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### Form **990-PF**

EXTENDED TO NOVEMBER 16, 2015

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

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

	טו נט	aleli	iual year zu 14 ur lak year	r veginning		, and end	ing		
	Nan	ne of	foundation					A Employer identification	n number
	T	ΗE	BAKER/MERIN	NE FAMILY FO	UNDATION, IN	C.		26-0016221	L
_				if mail is not delivered to street	B Telephone number	·			
	6	61	8 MARYWOOD F	ROAD				301-469-89	97
				untry, and ZIP or foreign p	C If exemption application is i	bending, check here			
-			all that apply	Initial return	n m <b>i</b> n 1	D 1 Caratan areas (178)	a abasii basa		
G		HECK	ан шасарру	Final return	anty	D 1. Foreign organization	s, check here		
				Address change	Amended return Name change			Foreign organizations m check here and attach c	eeting the 85% test,
H	I C	heck	type of organization	X Section 501(c)(3) ex				1	
		-	ction 4947(a)(1) nonexem		Other taxable private found	ation		E If private foundation sta under section 507(b)(1	
ī	Fa			end of year J Accounti		X Accrua	ıl	F If the foundation is in a	
	(fr	om F	Part II, col. (c), line 16)		ther (specify)			under section 507(b)(1	
_	▶				ımn (d) must be on cash	basis)			
L	Pa	rt E	Analysis of Revenue an (The total of amounts in colu	nd Expenses	(a) Revenue and	(b) Net inve		(c) Adjusted net	(d) Disbursements for charitable purposes
-			necessarily equal the amoun	nts in column (a) )	expenses per books	incon	1 <del>8</del> 	Income	(cash basis only)
		1	Contributions, gifts, grant		55,547.		<del></del>	N/A	
		2		on is not required to attach Sch. B	0 671		C71		
हिंदि		3	Interest on savings and temporals investments		8,671. 9,683.		,671.		STATEMENT 1
J. 18		4	Dividends and interest fro	om securities	9,003.	9	<u>,</u> 683.		STATEMENT 2
0			Gross rents						
67		_	Net rental income or (loss)  Net gain or (loss) from sale of	annets and an illes 10	11,243.		***************************************	<u> </u>	
	nue	h	Gross sales price for all	23,192.	11/213		<del></del>	<u></u>	
NON	Revenue	7	assets on line 6a  Capital gain net income (from	<u> </u>		11	,243.		
	ı,	-	Net short-term capital gai	· '					
LU.		g	Income modifications		}		***************************************		
2		10a	Gross sales less returns and allowances						
SCANNEC		b	Less Cost of goods sold						
J		C	Gross profit or (loss)						
(I)		11	Other income		05 144			<u> </u>	
	_	12	Total. Add lines 1 throug		85,144.	29	,597.		
		13	Compensation of officers, dire		31,518.		0.	<del> -</del>	0.
		14 15	Other employee salaries a Pension plans, employee	-					
	ses		Legal fees	Delients					
	ens		Accounting fees	STMT 3	2,100.		840.		0.
	Ϋ́		Other professional fees						
	Ve	17	Interest						
	and Administrative Expen	18	Taxes	STMT 4	500.		0.		0.
	nist	19	Depreciation and depletio	on					
	Ē	20	Occupancy						
	ĕ	21	Travel, conferences, and	meetings	1,540.		0.		0.
	au	22	Printing and publications						
	ing	23	Other expenses	STMT-5	7,720.	4	<u>,973.</u>		0.
	Operating	24	Total operating and adm	ninistrative	42 270	_	012		
	Ö		expenses Add lines 13 t	through 23	43,378. 19,723.	) 3	<u>,813.</u>		19,723.
		25	Contributions, ditts gran	through 23 OSO oursements.	19,123.	<u> </u>		[	19,723.
		26	Add lines 24 and 25	Jursements.	63,101.	5	,813.		19,723.
_	-	27	Subtract line 28 from line	-191. UT	03/101.		, 010.		13,123.
			Excess of revenue over expen		22,043.				
			Net investment income (			23	,784.		
			Adjusted net income (if n	negative, enter -0-)				N/A	
4	2350	)1	LHA For Paperwork R	Reduction Act Notice, see	instructions.		-		Form <b>990-PF</b> (2014)

D	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
	di r	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	57,129.	70,001.	70,001.
	3	Accounts receivable		1	
		Less allowance for doubtful accounts			<del></del>
	4	Pledges receivable ► 53,432.			
		Less allowance for doubtful accounts ▶	53,432.	53,432.	53,432.
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	1,213.	550.	550.
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
٩	1	Investments - U S and state government obligations			
	b	Investments - corporate stock STMT 6	414,534.	437,463.	437,463.
	C	Investments - corporate bonds STMT 7	157,383.	189,585.	189,585.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation		···	
	12	Investments - mortgage loans			
	13	Investments - other	, ,		
	14	Land, buildings, and equipment basis	-		
		Less accumulated depreciation		2 161	
		Other assets (describe STATEMENT 8)	2,428.	3,161.	3,161.
	16	Total assets (to be completed by all filers - see the	606 110	554 100	754 100
	ļ	instructions. Also, see page 1, item I)	686,119.	754,192.	<u>754,192.</u>
		Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iai.	21	Mortgages and other notes payable			
	22	Other liabilities (describe			
		7.11.11111 (11.11.1111111111111111111111	0.	0.	
	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	0.	0.	
Ş		and complete lines 24 through 26 and lines 30 and 31.	686,119.	754,192.	
2	1	Unrestricted	000,119.	134,132.	
Net Assets or Fund Balances	25	Temporarily restricted			
Ð	26	Permanently restricted			
בָּ		Foundations that do not follow SFAS 117, check here			
<u>6</u>		and complete lines 27 through 31.			
ets	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
et /	29	Retained earnings, accumulated income, endowment, or other funds	686,119.	754,192.	
Ž	30	Total net assets or fund balances	000,117.	134,132.	
	21	Total lightities and not appointfund balances	686,119.	754,192.	
_	31	Total liabilities and net assets/fund balances	•	134,172	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	686,119.
		r amount from Part I, line 27a		2	22,043.
3	Othe	r increases not included in line 2 (itemize)   CHANGE IN FI	MV OF ASSETS	3	46,030.
		lines 1, 2, and 3		4	754,192.
_		eases not included in line 2 (itemize)		5	0:
6_	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	754,192.

THE BAKER/MERINE FAMILY FOUNDATION, INC.

26-0016221

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		ER/MERINE FA			N,	INC.		2	6-001	6221	Page 3
Part IV Capital Ga	ins and L	osses for Tax on In	vestment	Income							
		and(s) of property sold (e g , or common stock, 200 shs			(b) H	How acquire - Purchase - Donation	d (d	) Date a (mo , da	acquired By, yr )	( <b>d)</b> Dat (mo , da	
la											
b SEE ATTACE	HED STA	TEMENT_								<u>-</u>	
<u>c</u>		"			ļ						
<u>d</u>				<del></del>	-						
<u>e</u>	/6\	Depresentian allowed	(#) Coc	t or other beers	<u>'</u>			(h) Ca			
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale					in or (loss) (f) minus (		
<u>a</u>				<del>-</del>							
<u>b</u>											
d .		<u></u>									
e 23,19	92.			11,94	9.					11	,243.
<del></del>		column (h) and owned by	the foundation	· · · · · · · · · · · · · · · · · · ·		···	(1) G	ains (Ci	ol (h) gain i		<u> </u>
(i) F M V as of 12/31/69	1	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (I) col (J), If any			col (l	r), but n	ot less than (from col. (f	-0-) or	
a		· -									
b											
C											
d											
e									-	11	,243.
2 Capital gain net income or (	net capital loss	If gain, also enter  If (loss), enter -0-			}	2				11	,243.
Net short-term capital gain	or (loss) as def				[			•			
If gain, also enter in Part I, I			- (-)		]						
If (loss), enter -0- in Part I,					لا	3			N/A		
		Section 4940(e) for					Inco	me			
For optional use by domestic	private foundat	ions subject to the section 4	1940(a) tax on	net investment in	come	))					
f section 4940(d)(2) applies, l	eave this part b	lank									
tion the foundation lights for th	a sastian 4040	) šavo a m šiha dvaševiho šalala a ere									X No
Was the foundation liable for th				•	100 /					L Yes	LA NO
f "Yes," the foundation does no Enter the appropriate amou		mn for each year, see the in			ntries					<del></del>	<del></del>
(a)		(b)	101111111111111111111111111111111111111	ore maning any or	(c)					(d)	
Base periód years Calendar year (or tax year b	sainnina in)	Adjusted qualifying dist	tributions	Net value of no	nchar	rtable-use as	ssets		Distribi col (b) divi	ùtion ratio ded by col	(c))
2013	· • · · · · · · · · · · · · · · · · · ·	1	8,186.			561,2	225.	,	(4)	<del></del> .	32404
2012	,. ,		1,720.			501,5					13308
2011		1	9,200.			425,0					15167
2010			2,565.			352,9	58.				53931
2009		1	3,650.			278,8	375.			.04	18947
							-				
2 Total of line 1, column (d)								2		.2	<u>33757</u>
Average distribution ratio for	or the 5-year ba	se period - divide the total o	on line 2 by 5,	or by the number	of ye	ars					
the foundation has been in	existence if les	s than 5 years						3		.04	<u> 16751</u>
Enter the net value of noncl	naritable-uce as	cets for 2014 from Part Y	line 5					_		643	,960.
FUTER THE HET AND OF HOHE!	ים יונטויט־עטט מנ	DOGLO IUI ZUIT IIUIII FAIL A, I	IIIIG J					4		043	, , , , , , .
Multiply line 4 by line 3								5		30	,106.
5 Enter 1% of net investment	income (1% o	f Part I. line 27b)						6			238.
										- د	
7 Add lines 5 and 6								7	-	30	,344.
3 Enter qualifying distribution								8		19	723.
If line 8 is equal to or greate	er than line 7, c	heck the box in Part VI, line	1b, and comp	lete that part using	g a 1º	% tax rate					
See the Part VI instructions		<u> </u>								orm <b>990-</b>	DE (004.4)
123521 11-24-14									F-	いいい シゴリー	⊏1⊏ (ZUI4)

Form 990-PF (2014)\_

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orn	<del></del>		0010			Page 4
Pâ	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see i	nstru	ctio	ns)
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 instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			4	76.
	of Part I, line 27b				, -,,	
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0.
3	Add lines 1 and 2	3			4	76.
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			4	76.
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 114.					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 500.					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7	]		6	14.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			_	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1	38.
	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 138 - Refunded ▶	11				0.
	rt VII-A Statements Regarding Activities		•			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	2		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$ 0 •					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ▶ \$ 0.					
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, articles of incorporation, or	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
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?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MD					
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) or 4942(j)(5) for cale	ndar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			Forr	n <b>990</b>	-PF (	2014)

orm	1990-PF(2014) THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016	<u> 221</u>		Page 5
Pa	irt 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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		·	
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► THE DIRECTORS  Telephone no ►301-46	9-8	997	_
	Located at ▶6618 MARYWOOD ROAD, BETHESDA, MD ZIP+4 ▶20			04
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>•</b>	. [ ]
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the	''		
	foreign country			
Pε	ert VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		<u></u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year did the foundation (either directly or indirectly)		. 00	-140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
N	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16		х
	Organizations relying on a current notice regarding disaster assistance check here			
r	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2014?	4.		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	16		Λ
_	defined in section 4942(j)(3) or 4942(j)(5))			
9	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014?			
h	If "Yes," list the years ►			
~	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions )  N/A	2b		
_	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here	-20		
٠	The provisions of section 4542(a)(2) are being applied to any of the years instead in 2a, its tire years here			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
04	during the year?			
h	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
u	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)  N/A			
4-	· · · · · · · · · · · · · · · · · · ·	3b		Х
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
Q	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,	1	v

<u>orm 990-PF (20</u>			INC.	<u> 26-00162</u>	221	Page 6
Part VII-B	<b>Statements Regarding Activities for Which</b>	Form 4720 May Be I	Required (contin	ued)		
5a During the	year did the foundation pay or incur any amount to					
(1) Carry (	on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Ye	s X No		
(2) Influen	ce the outcome of any specific public election (see section 4955),	or to carry on, directly or indir				
any vo	ter registration drive?		Y <sub>0</sub>	s X No		
(3) Provid	e a grant to an individual for travel, study, or other similar purpose	§?	Ye	es X No		
(4) Provid	e a grant to an organization other than a charitable, etc , organizati	on described in section				
	I)(4)(A)? (see instructions)		Ye	es X No		
(5) Provid	e for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or	for	1		
the pre	vention of cruelty to children or animals?		Ye	es X No		
	er is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify u	nder the exceptions described	in Regulations			
section 53	4945 or in a current notice regarding disaster assistance (see insti	ructions)?	· ·	N/A	5b	Ì
	ns relying on a current notice regarding disaster assistance check	·				
	er is "Yes" to question 5a(4), does the foundation claim exemption		ined			
	responsibility for the grant?		1/A 🔲 Ye	es No		
	ttach the statement required by Regulations section 53.49	45-5(d)				
	ndation, during the year, receive any funds, directly or indirectly, to	• •		ļ	-	
	benefit contract?	· yerrmenne en		es X No		1
•	ndation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	x
	6b, file Form 8870			F		
	during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y	s X No		
-	the foundation receive any proceeds or have any net income attrit			N/A	7b	
Part VIII	Information About Officers, Directors, Trus Paid Employees, and Contractors		anagers, Highly	<b>y</b>	• • •	
List all office	ers, directors, trustees, foundation managers and their	r compensation.				
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense ount, other
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acc	ount, other lowances
IARLA M	BAKER	DIRECTOR	J. J	comparisation	<b>—</b>	
	RYWOOD ROAD					
BETHESD!		2.00	15,759.	0.		0.
ROBERT I		DIRECTOR	· · · · · · · · · · · · · · · · · · ·			
	RYWOOD ROAD	7				
BETHESDA		2.00	15,759.	0.		0.
	<u> </u>					
		7				
		7				
		1				
		7				
Compensa	tion of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."			
(-) No-	and address of each ampleuse and mare than \$50,000	(b) Title, and average	4.30	(d) Contributions to employee benefit plans and deferred	(e)	Expense
(a) Ivan	ne and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	acc	ount, other lowances
NO	ONE					
		_		ı		
	-					
		<u></u>				
					1.	
• •					ľ	
		7				
		<u>]</u> _			L	
otal number of	f other employees paid over \$50 000			<b>•</b>	_	0

Form 990-PF (2014) THE BAKER/MERINE FAMILY FOUNDAT		<u>-0016221</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) C	ompensation
NONE			
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<del></del>	<b>•</b>	0
		<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati number of organizations and other beneficiaries served, conferences convened, research papers pro-	istical information such as the	Exper	ises
1 N/A DIRECT CONTRIBUTIONS TO OTHER CHARITIES			
THE PERSON CONTRIBUTIONS TO CHARTITIES		1	
		1	0.
2			
		1	
		1	
3			
		]	
4		_	
		_	
D. + DV D.		<u> </u>	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year of	- hand and 0		
37/3	n lines 1 and 2	Amou	int
1 N/A	·	-	
		-	
2			
		1	
		1	
All other program-related investments See instructions			
3			
		1	
Total. Add lines 1 through 3			0.

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

Form **990-PF** (2014)

19,723.

3a

3b

4

5

6

3

Amounts set aside for specific charitable projects that satisfy the

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

a Suitability test (prior IRS approval required)

income Enter 1% of Part I, line 27b

b Cash distribution test (attach the required schedule)

### Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	Distributable amount for 2014 from Part XI, line 7				31,722.
	Undistributed income, if any, as of the end of 2014		<del></del>		31,722.
	Enter amount for 2013 only			0.	
	Total for prior years		0.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2	Excess distributions carryover, if any, to 2014	***************************************	U.		
	From 2009				
	From 2010 5,089.				
	From 2011	1			
_	From 2012				
_	From 2013				
_	Total of lines 3a through e	5,089.			
	Qualifying distributions for 2014 from	5,002.		······································	
	Part XII, line 4 ▶\$ 19,723.				
	Applied to 2013, but not more than line 2a			0.	
	Applied to undistributed income of prior	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	years (Election required - see instructions)		0.		
	Treated as distributions out of corpus			······	
	(Election required - see instructions)	0.			
	Applied to 2014 distributable amount				19,723.
	Remaining amount distributed out of corpus	0.	······		23,7,20.
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	5,089.		111111111111111111111111111111111111111	5,089.
6	must be shown in column (a) ) Enter the net total of each column as				
	indicated below:	0.			
	Corpus Add Ilnes 3f, 4c, and 4e Subtract line 5	0.			
	Prior years' undistributed income Subtract		0.		
	line 4b from line 2b		<u> </u>		
	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
	Subtract line 6c from line 6b Taxable				
	amount - see instructions		0.		
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount - see instr			0.	
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				6,910.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election				
	may be required - see instructions)	0.			
8	Excess distributions carryover from 2009				
	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	0.		**************************************	
0	Analysis of line 9				
a	Excess from 2010				
b	Excess from 2011				
C	Excess from 2012				
_	Excess from 2013				
<b>e</b>	Excess from 2014				

	ER/MERINE F				16221 Page 10
Part XIV Private Operating F			I-A, question 9)	<u> N/A</u>	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	or 2014, enter the date of t	he ruling	▶		
b Check box to indicate whether the foun	d <u>ation is a private operatii</u>	g foundation described	ın section	4942(J)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
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					
• •			<del></del>		
(4) Gross investment income  Part XV Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5,000 or m	oro in accete
Part XV   Supplementary Into			ii tile loulidatioi	i nau \$5,000 or nii	ore iii assets
		<u> </u>			<del></del>
1 Information Regarding Foundation	_	00/ -444-4-1	L		
a List any managers of the foundation wi year (but only if they have contributed it			tributions received by the	e toundation before the clo	se of any tax
, , , , ,	note than \$5,000) (occ s	000001 307 (4)(2) )			
NONE			<del> </del>		<del></del>
b List any managers of the foundation when other entity) of which the foundation has			(or an equally large port	ion of the ownership of a p	artnership or
* *	is a 10 % of greater littere.	).			
NONE					<del> </del>
2 Information Regarding Contribut			-		
Check here ► X If the foundation					
the foundation makes gifts, grants, etc	<del></del>	<del></del>	······································		10
a The name, address, and telephone num	nber or e-mail address of t	he person to whom app	lications should be addre	ssed	
		<del></del>		<del> </del>	
b The form in which applications should	be submitted and informa	tion and materials they s	hould include		
c Any submission deadlines			•		
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields	, kınds of ınstitutions. or	other factors	
,	. , , , , , , , , , , , , , , , , , , ,		• -		

Part XV Supplementary Information 3 Grants and Contributions Paid During the		Payment	····	
Recipient	If recipient is an individual.		1	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
MONTGOMERY COUNTY HUMANE SOCIETY	NONE	PUBLIC	GENERAL FUND	
14645 ROTHGEB DRIVE				
ROCKVILLE, MD 20850				1,200
MOST VALUABLE KIDS	NONE	PUBLIC	GENERAL FUND	
11122 STEPHALEE LANE	NOWE	102210		
ROCKVILLE, MD 20852				610
NARAL PRO-CHOICE AMERICA FOUNDATION	NONE	PUBLIC	GENERAL FUND	
1156 15TH STREET, NW SUITE 700 WASHINGTON, DC 20005				1,000
WASHINGTON, DC 20003				1,000
ROUND HOUSE THEATER	NONE	PUBLIC	GENERAL FUND	
P.O. BOX 30688				
BETHESDA, MD 20824		-		4,000
SADIE NASH LEADERSHIP PROJECT	NONE	PUBLIC	GENERAL FUND	
4 W 43RD ST				
NEW YORK, NY 10035				1,000
	NTINUATION SHE	ET(S)	▶ 3a	19,723
<b>b</b> Approved for future payment				
NONE				
T-1-1		<u> </u>		0
Total			<u>▶ 3b</u>	

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

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income		by section 512, 513, or 514	(8)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a	_				
b					
C	_		-		
d	_	<del>.</del>			
e					<del> </del>
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·	<del></del>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	i l		14	8,671.	
4 Dividends and interest from securities			14	8,671. 9,683.	<del></del>
5 Net rental income or (loss) from real estate		N 1110			, , , , <del>, , , , , , , , , , , , , , , </del>
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14		
8 Gain or (loss) from sales of assets other					
than inventory					11,243.
9 Net income or (loss) from special events					
IO Gross profit or (loss) from sales of inventory					
11 Other revenue		·			
a					
b					
C	_				
d					
e	_				
12 Subtotal Add columns (b), (d), and (e)			) .	18,354.	
13 Total. Add line 12, columns (b), (d), and (e)				13	29,597.
(See worksheet in line 13 instructions to verify calculations	)				

LING NO.		cpium beleti neti	-					•		ibuteu iii	portaintly to the	accomplishin	CIII OI
▼	th	e foundation's e	xempt purpos	es (other th	an by provi	ding fur	ids for such	) purpose	s)		•		
	THE	ORGANI	ZATION	ONLY	MAKE	S GI	RANTS	AND	CONTI	RIBU	TIONS TO	OTHE	R
	CHA	RITABLE	ORGAN	IZATI	ONS.	IT	DOES	NOT	HAVE	ANY	DIRECT	CHARI	<b>TABLE</b>
	ACT	IVITIES	•							_			
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### Form 990-PF (2014) THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016221 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

		•	rectly engage in any of the followir			on 501(c) of		Yes	No
			)(3) organizations) or in section 52		ıızatıons?				
a Tr	ansfers	from the reporting founda	ation to a noncharitable exempt or	rganization of					
(1	) Cash						1a(1)		<u>X</u>
(2	) Other	assets					1a(2)		X
b Ot	ther tran	sactions							
•	•	of assets to a noncharitat	• •				16(1)		X
(2	) Purch	iases of assets from a nor	ncharitable exempt organization				1b(2)		X
(3	) Renta	l of facilities, equipment, o	or other assets				1b(3)		X
(4	) Reimi	oursement arrangements					1b(4)		Х
(5	) Loans	or Ioan guarantees					16(5)		X
(6	) Perfo	rmance of services or mei	mbership or fundraising solicitation	ons			1b(6)		X
c St	naring of	facilities, equipment, mai	iling lists, other assets, or paid em	nployees			10		X
d If 1	the ansv	ver to any of the above is '	"Yes," complete the following sche	edule Column (b) should alv	ways show the fair m	narket value of the goods, o	ther ass	ets,	
			oundation. If the foundation receiv					•	
			other assets, or services received						
Lne	no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and	shanng an	rangeme	ents
			N/A						
						<del></del>			
				· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	·			
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			ly affiliated with, or related to, one		zations described	_	_		_
			than section 501(c)(3)) or in sect	tion 527?		L	Yes	X	No
b If "	Yes," co	mplete the following sche							
		(a) Name of orga	anization	(b) Type of organization	(	c) Description of relationsh	пр		
		N/A							
		· <del>-</del>							
Sign Here	and be		that I have examined this return, including inplete. Declaration of preparer (other that			has any knowledge May retu sho	the IRS on with the	e prepan	er tr)?
. J. <b>J</b>		ature of officer or trustee	· para	Date	Title	L	Yes		J No
	Jayıı		ma December	Date	Title	Charle TE of Drive			
		Print/Type preparer's nai	me Preparer's si	ignature	1 /	Check X if PTIN			
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aid			OBINETTE TO THE TOTAL		<u>'</u>		042		
	arer	Firm's name ► BRUC	CE W. ROBINETTE	, CPA		Firm's EIN ► 54-14	684	48	
JSE (	Only								
			9-A CARLISLE DR			_			
		HEI	RNDON, VA 20170			Phone no 703-83			
						Fo	rm <b>990</b>	PF	(2014)

OF

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo , day, yr ) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs MLC Co (mo, day, yr) 1a 15 03/06/1207/18/14 3M P <sub>b</sub> 50 INTEL CORP 08/28/1211/28/14 P 15 JOHNSON & JOHNSON P 03/07/1202/14/14 d 10 JOHNSON & JOHNSON P 03/07/1207/18/14 50 MEDTRONIC P 03/07/1205/09/14 TEVA PHARMACEUTICAL 06/28/1104/11/14 f 25  $\overline{\mathbf{p}}$ AIR PRODS & CHEMS INC g 15 P 06/16/0904/17/14 h 20 AMGEN INC COM P 06/01/0911/28/14 .3333 CDK GLOBAL HOLDINGS LLC P 05/22/0810/16/14 25 CONSTELLATION BRANDS P 12/14/0602/18/14 k 10 CONSTELLATION **BRANDS**  $\bar{P}$ 12/14/06/10/31/14 ı 15 12/14/0611/28/14 CONSTELLATION BRANDS P m 15 MASTERCARD INC-A 05/22/0911/28/14 P n 25 PACCAR INC 02/05/0811/28/14 P 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 2,174 1,283. 891. a 1,879. 635. 1,244. b 1,391. 963. 428. C 1,018. 642. 376. d 3,010. 1,128.1,882. 1,264. 85. 1,179. f 1,776.987. 789. g  $3, \overline{312}$ . 1,011. 2,301. h 5. 8. 3. 2,012. 711. 1,301.  $\overline{912}$ . 284. 628. 1,443. 427. 1,016. 1 1,316.252. m 1,064. 1,677. 1,079. 598. n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any 891. 635. 428. C 376. d 1,128. 85. 789. g 2,301. h 3. 1,301. 628. 1,016. 1,064. m 598. n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 11,243. 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8 N/A

### THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016221

Part XV Supplementary Information 3 .Grants and Contributions Paid During the Y			<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
tains and decreas (notice of basiness)	or substantial contributor	recipient		<del></del>
CUTNE CLOBAL TWO	YOUR			
SHINE GLOBAL, INC 225 MIDLAND AVENUE	NONE	PUBLIC	GENERAL FUND	
MONTCLAIR, NJ 07042				2,500
STRATHMORE HALL FOUNDATION	NONE	PUBLIC	GENERAL FUND	
5301 TUCKERMAN LANE NORTH BETHESDA, MD 20852				310
	-			310
BEST FRIENDS ANIMAL SOCIETY	NONE	PUBLIC	GENERAL FUND	
5001 ANGEL CANYON ROAD				
KANAB, UT 84741	1.00			500
DISTRICT OF COLUMBIA ARTS CENTER	NONE	PUBLIC	GENERAL FUND	
2438 18 ST NW WASHINGTON, DC 20009				1,000
,	***			1,000
THE ELLINGTON FUND	NONE	PUBLIC	GENERAL FUND	
2001 10TH STREET, NW				
WASHINGTON, DC 20001				2,000
FCBA FOUNDATION	NONE	PUBLIC	GENERAL FUND	
1020 19TH STREET, NW, SUITE 325 WASHINGTON, DC 20036				1,000
		-		
FIGHTING BLINDNESS	NONE	PUBLIC	GENERAL FUND	
7168 COLUMBIA GATEWAY DRIVE, SUITE 100				
COLUMBIA, MD 21046				100
HAMPTONS INTERNATIONAL FILM FESTIVAL 47 NEWTOWN LANE	NONE	PUBLIC	GENERAL FUND	
EAST HAMPTON, NY 11937				2,565
				<u> </u>
JCC OF GREATER WASHINGTON	NONE	PUBLIC	GENERAL FUND	
6125 MONTROSE ROAD				
ROCKVILLE, MD 20852				149
JEWISH WOMEN INTERNATIONAL 1129 20TH STREET NW, SUITE 801	NONE	PUBLIC	GENERAL FUND	
WASHINGTON, DC 20036				250
Total from continuation sheets				11,913

### THE BAKER/MERINE FAMILY FOUNDATION, INC. 26-0016221

Part XV Supplementary Informat				
3 , Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
MARYLAND PUBLIC TELEVISION	NONE	PUBLIC	GENERAL FUND	
11767 OWINGS MILLS BOULEVARD				
OWINGS MILLS, MD 21117			<u> </u>	200.
MONTGOMERY COUNTY PUBLIC LIBRARY	NONE	PUBLIC	GENERAL FUND	
7400 ARLINGTON ROAD				
BETHESDA, MD 20814				30.
ROSWELL PARK CANCER INSTITUTE	NONE	PUBLIC	GENERAL FUND	
ELM AND CARLTON STREETS			DENEKALI FOND	:
BUFFALO, NY 14263				500.
SMITHSONIAN NATIONAL ZOO	NONE	PUBLIC	ARVERAL BING	
3001 CONNECTICUT AVE. NW	NONE	POBLIC	GENERAL FUND	
WASHINGTON, DC 20008				175.
TIGER WOODS TOURINGTON				
TIGER WOODS FOUNDATION 121 INNOVATION DRIVE, SUITE 150	NONE	PUBLIC	GENERAL FUND	
IRVINE, CA 92617				199.
WORLD WILDLIFE FUND 1250 24TH STREET, N.W.	NONE	PUBLIC	GENERAL FUND	
WASHINGTON, DC 20037				165.
17876 ST. CLAIR AVENUE	NONE	PUBLIC	GENERAL FUND	
CLEVELAND OH 44110		1		50.
THE NATIONAL THEATRE CORPORATION 1321 PENNSYLVANIA AVE NW	NONE	PUBLIC	GENERAL FUND	
WASHINGTON, DC 20004				220.
				220.
Total from continuation sheets		<u> </u>		
			-	<u> </u>

### Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Name of the organization

**Employer identification number** 

THE BAKER/MERINE FAMILY FOUNDATION, 26-0016221 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (II) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

### THE BAKER/MERINE FAMILY FOUNDATION, INC.

Part I	Contributors	(see instructions)	. Use duplicate cop	nes of Part I if addition	onal space is needed.
--------	--------------	--------------------	---------------------	---------------------------	-----------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	#2 6618 MARYWOOD ROAD BETHESDA, MD 208172204	\$ 55,547.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

### THE BAKER/MERINE FAMILY FOUNDATION, INC.

Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number THE BAKER/MERINE FAMILY FOUNDATION, INC.

26-0016221

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this info once)

\$\[
\] Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTER	EST ON SAVI	NGS AND TE	MPOR/	ARY CASH	IN	VESTMENTS	SI	ATEMENT	1
SOURCE			A) ENUE BOOKS	NET	' IN	(B) VESTMENT COME		(C) ADJUSTED IET INCOMI	€
CHEVY CHASE TRUST (	COMPANY		8,67	71.		8,671.			
TOTAL TO PART I, L	INE 3		8,67	71.		8,671.			
FORM 990-PF	DIVIDEND	S AND INTE	REST	FROM SE	CUR	ITIES	SI	'ATEMENT	2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENU PER BOO		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
CHEVY CHASE TRUST	9,683	•	0.	9,6	83.	9,68	33.		
TO PART I, LINE 4	9,683	•	0.	9,6	83.	9,68	33.		
FORM 990-PF		ACCOUNT	ING I	FEES			SI	ATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET MEN	(B) T INVEST NT INCOM		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
TAX RETURN PREPARA	TION -	2,100	•	84	10.				0.
TO FORM 990-PF, PG	1, LN 16B	2,100	- — - —	84	0.		_		0.
FORM 990-PF	<del></del>	ТА	XES				SI	ATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS				(C) ADJUSTEI NET INCOM		(D) CHARITAI PURPOSI	
INCOME TAX PAID	_	500	•	<del></del>	0.	<del></del>			0.
TO FORM 990-PF, PG	1, LN 18	500	. —		0.				0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
INVESTMENT FEES ADMINISTRATIVE EXPENSES	4,973. 2,747.		973.	-		0.
TO FORM 990-PF, PG 1, LN 23	7,720.	4,	973.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	ET
EQUITIES-STMT ATTACHED				437,463.	437,4	63.
TOTAL TO FORM 990-PF, PART II	, LINE 10B			437,463.	437,4	63.
FORM 990-PF	CORPORAT	E BONDS	<del></del>		STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	T
INTERMEDIATE BONDS-STMT ATTACK	HED			189,585.	189,5	85.
TOTAL TO FORM 990-PF, PART II	, LINE 10C			189,585.	189,5	85.
FORM 990-PF	OTHER	ASSETS	-		STATEMENT	8
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FAIR MARKE VALUE	T
ACCRUED INTEREST & DIVIDENDS		2,428.		3,161.	3,1	61.
TO FORM 990-PF, PART II, LINE	15	2,428.	<del></del>	3,161.	3,1	61.



### Asset Detail Section

Statement of Value and Activity

January 1, 2014 - December 31, 2014

Holdings by Catagory						
Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
Cash & Equivalents SEI Dally Income TR Govt II Fund CUSIP: 783965650	68,878.310	\$68,878.31	1.00	\$68,878,31	\$0.02	\$6.89
Trial Cash & Ethinalents		\$68.878.31		\$68.678.31	20:05	68,53
Domestic Equities Abercrombie & Fitch Co CL A	100.000	\$2,784.00	28.64	\$2,864.00	\$0.00	\$80.00
Air Prods & Chems Inc CUSIP: 009158106	50.000	\$2,382.55	144.23	\$7,211.50	\$38.50	\$154.00
ALCOA Inc CUSIP: 013817101	200,000	\$6,137.70	15.79	\$7,895.00	\$0.00	\$60.00
Altria Group Inc CUSIP: 02209S103	175.000	\$2,829.76	49.27	\$8,622.25	\$91.00	\$364.00
American Express Co CUSIP: 025816109	100.000	\$3,584.44	93.04	\$9,304.00	\$0.00	\$104.00
Amgen Inc CUSIP: 031162100	60.000	\$2,905.00	159.29	\$9,557.40	\$0.00	\$189.60
Apache Corp CUSIP: 037411105	75.000	\$5,012.23	62.67	\$4,700.25	\$0.00	\$75.00
Apple Computer CUSIP: 037833100	105.000	\$4,989.60	110.38	\$11,589.90	\$0.00	\$197.40
AT & T Inc CUSIP: 00206R102	250.000	\$6,358.19	33.59	\$8,397.50	\$0.00	\$470.00
Automatic Data Processing Inc CUSIP: 053015103	100.000	\$3,714.88	83.37	\$8,337.00	\$49.00	\$196.00

Asset Detail Section (continued)

Statement of Value and Activity

January 1, 2014 - December 31, 2014

Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
Baxter International Inc CUSIP: 071813109	100.000	\$4,816.78	73.29	\$7,329.00	\$52.00	\$208.00
Boeing Company CUSIP: 097023105	80.000	\$4,820.11	129.98	\$10,398.40	\$0.00	\$291.20
CDK Global Holdings LLC CUSIP: 12508E101	33.000	\$522.44	40.76	\$1,345.08	\$0.00	\$15.84
Chevron Corporation CUSIP: 166764100	00009	\$2,114.27	112.18	\$6,730.80	\$0.00	\$256.80
Cisco Systems Inc CUSIP: 17275R102	300.000	\$6,221.34	27.82	\$8,344.50	\$0.00	\$228.00
Citigroup Inc CUSIP: 172967424	200.000	\$10,300.30	54.11	\$10,822.00	\$0.00	\$8.00
Coca Cola Co CUSIP: 191216100	160.000	\$3,363.20	42.22	\$6,755.20	\$0.00	\$195.20
ConocoPhillips CUSIP: 20825C104	100.000	\$4,365.48	90'69	\$6,906.00	\$0.00	\$292.00
Constellation Brands Inc CUSIP: 21036P108	100.000	\$2,467.67	98.17	\$9,817.00	\$0.00	\$0.00
EMC Corp/Mass CUSIP: 268648102	300.000	\$4,626.75	29.74	\$8,922.00	\$34.50	\$138.00
Excon Mobil Corporation CUSIP: 30231G102	100.000	\$6,932.53	92.45	\$9,245.00	\$0.00	\$276.00
Ford Motor Company CUSIP: 345370860	700.000	\$8,456.00	15.50	\$10,850.00	\$0.00	\$350.00
General Electric Corp CUSIP: 369604103	200.000	\$5,100.73	25.27	\$5,054.00	\$46.00	\$184.00
Harley Davidson Inc Com CUSIP: 412822108	150.000	\$4,348.42	65.91	\$9,886.50	\$0.00	\$165.00

WIND THE WORLD WITH THE WINDS TON, FEIN 26-0016221

### Statement of Value and Activity

January 1, 2014 - December 31, 2014

Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
Hewlett Packard Co CUSIP: 428236103	125.000	\$5,695.19	40.13	\$5,016.25	\$20.00	\$80.00
Home Depot Inc CUSIP: 437076102	100.000	\$2,807.51	104.97	\$10,497.00	\$0.00	\$188.00
IBM Corporation CUSIP: 459200101	40.000	\$4,116.25	160.44	\$6,417.60	\$0.00	\$176.00
Intel Corp CUSIP: 458140100	250.000	\$4,324.50	36.29	\$9,072.50	\$0.00	\$225.00
Johnson & Johnson CUSIP: 478160104	90.000	\$5,059.91	104.57	\$9,411.30	\$0.00	\$262.00
JP Morgan Chase & Co CUSIP: 46625H100	150.000	\$5,813.24	62.58	\$9,387.00	\$0.00	\$240.00
Kate Spade & Company CUSIP: 485865109	150.000	\$5,449.88	32.01	\$4,801.50	\$0.00	\$0.00
Martin Marietta Matts Inc CUSIP: 573284106	60.000	\$6,264.31	110.32	\$6,619.20	\$24.00	\$96.00
MasterCard Inc-A CUSIP: 57636Q104	185.000	\$3,111.85	86.16	\$15,939.60	\$0.00	\$118.40
McDonalds Corp CUSIP: 580135101	80.000	\$5,050,14	93.70	\$7,496.00	\$0.00	\$272.00
Medtronic CUSIP: 585055106	150.000	\$5,106.34	72.20	\$10,830.00	\$45.75	\$183.00
Microsoft Corp CUSIP: 594918104	300.000	\$8,643.06	46.45	\$13,935.00	\$0.00	\$372.00
Morgan Stanley CUSIP: 617446448	400.000	\$11,433.40	38.80	\$15,520.00	\$0.00	\$160.00
Navient Corp CUSIP: 63938C108	475.000	\$6,317.34	21.61	\$10,264.75	\$0.00	\$285.00

\$120.00

\$30.00

\$6,405.75

85.41

\$4,829.02

75.000

International Equities Schlumberger LTD CUSIP: 806857108

0063357 - 0900576

Asset Detail Section (continued)

Statement of Value and Activity

January 1, 2014 - December 31, 2014

Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
Paccar Inc CUSIP: 693718108	175.000	\$6,584.33	68.01	\$11,901.75	\$175.00	\$154.00
Pepsico Inc CUSIP: 713448108	120.000	\$7,425.28	94.56	\$11,347.20	\$78.60	\$314.40
Pfizer Inc CUSIP: 717081103	171.000	\$4,377.03	31.15	\$5,326.65	\$0.00	\$191.52
Philip Morris International CUSIP: 718172109	75.000	\$1,688.03	81.45	\$6,108.75	\$75.00	\$300.00
Philips 66 CUSIP: 718546104	20.000	\$1,376.51	71.70	\$3,585.00	\$0.00	\$100.00
SLM Corp CUSIP: 78442P106	475.000	\$3,517.91	10.19	\$4,840.25	\$0.00	\$0.00
United Technologies Corp CUSIP: 913017109	80.000	\$3,360.24	115.00	\$9,200.00	\$0.00	\$188.80
WalMart Stores Inc CUSIP: 931142103	125.000	\$6,815,26	85.88	\$10,735.00	\$60.00	\$240.00
Wells Fargo & Co New CUSIP: 949746101	225.000	\$7,130.71	54.82	\$12,334.50	\$0.00	\$315.00
Zoetis Inc CUSIP: 98978V103	150.000	\$4,810.33	43.03	\$6,454.50	\$0.00	\$49.80
3M Co CUSIP: 88579Y101	60.000	\$4,796.20	164.32	\$9,859.20	80.00	\$246.00

Baker/Merine Family Foundation Inc. - Account # CHHE001165

# Asset Detail Section (continued)

IN THE SECONDATION, FEIN 26-0016221

## Statement of Value and Activity

January 1, 2014 - December 31, 2014

Coodings	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
TEVA Pharmaceutical Inds LTD ADR CUSIP: 881624209	IR 125.000	\$5,254.12	57.51	\$7,188.75	\$0.00	\$143.86
Total lidemenanal Equilies		\$10.089##		\$13,594,60	Coces	88 E92\$
Mutual Funds, CTFs & UITs Shares MSCI EAFE ETF CUSIP: 464287465	100.000	\$6,557.09	60.84	\$6,084.00	\$0.00	\$176.10
Total Militan Funde OTFE & UTE		\$6557.09	\$6,557.79	\$6.084.00	\$0.00	01.8213
Taxable Fixed Income Cecil County Maryland General Obligation DTD 0224/2010 5.000% 08/01/2024	10,000.000	\$10,064.70	110.22	\$11,021.80	\$208.33	\$500.00
Callable CUSIP: 149843F74 DuPort El Nemour DTD 02/20/2009 5.750% 03/15/2019	10,000.000	\$9,717.95	114.29	\$11,429.20	\$169.31	\$575.00
Foderal Farm Credit Bank DTD 05/15/2008 5.220% 05/15/2023 Non Callable	10,000.000	\$10,554.90	121.40	\$12,139.50	\$68.70	\$522.00

# Asset Detail Section (continued)

Statement of Value and Activity

January 1, 2014 - December 31, 2014

Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
FPL Group Capital Inc DTD 03/09/2009 6.000% 03/01/2019 Non Callable CUSIP: 302570BD7	10,000.000	\$10,343.80	113.92	\$11,391.50	\$200.00	\$600.00
Marietta Georgia General Obligation DTD 12/30/2013 4.400% 01/01/2029 Callable CUSIP: 5676430J3	10,000.000	\$9,937.50	108.32	\$10,832.30	\$220.00	\$440.00
MC Kinney Texas Economic Dev Development Revenue DTD 0224/2011 5.500% 09/01/2024 Callable CUSIP: 581655CH8	10,000.000	\$9,955.00	101.73	\$10,173.30	\$183.33	\$550.00
Monroe Cnty New York Indi Dev Corp Higher Education DTD 09/19/2013 4.946% 07/01/2027 Non Callable CUSIP: 61075TGP7	10,000.000	\$10,015.00	110.06	\$11,006.30	\$247.30	\$494.60
New York City New York Transitional General Obligation DTD 11/13/2013 4.350% 11/01/2029 Callable CUSIP: 64971Q7P2	10,000.000	\$9,800.00	105.80	\$10,579.80	\$72.50	\$435.00
New York New York General Obligation DTD 12/17/2009 5.199% 12/01/2022 Non Callable	10,000.000	\$9,759.90	115.25	\$11,524.50	\$43.33	\$519.90

CUSIP: 64966HTT7



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Statement of Value and Activity

January 1, 2014 - December 31, 2014

Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
New York New York General Obligation DTD 10/20/2010 5.147% 10/01/2025 Non Callable CUSIP: 64966H4N7	10,000.000	\$10,050.00	116.99	\$11,899.10	\$128.68	\$514.70
New York State Urban Dev Revenue Bonds DTD 12/08/2010 5.510% 03/15/2025 Non Callable CUSIP: 650035VE5	10,000.000	\$9,711.30	121.33	\$12,133.20	\$162.24	\$551.00
Ohio State Bldg Auth Facilities Revenue DTD 04/01/2010 4.580% 10/01/2019 Non Callable CUSIP: 67755CC49	10,000.000	\$9,884.70	107.06	\$10,705.60	\$114.50	\$458.00
Palm Bay Florida Spl Oblg General Obligation DTD 11/26/2013 5.405% 10/01/2028 Callable CUSIP: 69647RBG8	10,000.000	\$10,498.78	116.87	\$11,687.30	\$135.13	\$540.50
Portland Oregon Development DTD 09/23/2010 5.374% 06/15/2020 Non Callable CUSIP: 736746UW6	10,000.000	\$10,379.10	105.16	\$10,516.30	\$23.88	\$537.40

\$18,504.73

\$3,161.38

\$695,926.09

\$497,843.43

**Total All Assets** 

# Asset Detail Section (continued)

Statement of Value and Activity

January 1, 2014 - December 31, 2014

Description	Shares/Face Value	Tax Cost	Market Price	Market Value	Accrued Income	Est. Ann. Income
Sacramento California Met Fire Dist General Obligation DTD 10/20/2004 5.320% 05/15/2025 Non Caliable CUSIP: 78587RAB3	10,000.000	\$10,000.00	102.61	\$10,260.50	\$67.98	\$532.00
Syracuse New York Indi Dev AGY Education Revenue DTD 07/12/2011 5.428% 05/01/2027 Non Callable St Aid Withhidg CUSIP: 871683CF3	10,000.000	\$10,786.80	108.70	\$10,870.40	\$90.47	\$542.80
Total Taxable Fixed (hooms)		\$161,561.43		( \$178.170.60	\$2,123.68	\$8,312.90
Tax-Exempt Fixed Income Hawaii State Dept of Transprtn General Obligation DTD 12/19/2013 5.000%, 08/01/2028	10,000.000	\$10,534.34	114.14	\$11,413.90	\$208.33	\$500.00
Callable CUSIP: 419808AM2		TOTAL BONDS	Savo	184,585	,	,
Total Tax-Exampt Fixed Income.		\$10,634,34		\$11,413.90	\$208.92	\$500.00