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

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 calendar year 2010, or tax year beginning May 1, 2010, **and ending** Apr 30, 2011

G Check all that apply: Initial return Initial Return of a former public charity Final return
 Amended return Address change Name change

Name of foundation BAKER-KING FUND, INC		A Employer identification number 52-6036928
Number and street (or P O box number if mail is not delivered to street address) P.O. BOX 5669		B Telephone number (see the instructions) (410) 327-0387
City or town BALTIMORE		C If exemption application is pending, check here <input type="checkbox"/>
State ZIP code MD 21210		D 1 Foreign organizations, check here <input type="checkbox"/>
H Check type of organization: <input type="checkbox"/> Section 501(c)(3) exempt private foundation		D 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input checked="" type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 247,483.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
		<i>(Part I, column (d) must be on cash basis)</i>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))</i>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc. received (att sch)				
2 Ck <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	6,486.	6,486.	6,486.	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain/(loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit/(loss) (att sch)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	6,486.	6,486.	6,486.	
13 Compensation of officers, directors, trustees, etc	2,400.	2,400.	2,400.	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach sch)	875.	875.	875.	0.
c Other prof fees (attach sch)				
17 Interest				
18 Taxes (attach schedule)(see instr.) See Line 18 Stmt	117.	0.	0.	117.
19 Depreciation (attach sch) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) See Line 23 Stmt	656.	0.	0.	656.
24 Total operating and administrative expenses. Add lines 13 through 23	4,048.	3,275.	3,275.	773.
25 Contributions, gifts, grants paid	17,550.			17,550.
26 Total expenses and disbursements. Add lines 24 and 25	21,598.	3,275.	3,275.	18,323.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-15,112.			
b Net investment income (if negative, enter -0-)		3,211.		
c Adjusted net income (if negative, enter -0-)			3,211.	

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
ASSETS	1	Cash – non-interest-bearing	1,481.	3,883.	3,883.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less: allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U S and state government obligations (attach schedule)			
		b Investments – corporate stock (attach schedule) L-10b Stmt	157,311.	150,228.	112,013.
		c Investments – corporate bonds (attach schedule) L-10c Stmt	138,006.	131,710.	131,553.
	11	Investments – land, buildings, and equipment basis			
	Less: accumulated depreciation (attach schedule)				
12	Investments – mortgage loans				
13	Investments – other (attach schedule) L-13 Stmt	43.	34.	34.	
14	Land, buildings, and equipment. basis				
	Less: accumulated depreciation (attach schedule)				
15	Other assets (describe)				
16	Total assets (to be completed by all filers – see instructions Also, see page 1, item I)	296,841.	285,855.	247,483.	
LIABILITIES	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)			
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>				
	27	Capital stock, trust principal, or current funds	296,841.	285,855.	
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see the instructions)	296,841.	285,855.		
31	Total liabilities and net assets/fund balances (see the instructions)	296,841.	285,855.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	296,841.
2	Enter amount from Part I, line 27a	2	-15,112.
3	Other increases not included in line 2 (itemize) DEPOSIT IN TRANSIT CARRIED FROM PRIOR YEAR	3	7,000.
4	Add lines 1, 2, and 3	4	288,729.
5	Decreases not included in line 2 (itemize) NET REALIZED CAPITAL LOSS	5	2,874.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	285,855.

Part IV Capital Gains and Losses for Tax on Investment Income

(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)
P	various	07/20/10
P	various	07/20/10

1a Legg Mason Value Trust 147 sh	P	various	07/20/10
b Legg Mason Partners Corp Bond 1099 sh	P	various	07/20/10
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 4,995.		7,149.	-2,154.
b 11,995.		12,715.	-720.
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(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	
a			-2,154.
b			-720.
c			
d			
e			

2 Capital gain net income or (net capital loss)	[If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2	-2,874.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If 'Yes,' the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2009		220,397.	
2008	14,139.	220,397.	0.064152
2007	30,079.	329,424.	0.091308
2006	43,141.	356,852.	0.120893
2005	42,999.	387,217.	0.111046

2 Total of line 1, column (d)	2	0.387399
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.096850
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	231,505.
5 Multiply line 4 by line 3	5	22,421.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	32.
7 Add lines 5 and 6	7	22,453.
8 Enter qualifying distributions from Part XII, line 4	8	18,323.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	64.
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 foundations only Others enter -0-)		2	0.
3 Add lines 1 and 2		3	64.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	64.
6 Credits/Payments:			
a 2010 estimated tax prmts and 2009 overpayment credited to 2010	6a		
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7		
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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		64.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0.
11 Enter the amount of line 10 to be Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) <input type="checkbox"/>		
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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
<u>PETER EYRING</u> 4401 UNDERWOOD ROAD BALTIMORE MD 21218	DIRECTOR 1.00	0.	0.	0.
<u>LEIGHTON K. WHEELER</u> 115 HAWTHORN ROAD BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.
<u>CLARE V. KING</u> 5993 THE BOWL COLUMBIA MD 21045	VICE PRES. 1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
<u>NONE</u>				
<u>0</u>				
<u>0</u>				
<u>0</u>				
<u>0</u>				

Total number of other employees paid over \$50,000

None

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

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 ----- -----		
----- -----		
----- -----		
----- -----		
----- -----		

Total number of others receiving over \$50,000 for professional services ▶ **None**

Part IX-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 organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1 ----- -----	
2 ----- -----	
3 ----- -----	
4 ----- -----	

Part IX-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 ----- -----	
2 ----- -----	
All other program-related investments. See instructions. 3 ----- -----	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:		
a Average monthly fair market value of securities	1a	229,390.
b Average of monthly cash balances	1b	5,640.
c Fair market value of all other assets (see instructions)	1c	0.
d Total (add lines 1a, b, and c)	1d	235,030.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	235,030.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	3,525.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	231,505.
6 Minimum investment return. Enter 5% of line 5	6	11,575.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1 Minimum investment return from Part X, line 6		1	
2a Tax on investment income for 2010 from Part VI, line 5	2a		
b Income tax for 2010 (This does not include the tax from Part VI)	2b		
c Add lines 2a and 2b		2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	
4 Recoveries of amounts treated as qualifying distributions		4	
5 Add lines 3 and 4		5	
6 Deduction from distributable amount (see instructions)		6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	18,323.
b Program-related investments — total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	18,323.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	18,323.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2010:				
a From 2005	23,940.			
b From 2006	25,484.			
c From 2007	0.			
d From 2008	0.			
e From 2009	7,415.			
f Total of lines 3a through e	56,839.			
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 18,323.				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus	18,323.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	75,162.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
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.	
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				0.
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 not applied on line 5 or line 7 (see instructions)	23,940.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	51,222.			
10 Analysis of line 9:				
a Excess from 2006	25,484.			
b Excess from 2007	0.			
c Excess from 2008	0.			
d Excess from 2009	7,415.			
e Excess from 2010	18,323.			

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2010	(b) 2009	(c) 2008	(d) 2007	
3,211.	6,210.	10,788.	4,359.	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
18,291.	7,415.	17,726.	30,079.	
d Amounts included in line 2c not used directly for active conduct of exempt activities				
0.	0.	0.	0.	
e 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				
7,716.	7,347.	7,192.	10,981.	
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				

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

1 **Information Regarding Foundation Managers:**

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

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part IV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
<i>a Paid during the year</i>				
BRYN MAWR SCHOOL (4TH OF 5) 109 W. MELROSE AVE. BALTIMORE MD 21210	NONE	N/A	GENERAL	2,000.
GARDEN HARVEST 14045 MANTUA MILL ROAD GLYNDON MD 21071	NONE	N/A	GENERAL	1,500.
ST. VINCENT DE PAUL (CAMP ST. VINCENT) 2305 N. CHARLES ST. # 300 BALTIMORE MD 21218	NONE	N/A	GENERAL	720.
ARTS EVERY DAY 113 W. NORTH AVENUE BALTIMORE MD 21201	NONE	N/A	GENERAL	500.
BALTIMORE THEATRE PROJECT 45 W. PRESTON STREET BALTIMORE MD 21201	NONE	N/A	GENERAL	500.
CHESAPEAKE CENTER FOR YOUTH DEVELOPMENT 301 E. PATAPSCO AVE. BALTIMORE MD 21225	NONE	N/A	GENERAL	1,000.
HEARING & SPEECH AGENCY 5900 METRO DRIVE BALTIMORE MD 21215	NONE	N/A	GENERAL	2,500.
INTERNATIONAL YOUTH ACADEMY 3501 TAYLOR AVENUE BALTIMORE MD 21236	NONE	N/A	GENERAL	500.
JOHN HOPKINS SCHOOL OF MEDICINE 100 N. CHARLES STREET BALTIMORE MD 21201	NONE	N/A	GENERAL	1,000.
See Line 3a statement				7,330.
Total				17,550.
<i>b Approved for future payment</i>				
Total				

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

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
EXCISE TAX	117.	0.	0.	117.
Total	<u>117.</u>	<u>0.</u>	<u>0.</u>	<u>117.</u>

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
ANNUAL MEETING EXPENSE	401.	0.	0.	401.
LEGAL NOTICES	77.	0.	0.	77.
POST OFFICE BOX	176.	0.	0.	176.
MISCELLANEOUS	2.	0.	0.	2.
Total	<u>656.</u>	<u>0.</u>	<u>0.</u>	<u>656.</u>

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input type="checkbox"/> Business <input type="checkbox"/> C. LEE GORDON 26134 BRUFFS ISLAND ROAD EASTON MD 21601	TREASURER 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> CHARLOTTE EYRING 4401 UNDERWOOD ROAD BALTIMORE MD 21218	PRESIDENT 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> MARKELL WHITTLESEY 2901 BOSTON ST. #319 BALTIMORE MD 21224	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> CHRISTINA ARDITO 8726 REYNOLDS MILL RD SEVEN VALLEYS PA 17360	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> ANDREW EYRING 4401 UNDERWOOD ROAD BALTIMORE MD 21218	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JOHN H. KING 130 E. BRANDYWINE CIRCLE WILMINGTON NC 28405	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> J. SYDNEY KING 30 OVER RIDGE COURT BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1

Continued

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input type="checkbox"/> Business <input type="checkbox"/> JACQUIE KING 205 KIMBLEWICK DRIVE SILVER SPRING MD 20904	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JAMES S. KING JR 205 KIMBLEWICK SILVER SPRING MD 20904	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JOSEPH KING 205 KIMBLEWICK DRIVE SILVER SPRING MD 20904	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> KATHERINE M.R.KING 4401 UNDERWOOD ROAD BALTIMORE MD 21218	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> ALISA KOTMAIR 1 HAMILL CT #21 BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JAMIE KOTMAIR 1 HAMILL CT #21 BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> ANN K. KOTMAIR 1 HAMILL CT #21 BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JILLIAN KOTMAIR 1 HAMILL CT#21 BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> HENRY LILLY 28785 READING FERRY ROAD PRINCESS ANNE MD 21853	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> CHARLOTTE K. LILLY 23489 MEZICK ROAD TYASKIN MD 21865	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> VIRGINIA LILLY-WILLS 528 AUGUSTA DRIVE ARNOLD MD 21012	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> EMILY LIVINGSTON 5993 THE BOWL COLUMBIA MD 21045	DIRECTOR 1.00	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1

Continued

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input type="checkbox"/> Business <input type="checkbox"/> ANN K. MARSHALL 3575 ROLLINS ROAD CUMMING GA 30040	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> CLARE LEIGHTON MARSHALL 3575 ROLLINS ROAD CUMMING GA 30040	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JULIE K. PRYOR 2970 LAYTON AVE. ATLANTA GA 30318	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> BROOKE W. RODGERS 176 BRANDON RD. BALTIMORE MD 21212	SECRETARY 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> JOHN T.K. WHITTLESEY US EMBASSY AMMAN APO AE 09892	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> CHRIS WHITTLESEY 34155 GLOUSTER CIRCLE FARMINGTONHILLS MI 48331	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> VIRGINIA WHITTLESEY 311 OVERHILL ROAD BALTIMORE MD 21210	DIRECTOR 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> KATHERINE BRUNNELLE 3 PRESTWICK CIRCLE FALMOUTH ME 04105	DIRECTOR 1.00	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
<i>a Paid during the year</i>				
<u>JULIE COMMUNITY CENTER</u> <u>100 S. WASHINGTON ST.</u> <u>BALTIMORE MD 21231</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 750.
<u>LOYOLA CLINICAL CENTERS</u> <u>5911 YORK ROAD #100</u> <u>BALTIMORE MD 21212</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>NEHEMIA HOUSE</u> <u>1607 CROMWELL BRIDGE</u> <u>BALTIMORE MD 21234</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>PUBLIC JUSTICE CENTER</u> <u>500 E. LEXINGTON STREET</u> <u>BALTIMORE MD 21202</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>RADIO READING SERVICE</u> <u>2901 LIBERTY HEIGHTS AVE</u> <u>BALTIMORE MD 21215</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>RED CROSS HOLOCAUST TRACING CENTER</u> <u>4700 MOUNT HOPE DRIVE</u> <u>BALTIMORE MD 21215</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 1,000.
<u>MARYLAND FOOD BANK</u> <u>2200 HALETHORPE FARMS ROAD</u> <u>BALTIMORE MD 21227</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 1,500.
<u>PAUL'S PLACE OUTREACH</u> <u>1118 WARD STREET</u> <u>BALTIMORE MD 21230</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>MARYLAND ZOO</u> <u>DRUID HILL PARK</u> <u>BALTIMORE MD 21214</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>CAMP ST VINCENT</u> <u>2305 N. CHARLES STREET</u> <u>BALTIMORE MD 21218</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 330.
<u>JULIE COMMUNITY CENTER</u> <u>100 S. WASHINGTON STREET</u> <u>BALTIMORE MD 21231</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
<u>RED DEVILS</u> <u>5820 YORK ROAD</u> <u>BALTIMORE MD 21212</u>	NONE	N/A	GENERAL	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 250.

Total

7,330.

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

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
LEGG MASON VALUE TRUST	150,133.	109,732.
MCDONALDS CORPORATION	95.	2,281.
Total	<u>150,228.</u>	<u>112,013.</u>

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
LEGG MASON PARTNERS INCOME	131,710.	131,553.
Total	<u>131,710.</u>	<u>131,553.</u>

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
WELLS FARGO MONEY MARKET	34.	34.
Total	<u>34.</u>	<u>34.</u>