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OMB No 1545-0052

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.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Department of the Treasury Internal Revenue Service

For calendar year 2014 or tax year beginning		, and ending	,	
Name of foundation			A Employer identification	on number
CAVES VALLEY GOLF CLUB FOU	NDATION, INC	•	52-190025	1
Number and street (or P O box number if mail is not delivered to street	B Telephone number	04.0		
2910 BLENDON ROAD			410-356-1	
City or town, state or province, country, and ZIP or foreign p	oostal code		C If exemption application is	pending, check here
OWINGS MILLS, MD 21117			B 4 Foreign organizatio	no abook bara
G Check all that apply: Initial return	Amended return	rmer public charity	D 1 Foreign organizatio	nis, check here
Final return Address change	Name change		Foreign organizations r check here and attach	meeting the 85% test,
H Check type of organization: X Section 501(c)(3) e			1	
	Other taxable private founda	tion	E If private foundation s under section 507(b)(
I Fair market value of all assets at end of year J Account		Accrual	F If the foundation is in	
(from Part II, col. (c), line 16)	ther (specify)		under section 507(b)(
▶\$ 1,924,778. (Part I, colu	ımn (d) must be on cash b	pasis.)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	327,878.		N/A	
2 Check In if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	78.	78.		STATEMENT 1
4 Dividends and interest from securities	13,730.	13,730.		STATEMENT 2
5a Gross rents				
D Net rental income or (loss)	84,683.			
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all B 8 2 , 6 2 2	84,003.			
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 882,622. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		84,683.		-
8 Net short-term capital gain			1	:
9 Income modifications			``	
9 Income modifications Gross sales less returns and allowances b Less Cost of goods sold			,	. 7
b Less Cost of goods sold			, , , , , ,	
c Gross profit or (loss)				
11 Other income	105.050			<u>'</u>
12 Total Add lines 1 through 11	426,369.	98,491.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages15 Pension plans, employee benefits			· · · · · · · · · · · · · · · · · · ·	-
σ ·				
b Accounting fees STMT 3	4,228.	0.		0.
c Other professional fees				
9 17 Interest				
Telescopies 18 Taxes STMT 4	314.	0.		0.
b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 4 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications				
20 Occupancy				
21 Travel, conferences, and meetings				
ਵੇਂ 22 Printing and publications 23 Other expenses STMT 5	98,116.	9,038.		0.
23 Other expenses STMT 5 24 Total operating and administrative expenses Add lines 13 through 23	30,110.	9,030.		
expenses Add lines 13 through 23	102,658.	9,038.		0.
25 Contributions, gifts, grants paid	124,500.			44,500.
26 Total expenses and disbursements.				
Add lines 24 and 25	227,158.	9,038.		44,500.
27 Subtract line 26 from line 12:				
8 Excess of revenue over expenses and disbursements	199,211.			
b Net investment income (if negative, enter -0-)		89,453.		
C Adjusted net income (if negative, enter -0-)			N/A	Form 990-PF (2014)

Fo	rm 99	O-PF (2014) CAVES VALLEY GOLF CLUB			1900251 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	541,331.	668,999.	668,999.
	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			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation]		
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	884,587.	1,036,130.	1,255,779.
	-14	Land, buildings, and equipment: basis			
		Less accumulated depreciation]		
	15	Other assets (describe ►)			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,425,918.	1,705,129.	1,924,778.
	17	Accounts payable and accrued expenses			
	18	Grants payable		80,000.	
ç	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
ت	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	80,000.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
Jan	25	Temporarily restricted			
Ва	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31	1		
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	1,425,918.	1,625,129.	
ş	30	Total net assets or fund balances	1,425,918.	1,625,129.	
	31	Total liabilities and net assets/fund balances	1,425,918.	1,705,129.	
	art	Analysis of Changes in Net Assets or Fund E	Balances		
_					
1		net assets or fund balances at beginning of year - Part II, column (a), line	: 30		
	•	at agree with end-of-year figure reported on prior year's return)		1	1,425,918.
		amount from Part I, line 27a		2	199,211.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,625,129.
		eases not included in line 2 (itemize)			0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30		1,625,129.

_		nd Losses for Tax on I			, 1	.IIC •		<u> </u>	OZJI rage o
•				(b) H D -	ow acquired Purchase Donation	(c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)	
1a	a								
b	SEE ATTACHED	STATEMENTS							
C									
<u>d</u>	···				ļ	-			
е			1		<u> </u>		42.0		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (
a									
<u>b</u>		<u></u>							
<u> </u>									
<u>d</u>	882,622.		1	797,93	<u>a</u>	· -			84,683.
е	Complete only for assets showing	gain in column (h) and owned by	the foundation		3.		Gaine (C	ol. (h) gaın	
	Complete only for assets showing	(j) Adjusted basis	1 '	cess of col. (I)		col.	(k), but n	not less than	n -0-) or
	(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any	_		Losses	(from col. (l	n))
a			 						
b									
C			 		\dashv				
_ <u>d</u>					-				84,683.
е			.l		$\overline{}$				04,005
	Capital gain net income or (net capit	(" (") " " " " " " " " " " " " " " ")- ın Part I, line		}	2			84,683.
	Net short-term capital gain or (loss)		nd (6):		٦١				
	If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8	numn (c).			1	3		N/A	
	art V Qualification Un	der Section 4940(e) for	r Reduced	Tax on Net	Inve	stment Inc	ome		
if se Wa	r optional use by domestic private for ection 4940(d)(2) applies, leave this is the foundation liable for the section fes," the foundation does not qualify Enter the appropriate amount in each	part blank. n 4942 tax on the distributable ar under section 4940(e). Do not co	mount of any ye	ear in the base per irt.	ri od?	4.4.4			Yes X No
<u>-</u>	(a)	(b)		Total maning any o	(c)	-	1		(d)
(Base periód years Calendar year (or tax year beginning	براء وأمريك المراجع ال	stributions	Net value of no	nchari	table-use assets			oùtión ratio rided by col. (c))
	2013		30,409.		1.	589,932		<u> </u>	.050574
	2012		8,848.			778,410			.024213
	2011		32,284.	,		735,924			.043869
	2010		13,996.			598,315			.073533
	2009	2	23,000.			548,782			.041911
2	Total of line 1, column (d)						2		.234100
	Average distribution ratio for the 5-y	vear base period - divide the total	on line 2 by 5.	or by the number	of vea	rs	<u>-</u> -		
	the foundation has been in existence			,			3		.046820
4	4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4		2,427,678.			
5	Multiply line 4 by line 3			5		113,664.			
6	Enter 1% of net investment income	(1% of Part I, line 27b)					6		895.
7	Add lines 5 and 6						7		114,559.
	Enter qualifying distributions from F	Part XII. line 4					8		124,500
	If line 8 is equal to or greater than hi		e 1b, and comr	olete that part usin	เตล 1%	tax rate.			
	See the Part VI instructions.								
400	521 11-24-14							F	orm 990-PF (2014

orn			<u>.9002</u>			Page 4	
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)	<u> 18 - </u>	see in	<u>stru</u>	ctior	1S)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.						
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					95.	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%							
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)							
	Add lines 1 and 2	3			8	95.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.	
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			8	95.	
6	Credits/Payments:						
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 600.						
b	Exempt foreign organizations - tax withheld at source						
C	Tax paid with application for extension of time to file (Form 8868) 6c 385.	ļ					
d	Backup withholding erroneously withheld	İ					
7	Total credits and payments. Add lines 6a through 6d	7 '			9	85.	
8	Enter any penalty for underpayment of estimated tax. Check here X 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				<u>90.</u>	
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 90 . Refunded ▶	11				0.	
	art 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 in		L		Yes	No	
	any political campaign?		L	1a		_X_	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		L	1b		_X_	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or				l	
	distributed by the foundation in connection with the activities.					l	
C	: Did the foundation file Form 1120-POL for this year?		L	1c		_X_	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					l	
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .					l	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					l	
	managers. ► \$ 0 .					Į	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		X	
	If "Yes," attach a detailed description of the activities.					ĺ	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					ĺ	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3	X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		L	4a		X	
b	olf "Yes," has it filed a tax return on Form 990-T for this year?	N/	' A	4b	İ		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		L	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 la	W					
	remain in the governing instrument?		<u> </u>	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		L	7	X		
						l	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	MD						
b	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					ĺ	
	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 calend	ıar					
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	i kerr	,	9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses ST	MT		10 99 0	X DE	2014)	
			LOUD	JJU	-rr(2014)	

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Pa	art 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		<u>X</u>
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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X_	
	Website address ► N/A			
14		356		13
	Located at ► 2910 BLENDON ROAD, OWINGS MILLS, MD ZIP+4 ►23	<u> 1117</u>		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	No
	securities, or other financial account in a foreign country?	16	L	<u>X</u>
	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	١		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_		<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	· · · ·			
	(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.) Yes X No			
_	· · · · · · · · · · · · · · · · · · ·			
D	of the any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
Ü	before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	"		
_	defined in section 4942(j)(3) or 4942(j)(5)):	-		
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	1		
	before 2014?			
	If "Yes," list the years \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		
	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		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
За	b,,,			
	during the year?	1		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2014) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		<u> X</u>
	Fo	rm 99 ()-PF	(2014)

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orm 990		(4) CAVES VALLEY Statements Regarding Ac	GOLF	CLUB	FOUNDATION	, IN	NC .	52-1900	<u> 251</u>	Page 6
				OF WING	11 FOITH 4720 Way	/ De i	nequired (contin	uea)	I	T
		ear did the foundation pay or incur any		alatian (aa	tion 4045/a\\Q			es X No		
		n propaganda, or otherwise attempt to i		-		aa.d		es Lal no		
(2)		ce the outcome of any specific public ele	ection (see s	ection 4955); or to carry on, directly	or mair		es X No		
	-	er registration drive?			_					
		a grant to an individual for travel, study					Y	es X No		
(4)		a grant to an organization other than a	charitable, e	tc., organiza	ation described in section)				
	4945(d)(4)(A)? (see instructions)					Y	es 🗶 No		
(5)	Provide	for any purpose other than religious, cl	naritable, sc	entific, litera	ary, or educational purpo:	ses, or				
	the pre	ention of cruelty to children or animals'	?				Y	es 🗶 No		
b If ar	ny answ	er is "Yes" to 5a(1)-(5), did any of the tra	insactions fa	ııl to qualıfy	under the exceptions des	scribed	in Regulations			
sect	tion 53.4	945 or in a current notice regarding dis	aster assista	ince (see in:	structions)?			N/A	5b	
Org	anızatıoı	is relying on a current notice regarding	disaster ass	stance che	ck here			ightharpoons		1
c if th	e answe	r is "Yes" to question 5a(4), does the foi	undation cla	m exemptio	n from the tax because it	t mainta	nned			} }
		responsibility for the grant?						es 🔲 No		
•		tach the statement required by Reg	ulations se	ction 53.4	945-5(d)		•			
		dation, during the year, receive any fund								
		enefit contract?	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				es X No		
•		dation, during the year, pay premiums,	directly or ii	ndirectly on	a nersonal benefit contra	act?			6b	X
		6b. file Form 8870.	uncony or n	ian cony, on	a porsonar bonom comic				\ <u> </u>	
	-	during the tax year, was the foundation :	a particita a	arabibitad t	v chalter transaction?			es X No	1	
	•	• • •				202	· · ·	N/A	├ <u></u> 7b	
Part \		the foundation receive any proceeds or Information About Officers					anagoro Highl		/ 0	
ı aıt ı		Paid Employees, and Con	s, Directors	ors, rru	stees, roundatio) IVIC	anagers, migni	y		
1 lists	all offic	ers, directors, trustees, foundation		re and the	eir compensation					
Liste		ers, directors, adstees, roditable	/// manage	as and the		rane	(c) Compensation	(d) Contributions to	T	(e) Expense
		(a) Name and address			(b) Title, and aver hours per week de	voted	(If not paid, enter -0-)	(d) Contributions to employee benefit plan and deferred	is a	iccount, other
_					to position		enter -0-)	compensation		allowances
		S A. FLICK			PRESIDENT					
		NDON ROAD								_
		ILLS, MD 21117			1.00		0.	0	<u>•</u>	0.
		HEN OWEN			SECRETARY					
		R RUDNICK, 6225 S	MITH A	AVE						
BALT	IMOF	E, MD 21209	·····		1.00		0.	0	•	<u> </u>
MR.	THEC	RODGERS			TREASURER					
1040	PAF	K AVENUE								
BALT	IMOF	E, MD 21201			1.00		0.	0		0.
MR.	GARY	ATTMAN			CHAIRMAN					
		HELLE WAY						ļ		
		LE, MD 21208			1.00		0.	l 0		0.
2 Com	pensat	ion of five highest-paid employee	s (other th	an those	included on line 1). If	none,	, enter "NONE."			
	/_> Al	a and addraga of each arrefuse and	ora than fir	0.000	(b) Title, and aver hours per wee devoted to posit	rage	(-) Compared to	(d) Contributions to employee benefit plan and deferred	o Is –	(e) Expense
	(a) wan	e and address of each employee paid m	ore man po	0,000	devoted to positi	K ION	(c) Compensation	and deferred compensation	a	allowances
	NC	NE						·	_	
									\neg	
										
							1	1	+	
					\dashv					
					 					
			<u> </u>					 		—— u
					 -∤					
		the					1	1		
otal nu	mber of	other employees paid over \$50,000		_						0
								For	m 99	0-PF (2014)

Form 990-PF (2014) CAVES VALLEY GOLF CLUB FOUNDATION, INC. Part VIII Information About Officers, Directors, Trustees, Foundation Manager Paid Employees, and Contractors (continued)	52-1 s, Highly	1900251 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b)	Type of service	(c) Compensation
NONE	Type of Service	(C) Compensation
NONE		
	_	
		
Total number of others receiving over \$50,000 for professional services		▶ 0
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 suc number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	h as the	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1N/A		
2		· · · · · · · · · · · · · · · · · · ·
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
TOSMIC TOSMICO - STRONGE - CONTROL -	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Form 990-PF (2014)

52-1900251 Page 8 CAVES VALLEY GOLF CLUB FOUNDATION, INC. Form 990-PF (2014) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: <u>1,927,741.</u> a Average monthly fair market value of securities 1a 16 536,907. b Average of monthly cash balances c Fair market value of all other assets 1c 2,464,648. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 2,464,648. Subtract line 2 from line 1d 36,970. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 2,427,678. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 121,384. Minimum investment return Enter 5% of line 5 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.) 121,384. 1 Minimum investment return from Part X, line 6 895 Tax on investment income for 2014 from Part VI. line 5 2b b Income tax for 2014. (This does not include the tax from Part VI.) 895. 2c c Add lines 2a and 2b 120. 489. Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 120 489. 5 - Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 0. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 489. Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 44,500. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 80,000 SEE STATEMENT 8 3b **b** Cash distribution test (attach the required schedule)

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

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

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123

124,500.

895.

,605.

4

5

6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

				4.10
	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI,	Conbas	10013 p1101 t0 20 t0	2010	2017
line 7				120,489.
2 Undistributed income, if any, as of the end of 2014				120,407.
a Enter amount for 2013 only			0.	
b Total for prior years:			- 0.	
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 4, 189.				
b From 2010 14,156.				
c From 2011			;	
d From 2012				
e From 2013 1,940.				
f Total of lines 3a through e	20,285.			
4 Qualifying distributions for 2014 from	20,203			
Part XII, line 4: ▶\$ 124,500.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior	·····			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		· · · · · · · · · · · · · · · · · · ·		
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	V •			120,489.
e Remaining amount distributed out of corpus	4,011.			120, 407.
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount				<u>.</u>
must be shown in column (a))				
6 Enter the net total of each column as indicated below:	24 206			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	24,296.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 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				0.
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	<u> </u>			
not applied on line 5 or line 7	4,189.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	20,107.			
10 Analysis of line 9:				
a Excess from 2010 14,156.				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013 1,940.				
e Excess from 2014 4,011.				
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Part XIV Private Operating F	Oundations (see in:			N/A	UUZSI Paye II
1 a If the foundation has received a ruling of		 		N/A	
foundation, and the ruling is effective fo					
b Check box to indicate whether the foun			Lin section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	10 12 ()/(0) 01	
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			1		
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					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	re in assets
at any time during		ructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation where year (but only if they have contributed in the contributed in			ntributions received by the	foundation before the clos	se of any tax
• •	nore man wo,000). (Occ 3	CORON 307 (4)(2).)			
NONE	no own 100/ or more of th	a stock of a sorn gration	/or an aqually large party	an of the awarehin of a ne	ertnarahin ar
b List any managers of the foundation when the condition of which the foundation has	is a 10% or greater intere	ie stock of a corporation St.	i toi ali equally large porti	on or the ownership or a pa	a arerottip Or
NONE	-				
2 Information Regarding Contribut	ion, Grant, Gift, Loan	Scholarship, etc., F	Programs:		
Check here 🕨 🗓 if the foundation of	only makes contributions	to preselected charitabl	e organizations and does i		
the foundation makes gifts, grants, etc.	````````````	- 			u.
a The name, address, and telephone num	iber or e-mail address of t	ne person to whom app	dications should be addre	ssed:	
b The form in which applications should	be submitted and informa	tion and materials they	should include:		
c Any submission deadlines:					
		-1		- United States	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable field	s, kinds of institutions, or	otner factors:	
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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year PC CONTRIBUTION FIRST TEE OF HOWARD COUNTY NONE 5100 COLUMBIA ROAD 5,000. COLUMBIA, MD 21044 MR. PARKER KOPPELMAN NONE N/A SCHOLARSHIP 535 VALLEY VIEW ROAD 1,000. TOWSON MD 21286 MR. ZACK MILLER NONE N/A SCHOLARSHIP 3312 HEMING WAY 3,000. PIKESVILLE, MD 21208 MR. ANDREW SHIRDON NONE N/A SCHOLARSHIP **4224 MADISON STREET** 3,000. HYATTSVILLE MD 20781 N/A SCHOLARSHIP MR. KHALIL ABRAMS NONE 1 SMITH MILL ROAD 2,000. NEW FREEDOM PA 17349 SEE CONTINUATION SHEET(S) ▶ 3a 44 500 Total **b** Approved for future payment ÞС FUNDING FOR STUDENTS UNIVERSITY OF MARYLAND EASTERN SHORE NONE IN GOLF PROGRAMS JOHN T. WILLIAMS HALL, SUITE 2116 PRINCESS ANNE, MD 21853 80,000,

> 3b 80 000. Form **990-PF** (2014)

Total

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ter gross amounts unless otherwise indicated.	Unrelated b	ousiness income		section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt
Program service revenue:	code		1000		
	1		- -		
	1 1				
			 		
			- 		· · · · · · · · · · · · · · · · · · ·
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash			- - 		
nvestments			14	78.	
Dividends and interest from securities			14	13,730.	
let rental income or (loss) from real estate:				13,730.	
Debt-financed property	· · · -				
Not debt-financed property					
Not debt-initalized property let rental income or (loss) from personal					
property					
Other investment income			+ + -		
Gain or (loss) from sales of assets other	 		- - 		
than inventory			18	84,683.	
Net income or (loss) from special events			1 - 5	02/0031	
Gross profit or (loss) from sales of inventory			<u> </u>		
Other revenue:					-
a			<u> </u>		
h	l 1				
b	i i	=			
C					
c					
cde				98.491.	
c d E Subtotal. Add columns (b), (d), and (e)).	98,491.	98.4
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)).	98,491.	98,4
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation	ns.)			13	98,4
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation	ns.)			13	98,4
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculation Relationship of Activiti	ns.)	nplishment of	Exempt Pu	13	
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Relationship of Activiti	ns.) ies to the Accom	nplishment of	Exempt Pu	13	
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitions Explain below how each activity for which	ns.) ies to the Accom	nplishment of	Exempt Pu	13	
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423621 11-24-14

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

MD 21117

Date

423622

Sign Here

Paid

Preparer

Use Only

FRIEDLANDER,

SUITE 200

CHRTD

RESIDENT

Date:

Check

self- employed

Phone no.

May the IRS discuss this return with the preparer shown below (see instr)?

X Yes

P00024186

(410) 581-0800

Form **990-PF** (2014)

Firm's EIN \triangleright 52-1374503

Signature of office

Print/Type preparer's name

FRIEDLANDER,

CPA

Firm's address ► 300 RED BROOK BLVD,

OWINGS MILLS,

Firm's name ► ROSEN SAPPERSTEIN

RICHARD A.

Part IN							
		describe the kind(s) of property sole ick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a SEE		- PG 2 OF 4		<u>P</u>			
	SEE EXHIBIT I - PG 4 OF 4						
		PRESS 0.825% DUE	P				
	AMGEN	4528 5775 05 03	P				
		.473% DUE 05-03-		P P			
		.537% DUE 05-06-		P			
		DUE 02-01-18		P			
1 5K	AT&T 5.500%	DUE 02-01-18		P			
		A CORP 6.000% DU	E 09-01-17	P			
		RK MELLON 0.800%		P			
+ 5K	BB&T CORPOR	ATION 1.094% DUE	06-15-18	P			
		ATION 1.094% DUE		P			
		RPORATION 1.875%		P			
o 5K	CATERPILLAR	FINL 2.650% DUE		P			
(e)	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)		
а	103,011.		73,975.			29,036.	
b	207,616.		138,975.			68,641.	
C	5,009.		5,016.			<u> </u>	
d	4,989.		5,060. 5,025.			<71. <48.	
e	4,977. 2,975.		3,028.			<53.	
<u>f</u>	1,976.		2,025.			<49.	
g h	5,009.		5,088.			<79.	
<u></u> 1	5,648.		5,745.			<97.	
	5,651.		5,747.			<96.	
k	5,013.		5,059.			<46.	
1	5,065.		5,072.			<7.	
m	4,981.		5,078.			<u> </u>	
n	5,006.		4,953.			53.	
0	5,177.	as som in solumn (h) and award by	5,243.	(D.L.)		<66 . :	
	.M.V. as of 12/31/69	ng gain in column (h) and owned by t (j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of	ses (from col. (h)) of col. (h) gain over ot less than "-0-")	col. (k),	
a						29,036.	
b						68,641.	
C						<7.	
d						<71.	
е						<48.	
<u>f</u>						<u><53.</u> ;	
g						<49.	
<u>h</u>						<u><79.</u>	
1						<u> </u>	
<u> </u>						<46.	
<u>k</u> I						<7.	
m				•			
n						53.	
0				· · · · · · · · · · · · · · · · · · ·		<66.	
	gain net income or (net ca	apital loss) { If gain, also enter "-0	in Part I, line 7	2			
3 Net sho	ort-term capital gain or (los also enter in Part I, line 8,	ss) as defined in sections 1222(5) an column (c).	<u> </u>	-			
If (loss), enter "-0-" in Part I, line 8	8		3			

52-1900251 CAVES VALLEY GOLF CLUB FOUNDATION INC. Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation EASTMAN CHEMICAL 2.400% DUE 06-01-17 P P b 5K EBAY INC c 5K ECOLAB INC 1.450% DUE 12-08-17 P d 5K ENERGY TRANSFER ₽ e FHLMC RETURN OF PRINCIPAL PRINCIPAL P f FHLMC RETURN OF PRINCIPAL P g FHLMC - RETURN OF P h FHLMC - RETURN OF PRINCIPAL P RETURN OF PRINCIPAL FHLMC P RETURN OF PRINCIPAL P k FHLMC RETURN OF PRINCIPAL | FHLMC RETURN OF PRINCIPAL P P m FHLMC RETURN OF PRINCIPAL PRINCIPAL P n FHLMC RETURN OF P o FHLMC - RETURN OF PRINCIPAL (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 5,104 5,167. <63.> 5,053. <195.> 4,858. þ 4,959 4,970. <11.> C 5,052 <33.> 5,085. d-72<u>9</u>. 0. 729. 526. 0. f 526. 0. 170. 170. g 0. 544 544 h 0. 1,205 1,205 0. 703. 703. 551. 551. 0. 554. 554. 0. 35. 35 0. 0. 439. 439. п 176. 176. 0. 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. (1) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <63.> <195.> b <11.> <3<u>3.</u>> d 0. е 0. 0. 9 0. h 0. 0. 0. 0. 0. m 0. n 0.

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

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

14,988 14,988 0 0 0 0 0 0 0 0 0	Part IV	Capital Gains and Lo	sses for Tax on Investment Income			 	
D 15K PMMA 0.875% DUE 05-23-16		(a) List and 2-story br	describe the kind(s) of property soluck warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	P - Purchase	I(o) Date addange	
C 5K GENERAL ELECTRIC 0.744% DUE 01-14-19	1a FHL	MC - RETURN	OF PRINCIPAL		P		
### SCHENNING SCHEST 129 B DUE 01-25-18 P	b 15K	FNMA 0.875	% DUE 05-23-16		P		
6 SK JPMORGAN CHASE 1,129 ** DUE 01-25-18 P 1 IK KINDEN MORGAN INC 2 ** 12-01-17 P 9 SK METLIFE INC 1,756 ** DUE 12-15-17 P 1 OK NEBRASKA PED 5,000 ** DUE 01-01-14 P 1 SK ORACLE CORPORATION P 1 SK ORACLE CORPORATION DEUT 03-01-16 P 1 SK HOME DEPOT 5,400 ** DUE 03-01-16 P 2 K HOME DEPOT 5,400 ** DUE 03-01-16 P 3 K HOME DEPOT 5,400 ** DUE 03-01-16 P 5 K TORNOTO-DOMINION 0.775 ** DUE 04-30-18 P (e) Gross sales price (f) Depressional allowed (or allowable) (g) Cost or other bases plus expensed or sale (h) Earn or (loss) (e) plus (f) minus (g) 2 \$ 3,054 \$ 5,054 \$ 48.7 0. 3 \$ 5,054 \$ 5,054 \$ 48.9 4 \$ 5,054 \$ 5,055 \$ 24.7 5 \$ 5,041 \$ 5,055 \$ 24.7 6 \$ 5,028 \$ 5,013 \$ 15.7 7 \$ 5,028 \$ 5,013 \$ 15.7 8 \$ 5,014 \$ 5,055 \$ 24.2 9 \$ 5,249 \$ 5,372 \$ 21.2 1 \$ 0,000 \$ 10.2 \$ 2.2	c 5K	GENERAL ELE	CTRIC 0.744% DUE	01-14-19			
1 K KINDER MORGAN INC 28 12-01-17	d 5K	GOLDMAN SAC					
1 SK METILIFE INC 1.7558 DUE 12-15-17	e 5K	JPMORGAN CH					
h 5K MORGAN STANLEY 3.800% DUE 01-01-16	f 1K						
1 OK NEBRASKA PPD 5.00% DUE 01-01-14							
SK CRACLE CORPORATION							
S SK SIMON PPTY GRP 2.150% DUE 09-15-17				-01-14			
12K HOME DEPOT 5,400\$ DUE 03-01-16 P							
m 3K HOME DEPOT 5.400 DUE 03-01-16 P							
The Complete Note of the Company 1,950 Due 09-01-16				· · · · · · · · · · · · · · · · · · · 			
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7) Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7) (if g							
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) a 877.							
(1) Clauses sates into (or allowable) plus expense of sale (e) plus (f) minus (g) 8	<u>0 5K</u>	TORONTO-DOM	INION 0.775% DUE			<u> </u>	
14, 988. 0. 14, 988. 0. 5, 006. 55, 006. 55, 0054. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	(e)			plus expense of sale			
S 5 006 5 054	a						
1	b						
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1	d						
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1	<u>f</u>						
10,000.	g						
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Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (i) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (i), if any as of 12/31/69 (ii) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than *-0-*) O.	n						
(i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (l) but not less than *-0-*) (o) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	0						<u> </u>
(i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any but not less than *-0-*) a	Compl	ete only for assets showing	· · · · · · · · · · · · · · · · · · ·				col (k)
0	(i) F.I	M.V. as of 12/31/69			but n	ot less than *-0-*)	
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1	<u>f</u>						
<pre></pre>	9						
48 47 47 47 47 47 5 Capital gain net income or (net capital loss) 6 1 1 2 2 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).	h						
K I STATE OF THE PRINCIPLE OF THE PRINCI	<u> </u>						
Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 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).	<u></u>						
Capital gain net income or (net capital loss) Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 2 2 3 3 3 3 3 3 3 3	k						
Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7 2 2 3 5 5 5 5 5 5 5 5 5	1						
Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 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).	<u>m</u>						
Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 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).	n						
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).	0						<u> </u>
If gain, also enter in Part I, line 8, column (c).	2 Capital (gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0	ın Part I, line 7 -" ın Part I, line 7	2		
	If gain, a	also enter in Part I, line 8,	column (c).	d (6):			

Part (V Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation TOYOTA AUTO RECEIPTS 0.618% DUE 01-17-19 P P TRANSATLANTIC HL 2K 02-15-16 P c 45K US TREAS NT 0.375% DUE P 0.625% DUE 10-15-16 d 35K US TREAS NT 07-15-15 P TREAS 0.250% DUE 10K US NT P 35K US TREAS NT 0.250% DUE 07-15-15 0.750% 02-28-16 P g 65K US TREAS NT DUE P h 35K US TREAS NT0.750% DUE 02-28-16 0.125% DUE 04-15-18 P 45K UST INFL IDX P 3.650% DUE 09-14-18 VERIZON COMMS P 04-15-18 k 45K UST INFL IDX 0.125% DUE SHS ECHO GLOBAL LOGISTICS INC P 382 P m 60 SHS TABLEAU SOFTWARE INC P n 225 SHS FEI COMPANY P o 125 SHS MEDASSETS INC (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) 5,055 <56.> 4,999 а 2,118. <u>6.</u> 2,124. b 100. 44,935. 45,035. C <193.> 35,074. 34,881. d <u>9,987.</u> <28.> 10,015. 6 35,053. <41.> 35,012. f <78<u>.</u>> 63,393. 63,471. g 233. 34,714. 34,481. h 406. 47,531 47,125 <u>5,37</u>0. <<u>76.</u>> 5,294. <423.> 46,357. 45,934 k 140. 10,727. 10,587. ١ 5,036. 5,041. <5.> m 16,662. 5,677. 22,339. n 619. 2,860. 2,241. 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) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any <56.> а <u>6.</u> b 100. C <193.> đ <28.> е <41.> <u><</u>78.> 9 <u>233.</u> h 406. <76.> <423.> 140. 1 <5.> m 16,662. n 619. 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } Capital gain net income or (net capital loss) 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

	F CLUB FOUNDATIO	N, INC. 52-19	00251	PAGE 5	OF 5
	sses for Tax on Investment Income		(b) How accom	ed (-) D-+-	/4) D-4
(a) List and 2-story br	describe the kind(s) of property solutes warehouse; or common stock, 2	d, e.g., real estate, OO shs. MI C Co	(b) How acquir P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	 `	00 3113. MEO 00.		(,,, ,,	(, 22,, ,,
ta 171 SHS MEDASS			P		
			P		
	CORPORATION		P		
			P		
e 438 SHS TRANSO			P		-
f 42 SHS APPLE CO	OMPOTER INC				
 h			 		
<u> </u>	•				
k	· - · · · · · · · · · · · · · · · · · ·				
<u></u>					
m n					
0					
	(f) Depreciation allowed	(g) Cost or other basis	<u> </u>	(h) Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale	(6	e) plus (f) minus (g)	
a 3,689.		3,066.		,, ,, ,,	623.
		19,364.			<12,004.
		1,438.			2,044.
d 3,482. d 1,638.		1,273.			365.
16 056		25,091.			<8,335.
f 16,756.		15,448.			$\frac{10,333.}{11,189.}$
		13,440.			<u> </u>
g h					
<u> </u>					
k					
1					-
m					
n					
0	 				
Complete only for assets showin	ng gain in column (h) and owned by	the foundation on 12/31/69	(D.I	osses (from col. (h))	
	(j) Adjusted basis	(k) Excess of col. (i)		ss of col. (h) gain over	col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	bu	it not less than "-0-")	
a					623.
b					<12,004.
c					2,044.
d					365.
e					<8,335.
f					<11,189.
9					
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1					
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k	· · · · · · · · · · · · · · · · · · ·				
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	. If any also esta-	un Part I. lung 7			
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0)-" in Part I, line 7	2		84,683.
Net short-term capital gain or (los					
If gain, also enter in Part I, line 8,	column (c).	· "			
If (loss), enter "-0-" in Part I, line 8	}	J	3	N/A	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		,		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
MR. CAREY CHEEK JR.	NONE	N/A	SCHOLARSHIP	
606 CHERATON ROAD			i	
BALTIMORE, MD 21225				2,000
MR. LAURENCE SPEKTERMAN	NONE	N/A	SCHOLARSHIP	
7 EDEN ROCK COURT				2,000
BALTIMORE, MD 21208				
MR. JOHN MACDONALD	NONE	N/A	SCHOLARSHIP	
2634 NORTH CHARLES STREET				
BALTIMORE, MD 21218				2,500
MR. MICHAEL FILLER	NONE	N/A	SCHOLARSHIP	
2900 LOUISE AVENUE	-	-	-	
BALTIMORE, MD 21214				2,000
MR. LOUIS FLEISCHMANN	NONE	N/A	SCHOLARSHIP	
12 REDMILE COURT			1	
REISTERSTOWN, MD 21136				2,000
UNIVERSITY OF MARYLAND EASTERN SHORE	NONE	PC	FUNDING FOR STUDENTS	
JOHN T. WILLIAMS HALL, SUITE 2116			IN GOLF PROGRAMS	
PRINCESS ANNE, MD 21853				20,000
Total from continuation sheets		l		30 500

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

Department of the Treasury Internal Revenue Service

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.lrs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	CA	AVES VALLEY GOLF CLUB FOUNDATION, INC.	52-1900251
Organiz	zation type (check o		
Filers o	f:	Section:	
Form 99	00 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	90-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	
-			
		s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions
Genera	l Rule		
X	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling to one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special	Rules		
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, cor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount 1, line 1. Complete Parts I and II	or 16b, and that received from
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa cruelty to children or animals Complete Parts I, II, and III.	
	year, contributions is checked, enter h purpose. Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as sexclusively for religious, charitable, etc., purposes, but no such contributions totaled mo here the total contributions that were received during the year for an exclusively religious, omplete any of the parts unless the General Rule applies to this organization because it is le, etc., contributions totaling \$5,000 or more during the year	re than \$1,000 If this box charitable, etc.,
but it m	ust answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B n Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its For t 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)

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

No. Name, address, and ZIP + 4 Total contributions Type of corporation	Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed.	-
P.O. BOX 468		· ·	1 ' '	(d) Type of contribution
No. Name, address, and ZIP + 4 Total contributions Type of cord	1	P.O. BOX 468	\$5,000.	Payroll
Sal Hillside Road Sal		, · ·		(d) Type of contribution
No. Name, address, and ZIP + 4 Total contributions Type of coronal contributions Typ		831 HILLSIDE ROAD	\$5,000.	Payroll
3 JOHN CAREY 2208 PINE HILL FARMS LANE \$ 5,000.	(a)	• •	* *	(d) Type of contribution
No. Name, address, and ZIP + 4 MIKE HUDAK 18 DALEBROOK DRIVE PHOENIX, MD 21131 (a) (b) (c) (d) Total contributions 5 FRANEY FAMILY FOUNDATION (W. FRANEY) 3 ACTION PLACE ANNAPOLIS, MD 21401 (b) (c) Total contributions FRANEY FAMILY FOUNDATION (W. FRANEY) ANNAPOLIS, MD 21401 (c) (d) Total contributions Person Payroll Noncash (Complete Painoncash contributions) (c) (d) Total contributions France Payroll Noncash (Complete Painoncash contributions) (d) (e) (f) Total contributions (e) Total contributions France Payroll Noncash (Complete Painoncash contributions) (d) No. Name, address, and ZIP + 4 France Payroll Noncash (Complete Painoncash contributions) (d) Total contributions (e) Total contributions France Payroll Noncash (Complete Painoncash contributions) (f) Total contributions (g) Person Payroll Noncash (Complete Painoncash contributions)		JOHN CAREY 2208 PINE HILL FARMS LANE	\$ 5,000.	Person X Payroll
MIKE HUDAK Person Payroll Noncash Complete Parnoncash cont No. Person Payroll Noncash Complete Parnoncash cont No. Name, address, and ZIP + 4 Total contributions Person Payroll Total contributions Person Payroll Noncash Complete Parnoncash Complete Par		• •	1 ' '	(d) Type of contribution
No. Name, address, and ZIP + 4 Total contributions Type of contributions FRANEY FAMILY FOUNDATION (W. FRANEY) 3 ACTION PLACE ANNAPOLIS, MD 21401 (a) (b) (c) (d) (d) (d) (d) (d) (d) (e) (d) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	4	MIKE HUDAK 18 DALEBROOK DRIVE	\$5,000.	Person X Payroll
ANNAPOLIS, MD 21401 (a) (b) (c) (d) No. Name, address, and ZIP + 4 6 GRANT CAPITAL MANAGEMENT (J. GRANT) Payroli Noncash (Complete Painoncash cont Total contributions Type of contributions Person				(d) Type of contribution
No. Name, address, and ZIP + 4 Total contributions Type of colors of GRANT CAPITAL MANAGEMENT (J. GRANT) Person	5	3 ACTION PLACE	\$5,000.	Payroli
		· ·		(d) Type of contribution
	6	8894 STANFORD BOULEVARD, SUITE 203		Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

(a) No.			
	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	DENNIS CAHILL 7715 RUXWOOD ROAD BALTIMORE, MD 21204	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	RICHARD GREEN 970 ROCK CREEK ROAD BRYN MAWR, PA 19010	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	LINEHAN FAMILY FOUNDATION (E. LINEHAN) 515 FAIRMOUNT AVENUE, SUITE 400 TOWSON, MD 21286	\$5,000.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	BRUCE KAYLE 60 GREENACRES AVENUE SCARSDALE, NY 10583	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	ROBERT MCCARTHY 7853 MONTVALE WAY MCLEAN, VA 22102	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	BRIAN ROGERS 1708 RUXTON ROAD TOWSON, MD 21204	\$5,000.	Person X Payroll

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

CAVES	VALLEY GOLF CLUB FOUNDATION, INC.		-1900251
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	THE ADAMS FOUNDATION (T. RODGERS) 1040 PARK AVENUE, SUITE 300 BALTIMORE, MD 21201	\$28,300.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	JEROME DEAN P.O. BOX 529 GLADWYNE, PA 19035	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>15</u>	VICKAR FAMILY FOUNDATION (K. VICKAR) THE VSTH GROUP, LLC CHARLOTTE, NC 28244	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	KELLY INTEGRAL SOLUTIONS (SEN. FRANK KELLY) 301 INTERNATIONAL CIRCLE HUNT VALLEY, MD 21030	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	PNC FOUNDATION (L. CESTELLO) SERVICES GROUP PITTSBURGH, PA 15222	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	ACME PAPER & SUPPLY COMPANY (R. ATTMAN) 8229 SANDY COURT SAVAGE, MD 20763	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
422452 11-0		Schedule B (Form	990 990-F7 or 990-PF\ (2014)

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	PATRICK KERINS 1101 BOYCE AVENUE RUXTON, MD 21204	\$10,587.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	GARY T. GILL PORTFOLIO (G. GILL) 2328 WEST JOPPA ROAD, SUITE 200 LUTHERVILLE, MD 21093	\$ 5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	STEVEN B. FADER 1 OLYMPIC PLACE TOWSON, MD 21204	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	MERRIMACK MUTUAL FIRE INS. (M. BRAWN) 95 RIVER ROAD ANDOVER, MA 01810	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	GEORGE AND GEORGIA STAMAS 5 WATERBURY COURT BALTIMORE, MD 21212	\$5,041.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	GARY ATTMAN 3712 MICHELLE WAY	\$5,000.	Person X Payroll Noncash
	BALTIMORE, MD 21208		(Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (20

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

CAVES	VALLEY GOLF CLUB FOUNDATION, INC.		-1900251
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	PETER DE VOS 250 PRESIDENT STREET, APT. 1000 BALTIMORE, MD 21202	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	JAMES RIEPE FAMILY FOUNDATION P.O. BOX 64 BUTLER, MD 21023	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	SUNTRUST BANK, INC. (S. WILFONG) P.O. BOX 4418 ATLANTA, GA 30302	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	JAMES A. FLICK, JR. 1830 IVY POINT COURT NAPLES, FL 34109	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29	COWAN SYSTEMS, LLC (JOE COWAN) 4555 HOLLINS FERRY ROAD BALTIMORE, MD 21227	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	STEVEN SIEGFRIED 900 WEST VALLEY ROAD, SUITE 502 WAYNE, PA 19087	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

CAVES			-1900251
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition (b)	(c)	(d)
No. 31	Name, address, and ZIP + 4 BALTIMORE DIAMOND EXCHANGE/RADCLIFFE JEWLERS 1848 REISTERSTOWN ROAD	Total contributions \$ 10,000.	Person X Payroll Noncash
	BALTIMORE, MD 21208	-	(Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3.2	JERRY KATZOFF 1761 YARDLEY-LANGHORNE ROAD YARDLEY, PA 19067	\$ <u>5,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	A.F. BEST SECURITIES FUND 101 NORTH FEDERAL HIGHWAY #600 BOCA RATON, FL 33432	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>34</u>	O'NEIL FAMILY FOUNDATION 11325 JOHN CARROLL ROAD OWINGS MILLS, MD 21117	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>35</u>	ERWIN GREENBERG 10096 RED RUN BOULEVARD, SUITE 100 OWINGS MILLS, MD 21117	\$\$,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36	PRESTON ATHEY 304 GOLF COURSE ROAD	\$5,300.	Person X Payroll Noncash (Complete Part II for
422452 11-0	OWINGS MILLS, MD 21117	Schodulo B /Form	noncash contributions)

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

CAVES Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	<u> </u>
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d) e of contribution
37	ROLLINS-LUETKEMEYER FOUNDATION 1427 CLARKVIEW ROAD, SUITE 500 BALTIMORE MD, MD 21209	(Comp	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) e of contribution
38	ERIC AND JILL BECKER 115 SPINNAKER LANE JUPITER, FL 33477	(Comp	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) e of contribution
<u>39</u>	SULLIVAN FAMILY FOUNDATION 8518 HUNTSPRING DRIVE LUTHERVILLE, MD 21093	\$ 5,000. Pay	son X roll ncash lete Part If for sh contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) e of contribution
40	SCOTT DORSEY 2066 LORD BALTIMORE BALTIMORE, MD 21244	\$ 5,000. Pay Noi (Comp	son X roll ncash lete Part II for sh contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) e of contribution
41	EDWARD P. NORDBERG JR. 2 WISCONSIN CIRCLE, STE 540 CHEVY CHASE, MD 20815	\$ 5,000. Pay	son X rroll ncash lete Part II for sh contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) e of contribution
42	JOHN F. CARROLL 88 BLACKPOOL ROAD REHOBOTH BEACH, DE 19971	\$ 5,000. Pay	son X rroll ncash lete Part II for sh contributions)

Employer identification number

CRADO ANDRE GODE CHOD LOCHDHITON, IN	CAVES	VALLEY	GOLF	CLUB	FOUNDATION,	INC
--------------------------------------	-------	--------	------	------	-------------	-----

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	VICTOR A. ZOLLO JR. 715 VIA LUGANO WINTER PARK, FL 32789	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44	STEVEN BISCIOTTI 1 WINNING DRIVE OWINGS MILLS, MD 21117	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45	J. MARK SCHAPIRO 1427 CLARKVIEW ROAD, SUITE 500 BALTIMORE, MD 21209	\$\$ \$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
46	A&M VENTURE LLC 7166 E. DESERT MOON LOOP TUCSON, AZ 85750	\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
47	KEVIN PLANK 930 GREENSPRING VALLEY ROAD LUTHERVILLE, MD 21093	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
48	REMBRANDT FOUNDATION 100 CONSTELLATION WAY BALTIMORE, MD 21202	\$10,000.	Person X Payroll

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addi	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	ANDREA LAPORTE 1910 RUXTON ROAD BALTIMORE, MD 21204	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50	DAVID BANNISTER 777 FLAGLER DRIVE WEST PALM BEACH, MD 21204	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51	JACOBSEN FAMILY FOUNDATION 240 NEWBURY STREET BOSTON, MA 02116	\$10,000.	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 Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Payroll Poncash Poncash Poncash Poncash Poncash Poncash Poncash Contributions Poncash Contributions Poncash Pon

Employer identification number

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

art II	Noncash Property (see instructions) Use duplicate copies of Part II if a	idditional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
19	382 SHS ECHO GLOBAL LOGISTICS		
		\$10,587.	11/10/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
23	60 SHS TABLEAU SOFTWARE INC - CLASS A		
		\$5,041.	11/07/14
(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

Name of orga	anization		Employer identification number
CAVES	VALLEY GOLF CLUB FOUND	ATION, INC.	52-1900251
Part III	Exclusively religious, charitable, etc., cont	ributions to organizations describe	d in section 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additions	s, charitable, etc., contributions of \$1,000	or less for the year (Enter this info once)
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ift
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>			
	-	(e) Transfer of gi	ift
-	Transferee's name, address, ar	nd 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 gi	ift
		•	
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
			
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1 21.1,			
	<u></u>	(e) Transfer of gi	ift
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1	
SOURCE		REVE	(A) (REVENUE NET INV PER BOOKS INC			(C) ADJUSTED NET INCOM		
PNC INSTITUTIONAL I	NVESTMENTS		78.		78.			
TOTAL TO PART I, LI	NE 3		78.		78.			
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCO			
CHARLES SCHWAB M&T INVESTMENT GROUP	7,575 6,155		0.	7,575. 6,155.	7,57 6,15	-		
TO PART I, LINE 4	13,730	•	0.	13,730.	13,73	0.		
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT	3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM			
PROFESSIONAL FEES		4,228.		0.			0.	
TO FORM 990-PF, PG	1, LN 16B	4,228.		0.			0.	
FORM 990-PF		TAX	ES			STATEMENT	4	
DESCRIPTION		(A) EXPENSES PER BOOKS		VEST-	(C) ADJUSTED NET INCOM			
FEDERAL ESTIMATED T	AXES	314.	-	0.			0.	
TO FORM 990-PF, PG	1, LN 18	314.		0.			0.	
								

FORM 990-PF	OTHER E		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITAE ME PURPOSE	
FUNDRAISING EXPENDITURES INVESTMENT FEES OFFICE - G&A ADVERTISING	85,537. 9,038. 861. 2,680.	9,038. 0.			0.
TO FORM 990-PF, PG 1, LN 23	98,116.	9,038.			0.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT	6
DESCRIPTION		LUATION ETHOD BO	OK VALUE	FAIR MARKE VALUE	Т
PUBLICLY TRADED SECURITIES AND MUTUAL FUNDS	ND	FMV	1,036,130.	1,255,7	79.
TOTAL TO FORM 990-PF, PART I	I, LINE 13		1,036,130.	1,255,7	79.
	F SUBSTANTIA PART VII-A,	L CONTRIBUTOR LINE 10	S	STATEMENT	7
NAME OF CONTRIBUTOR	ADDR	ESS			
THE ADAMS FOUNDATION		PARK AVENUE, IMORE, MD 212			
CHARLESMEAD FOUNDATION		WEST EXCHANGE IDENCE, RI 02	•	TH FLOOR	
WHITING-TURNER CONTRACTING		EAST JOPPA RO. IMORE, MD 202			
LAWRENCE MACKS		BUTLER ROAD DON, MD 21136			
PNC BANK & PNC FOUNDATION		NCIAL SERVICE SBURGH, PA 15			
FISHMAN PHILANTHROPIC FUND		BOX 15203 NY, NY 12212			

DAVIS FAMILY FOUNATION

P.O. BOX 468

HANOVER, MD 21076

DAVID BANNISTER

777 FLAGLER DRIVE

WEST PALM BEACH, FL 33401

A.F. BEST SECURITIES FOUNDATION

101 NORTH FEDERAL HIGHWAY, SUITE 501

BOCA RATON, FL 33432

BARRY BAKER

28 MERRY HILL COURT BALTIMORE, MD 21208

FORM 990-PF

EXPLANATION OF CASH SET-ASIDE PART XII, LINE 3B

STATEMENT

8

DURING 2014 THE FOUNDATION MADE A COMMITMENT OF \$100,000 TO UMES AND PAID ITS INITIAL \$20,000 PAYMENT. THE REMAINING BALANCE WILL BE PAID IN ANNUAL INSTALLMENTS OF \$20,000 ON OR BEFORE JUNE 30TH OF EACH YEAR THROUGH 2018.

CAVES VALLEY GOLF CLUB FOUNDATION, INC.

UNANIMOUS CONSENT OF TRUSTEES IN LIEU OF MEETING

Februar 20, 2014

THE UNDERSIGNED, constituting all of the Trustees of Caves Valley Golf Club Foundation, Inc., a Maryland corporation (the "Corporation"), acting in lieu of a meeting of the Board of Trustees of the Corporation (the "Board") and pursuant to Section 2-408(c) of the Maryland General Corporation Law, hereby authorize, approve and agree to the adoption by consent of the following resolutions, and direct that the same be filed with the minutes of the proceedings of the Board:

RESOLVED, the second (2nd) paragraph of the Section of the Corporation's Scholarship Selection Criteria entitled "Scholarship Committees" is hereby amended and restated to read as follows:

"It is anticipated that each member of the Scholarship Selection Committee will serve for a three (3) year term. Upon resignation of a member of the committee or upon expiration of the term of the member, the Board of Trustees will select the successor, subject to the aforementioned guidelines. Members of the Scholarship Selection Committee are composed of community leaders, possessing experience in the field of education, through participation on various other scholarship committees.

RESOLVED, the Corporation's Bylaws are hereby amended as follows:

- 1. Each reference in the Bylaws to the "Caves Valley Scholarship Foundation, Inc." is hereby replaced with a reference to the "Caves Valley Golf Club Foundation, Inc."
- 2. Section 5.01 of the Bylaws is hereby amended and restated to read as follows:

'Section 5.01. Checks, Drafts, Etc. All checks, drafts and orders for the payment of money, notes and other evidences of indebtedness issued in the name of the Corporation shall, unless otherwise provided by resolution of the Board of Trustees, be signed by the Chairman, the President, or the Vice-President of the Corporation."

3. Section 5.03 of the Bylaws is hereby amended and restated to read as follows:

"Section 5.03. <u>Fiscal Year</u>. The fiscal year of the Corporation shall be the twelve calendar months period ending December 31 in each year, unless otherwise provided by the Board of Trustees."

FURTHER RESOLVED, that the Chairman, the President and/or any other appropriate officer of the Corporation, with full power to each of them acting alone, be, and they hereby are and each of them hereby is, authorized and directed on behalf of the Corporation to take or cause to be taken all such actions as the President or such officer, respectively, may deem necessary or appropriate in order to carry out the purposes of the foregoing resolutions, and the doing of such actions shall be conclusive evidence that the same were in all respects hereby fully authorized and approved.

This written consent in lieu of meeting (i) may be signed in one or more counterparts, and all such counterparts shall be considered one and the same document even though the same copy is not signed by each Trustee and (ii) shall be effective as of the date first above written and shall be filed with the minutes of the Corporation.

[Signatures appear on next page.]

TRUSTEES: Anthony Deering Theo Rodgers James A. Flick, Jr. Stephen L. Owen

Sec 4 Harded 519 nature

Brenda Jews

Steven B. Fader

Gary Attman

Lawrence Moody

TRUSTEES:
Anthony Deering
Theo Rodgers
James A. Flick, Jr. Stephen L. Owen
Steven B. Fader Steven B. Fader Brenda Jews
Gary Attman
Lawrence Moody

TRUSTEES:
Anthony Deering
Theo Rodgers
James A. Flick, Jr.
Stephen L. Owen
Steven B. Fader
Brenda Jews
Gary Attman
Lawrence Moody Nord

The Daily Record

11 East Saratoga Street Baltimore, MD 21202-2199 (443) 524-8100

http://www.thedailyrecord.com

PUBLISHER'S AFFIDAVIT

We hereby certify that the annexed advertisement was published in The Daily Record, a daily newspaper published in the State of Maryland 1 times on the following dates:

5/18/2015

Order #:

10761870

Case #:

Description:

Caves Valley - Notice of availability of annual report of Caves Valley Golf Club Foundation, Inc.

Darlene Miller, Public Notice Coordinator

(Representative Signature)

NOTICE OF AVAILABILITY OF ANNUAL REPORT OF CAVES VALLEY GOLI⁵ CLUB FOUN DATION, INC

To Whom It May Concern
TAKE NOTICE that the Annual Report of
CAVES VALLEY GOLF CLUB FOUN DATION, INC

for the lax year ending December 31, 2014, required by Section 6033 of the Internal Revenue Code, is available for inspection at the principal office of CAVES VALLEY GOLF CLUB FOUN DATION, INC

2910 Blendon Road, Owings Mills Maryland 21117

(410) 355-1313
duning regular business hours by any citizen who requests it within 180 days after the publication of this notice of its availability. Requests to inspect the said Annual Reportshould be made to the undersigned Principal Manager of CAVES VALLEY GOLF CLUB FOUN DATION, INC

at its principal office as above stated.

Dated May 18, 2015

JAMES A. FLICK, JR , Principal Manager

my 18

Page 4 of 12

Payer's Name and Address: MANUFACTURERS AND TRADERS TRUST COMPANY PO BOX 1596 BALTIMORE, MD 21203 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number. State: 1041124 XX-XXX0251 16-0538020 Recipient's Name and Address
CAVES VALLEY GOLF CLUB FOUNDATION
C/O THEO C RODGERS, TREASURER
2910 BLENDON ROAD
OWINGS MILLS, MD 21117

Questions?

(410)545-2768

☐ Corrected

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description of property (Box 18)

Cusip Number	Date Sold or Disposed (Box 1c)	Date Acquired (Box 1b)	Form 8949 Checkbox	Proceeds (Box 1d)	Cost or Other Besis (Box 1e)	Code if any (Box 1f)	Adjustments (Box 1g)	Net Gain or Loss	Federal Income Tax Withheld (Box 4)	State Tax Withheld (Box 16)
Short Term Sale	s Reported on 109									
G50871105	02/19/2014	11/05/2013	Α	5,446 94	3,031 28		0 00	2,415 66	0 00	0 00
410	MASTEC INC									
576323109	04/16/2014	07/22/2013	A	1,701 87	1,403 63		0 00	298 24	0 00	0 00
86 0	TRANSOCEAN LI	MITED								
H8817H100	08/05/2014	Vanous .	A	3,290 01	5,135 88		0.00	-1,845 87	.0 00	0 00
1530	SALIX PHARMAC	EUTICALS LTD								
795435106	09/23/2014	02/19/2014	Α	25,391 13	16,354.55		0 00	9,036 58	0 00	0 00
56 O	SHIRE PHARMAC	EUTICALS GROU	JP SPON ADR							
82481R106	09/23/2014	10/16/2013	Α .	14,056.25	5,745 12		0 00	8,311 13	0 00	0 00
680	JAZZ PHARMACE	EUTICALS PLC								
G50871105	09/25/2014	11/05/2013	Α	10,888 68	6,441 46		. 000	4,447 22	0 00	0 00
310	JAZZ PHARMACI	EUTICALS PLC								
G50871105	_ 09/26/2014	11/05/2013	A	4,944 29	2,936 55		0 00	2,007 74	0 00	0 00
214 0	MASTEC INC									
576323109	10/16/2014	Vanous	Α	5,230 00	7,072 67		0 00	-1,842 67	0.00	0 00

This is important tax information and is being furnished to the internal Revenue Service (except as indicated) If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

EXHIBIT I

PAGE 1 OF 4

Page 5 of 12

Payer's Name and Address:
MANUFACTURERS AND TRADERS TRUST COMPANY
PO BOX 1596 BALTIMORE, MD 21203

Account Number: Recipient's Tax ID Number: Payer's Federal ID Number Payer's State ID Number: State: Questions?

Corrected

1041124 XX-XXX0251 16-0538020

2nd TIN notice

MD

(410)545-2768

Recipient's Name and Address: CAVES VALLEY GOLF CLUB FOUNDATION C/O THEO C RODGERS, TREASURER 2910 BLENDON ROAD OWINGS MILLS, MD 21117

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description of property (Box 1a)

Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Galn or Loss	Federal Income Tax Withheld	State Tax Withheld
57 0	(Box 1c) COVANCE INCOR	(Box 1b) PORATED		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
222816100	11/04/2014	Various	A	5,720 77	4,002 88		0 00	1,717 89	0 00	0 00
1410	SALIX PHARMAC	EUTICALS LTD								
795435106	12/18/2014	Various	A	16,420 25	15,071 84		0 00	1,348 41	0 00	0 00
77 0	ULTA SALON CO	SMETICS & FRAG	RANCE							
903845303	12/18/2014	02/11/2014	A	9,921 19	6,778 91		0 00	3,142 28	0 00	0 00
Total Short Ter	m Sales Reported (on 1099-B		103,011 38	73,974 77		0 00	29,036 61	0 00	0 00
Report on For	m 8949, Part I, wit	th Box A checked								
Long Term Sale 82 0	s Reported on 109	9-B								
30241L109	02/11/2014	Various .	D	8,141 34	2,068 91	-	0 00	6,072 43	0 00	0 00
40 0	SHIRE PHARMAC	EUTICALS GROU	P SPON ADR							
82481R106	02/19/2014	01/12/2012	D	6,664 68	4,103 65		0 00	2,561 03	0 00	0 00
310	MICHAEL KORS	HOLDINGS LTD								
G60754101	02/19/2014	10/26/2012	D	3,048 17	1,775 87		0 00	1,272 30	0 00	0 00
220	GOOGLE INC CLA	ASS C								
38259P706	05/05/2014	Vanous	D .	11,565 39	6,078 59		0 00	5,486 80	0 00	0 00

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EXHIBIT I

PAGE 2 OF 4

Page 6 of 12

Payer's Name and Address: MANUFACTURERS AND TRADERS TRUST COMPANY PO BOX 1596 BALTIMORE, MD 21203 Account Number: Recipient's Tax ID Number. Payer's Federal ID Number: Payer's State ID Number: State' Questions?

Corrected

1041124 XX-XXX0251 16-0538020

2nd TIN notice

MD (410)545-2768 Recipient's Name and Address: CAVES VALLEY GOLF CLUB FOUNDATION C/O THEO C RODGERS, TREASURER 2910 BLENDON ROAD OWINGS MILLS, MD 21117

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description of property (Box 1a)

Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code If any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
142 0	(Box 1c) GILEAD SCIENCES	(Box 1b) SINCORPORATED		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
375558103	05/06/2014	11/21/2012	D	11,109 48	5,333 60		0 00	5,775 88	0 00	0 00
18 0	CARBO CERAMICS	S INCORPORATED	1							
140781105	05/09/2014	12/08/2011	D	2,480 38	2,071 81		0 00	408 57	0 00	0 00
189 0	MEDASSETS INC									
584045108	05/22/2014	Various	D	4,360 14	3,388 52		0 00	971 62	0 00	0 00
42 0	CARBO CERAMIC	S INCORPORATED)							
140781105	07/02/2014	Various	D	6,276 01	4,834 22		0 00	1,441 79	0 00	0 00
623 0	MEDASSETS INC									
584045108	07/02/2014	Various	D	14,486 24	11,169 58		0 00	3,316 66	. 0 00	0 00
6 0	SHIRE PHARMACI	EUTICALS GROUP	SPON ADR							
82481R106	07/18/2014	01/12/2012	D	1,523 48	615 55		0 00	907 93	0 00	0 00
155 0	CARBO CERAMIC	S INCORPORATED)							
140781105	07/29/2014	Various	D	21,938 21	17,840 58		0 00	4,097 63	0 00	0 00
103 0	SHIRE PHARMACI	EUTICALS GROUP	SPON ADR							
82481R106	07/29/2014	Various	D	25,823 76	10,566 91		0.00	15,256.85	0 00	0 00

This is important tax information and is being furnished to the internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return

EXHIBIT I

PAGE 3 OF 4

Page 7 of 12

Payer's Name and Address.
MANUFACTURERS AND TRADERS TRUST COMPANY PO BOX 1596 BALTIMORE, MD 21203

Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: State:

1041124 XX-XXX0251 16-0538020

MD

Recipient's Name and Address CAVES VALLEY GOLF CLUB FOUNDATION C/O THEO C RODGERS, TREASURER 2910 BLENDON ROAD OWINGS MILLS, MD 21117

Questions?

(410)545-2768 2nd TIN notice

Corrected

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No 1545-0715

Reported to the IRS is proceeds less commissions and option premiums Covered (Box 5 is not checked)

Description of property (Box 1a)

Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code (f any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
10 0	(Box 1c) SHIRE PHARMACI	(Box 1b) EUTICALS GROU	JP SPON ADR	(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
82481R106	07/31/2014	06/26/2012	D	2,464 74	1,025 91		0 00	1,438 83	0 00	0 00
1176 0	PULTE HOMES IN	CORPORATED								
745867101	09/02/2014	Vanous	D	22,263 30	10,654 74		0 00	11,608 56	0 00	0 00
24 0	SHIRE PHARMAC	EUTICALS GROL	JP SPON ADR							
82481R106	. 09/23/2014	Various .	D	6,024 11	2,462 19		0 00	3,561 92	0 00	0 00
655 O	MASTEC INC									
576323109	10/16/2014	07/22/2013	D	16,007 71	21,647 65		0 00	-5,639 94	0 00	0 00
2180	COVANCE INCOR	PORATED								
222816100	11/04/2014	Various	D	21,879 43	15,309 27		0 00	6,570 16	0 00	0 00
290 0	MICHAEL KORS H	IOLDINGS LTD								
G60754101	12/18/2014	Variouş	. D	21,559 54	18,027 90		0 00	3,53164	. 000	0 00
Total Long Terr	n Sales Reported o	n 1099-B		207,616 11	138,975.45		0 00	68,640 66	0.00	0 00

Report on Form 8949, Part II, with Box D checked

This is important tax information and is being furnished to the internal Revenue Service (except as indicated) If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return

EXHIBIT I

PAGE 4 OF 4

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

OMB No. 1545-1709

If you	are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box			X	
• If you	are filing for an Additional (Not Automatic) 3-Month Ext						
Do not e	complete Part II unless you have already been granted a	ın automa	tic 3-month extension on a previous	sly filed For	m 8868.		
Electro	nic filing (e-file) . You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (6	months for	a corporation	
	to file Form 990-T), or an additional (not automatic) 3-mor						
	to file any of the forms listed in Part I or Part II with the exc						
Persona	al Benefit Contracts, which must be sent to the IRS in pap	er format ((see instructions). For more details o	on the elect	tronic filing	of this form,	
visit ww	w.irs.gov/efile and click on e-file for Charities & Nonprofits.						
Part							
A corpo	ration required to file Form 990-T and requesting an auton	natic 6-mo	inth extension - check this box and	complete		, —	
Part I or				F		▶ □	
	r corporations (including 1120-C filers), partnerships, REM come tax returns.	ICs, and ti				ng number	
Type or	Name of exempt organization or other filer, see instru	ctions.	V/	² Employer	Identificatio	n number (E!N) or	
print							
•	CAVES VALLEY GOLF CLUB FOUNDATION, INC. 52-19002					00251	
file by the due date f filing your	or Number, street, and room or suite no. If a P.O. box, so 2910 BL/ENDON ROAD	ee instruct	tions.	Social sec	Social security number (SSN)		
return Sei instruction	City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
	OWINGS MILLS, MD 21117		*		· · · · · ·		
Enter th	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Application			Returns Application			Return	
is For			Is For				
Form 990 or Form 990-EZ			Form 990-T (corporation)			07	
Form 990-BL			orm 1041-A			08	
Form 4720 (Individual)			Form 4720 (other than individual)	individual) 09			
Form 990-PF			Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11	
Form 9	90-T (trust other than above)	06	Form 8870 12				
	CAVES VARLEY, CI	LUB,	INC.	04448			
• The	books are in the care of > 2910 BLENDON RO	DAD -		2111/			
	phone No. ► (410) 356-1313		Fax No.			. \Box	
	e organization does not have an office or place of busines						
	s is for a Group Return, enter the organization's four digit	•					
box 🕨					ers une exte	ension is for.	
1 !	request an automatic 3-month (6 months for a corporation				The extensi	on.	
-	AUGUST 15, 2015 p , to file the exemp	t organiza	tion return for the organization nam	ieu above.	ITIO EXCENSI	On	
	► X calendar year 2014 or ► tax year beginning , and ending						
•	tax year beginning	· ' al	id elidility		<u> </u>		
2 11	f the tax year entered in line 1 is for less than 12 months, o	hack ress	son: Initial return	Final retur	n		
	Change in accounting period	JI IOON TOUC	on madrotom	1 11 10 10 10 10 10 10 10 10 10 10 10 10			
3a li	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
_	onrefundable credits. See instructions.			3a	\$	1,985.	
b i	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
9	estimated tax payments made. Include any prior year over	payment a	illowed as a credit.	3b	\$	600.	
c E	Balance due. Subtract line 3b from line 3a. Include your pa	ayment wi	th this form, if required,				
by using EFTPS (Electronic Federal Tax Payment System). See instructions.					\$	1,385.	
	n. If you are going to make an electronic funds withdrawa	(direct de	ebit) with this Form 8868, see Form	8453-EO a	nd Form 88	79-EO for payment	
instruc	uons.						

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2014)