF THE PART | NY ARDA DA CORES. | | |
| | | | |
| | | | |
| SOURCES OF THE ORGANIZATION'S INCOME | | | |
| GOVERNMENT \$ | UNITED WAY/UNITED BLACK FUND S | | |
| FOUNDATIONS/CORPORATIONS \$ | PROGRAM REVENUE \$ | | |
| INDIVIDUALS \$ | FUNDRAISING ACTIVITIES \$ | | |
| OTHER \$ | | | |
| | | | |
| THIS APPLICATION WILL BE CONSIDERED COMPLETE | WITH THE FOLLOWING ENCLOSURES: | | |
| 1) A COPY OF THE ORGANIZATION'S IRS DETERMINATION LE | TTER. | | |
| 2) BUDGET FOR THE PROJECT (IF APPLICATION IS FOR A SPE | CIFIC PROJECT). | | |
| 3) THE CURRENT GENERAL OPERATING BUDGET | | | |
| 4) FINANCIAL STATEMENTS | | | |
| 5) LIST OF BOARD OF DIRECTORS/OFFICERS | | | |
| | | | |

DATE SUBMITTED _____