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Form **990-PF****Return of Private Foundation**  
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

**2014**Department of the Treasury  
Internal Revenue Service

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► Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2014 or tax year beginning **10/01/14**, and ending **09/30/15**

Name of foundation <b>JOAN W JENKINS FOUNDATION</b>		A Employer identification number <b>52-1486477</b>
Number and street (or P O box number if mail is not delivered to street address) <b>PO BOX 572</b>	Room/suite	B Telephone number (see instructions) <b>410-289-9100</b>
City or town, state or province, country, and ZIP or foreign postal code <b>OCEAN CITY MD 21843-0572</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ <b>1,171,114</b>	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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) (see instructions))		(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 (attach schedule)	178,080			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	3,368	3,368	3,368	
4	Dividends and interest from securities	33,050	33,050	33,050	
5a	Gross rents	44,592	44,592	44,592	
b	Net rental income or (loss) <b>36,348</b>				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		0		
8	Net short-term capital gain			0	
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	Total. Add lines 1 through 11	259,090	81,010	81,010	
13	Compensation of officers, directors, trustees, etc.	0			
14	Other employee salaries and wages	98,089	49,044	49,044	49,044
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)				
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions) <b>STMT 1</b>	9,644	9,644	9,644	
19	Depreciation (attach schedule) and depletion <b>STMT 2</b>	8,244	8,244	8,244	
20	Occupancy	23,264			
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (att. sch.) <b>STMT 3</b>	9,390	9,390	9,390	
24	Total operating and administrative expenses. Add lines 13 through 23	148,631	76,322	76,322	49,044
25	Contributions, gifts, grants paid	59,140			59,140
26	Total expenses and disbursements. Add lines 24 and 25	207,771	76,322	76,322	108,184
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	51,319			
b	Net investment income (if negative, enter -0-)		4,688		
c	Adjusted net income (if negative, enter -0-)			4,688	

For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2014)

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<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash – non-interest-bearing			434,588	463,303	463,303
	2 Savings and temporary cash investments			676,963	707,811	707,811
	3 Accounts receivable ▶ Less allowance for doubtful accounts ▶					
	4 Pledges receivable ▶ Less allowance for doubtful accounts ▶					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7 Other notes and loans receivable (att. schedule) ▶ Less allowance for doubtful accounts ▶	0				
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments – U S and state government obligations (attach schedule)					
	b Investments – corporate stock (attach schedule)					
	c Investments – corporate bonds (attach schedule)					
	11 Investments – land, buildings, and equipment: basis ▶ Less accumulated depreciation (attach sch ) ▶					
	12 Investments – mortgage loans					
	13 Investments – other (attach schedule)					
<b>Liabilities</b>	14 Land, buildings, and equipment: basis ▶ Less accumulated depreciation (attach sch ) ▶ <b>STMT 4</b>	403,776 211,625		200,395	192,151	
	15 Other assets (describe ▶ )					
	16 <b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)			1,311,946	1,363,265	1,171,114
	17 Accounts payable and accrued expenses					
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶ )					
	23 <b>Total liabilities</b> (add lines 17 through 22)			0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> ▶ <input type="checkbox"/>					
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> ▶ <input checked="" type="checkbox"/>					
	27 Capital stock, trust principal, or current funds			1,311,946	1,363,265	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund					
	29 Retained earnings, accumulated income, endowment, or other funds					
<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>	30 <b>Total net assets or fund balances</b> (see instructions)			1,311,946	1,363,265	
	31 <b>Total liabilities and net assets/fund balances</b> (see instructions)			1,311,946	1,363,265	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,311,946
2 Enter amount from Part I, line 27a	2	51,319
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	1,363,265
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	1,363,265

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a N/A</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

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	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	<div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 10px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		<b>3</b>	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	101,417	1,091,939	0.092878
2012	80,403	1,076,038	0.074721
2011	52,064	932,356	0.055841
2010	49,480	806,029	0.061387
2009	37,554	826,154	0.045456

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	0.330283
<b>3</b> Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.066057
<b>4</b> Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	<b>4</b>	1,151,810
<b>5</b> Multiply line 4 by line 3	<b>5</b>	76,085
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	47
<b>7</b> Add lines 5 and 6	<b>7</b>	76,132
<b>8</b> Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	<b>8</b>	108,184

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	47
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	47
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	47
6	Credits/Payments:		
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	
b	Exempt foreign organizations – tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	47
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	

**Part 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 any political campaign?	Yes	No
1a			X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1b			
c	Did the foundation file <b>Form 1120-POL</b> for this year?		X
1c			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
2			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
3			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4a			
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
5			
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		X
7		X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> <b>MD</b>		
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 calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
10		X	

N/A

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation 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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	13	X	
14	The books are in care of ► <b>MARGIE MCBANE</b> <b>PO BOX 572</b> Located at ► <b>OCEAN CITY</b> MD ZIP+4 ► <b>21843-0572</b> Telephone no ►			
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 ► 15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 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 ►	16	Yes	No X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 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)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/> <b>N/A</b>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014? <b>N/A</b>	1c	
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)):		
a	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? If "Yes," list the years ► 20 , 20 , 20 , 20 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.) <b>N/A</b>	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 ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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.) <b>N/A</b>	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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	X

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

<b>5a</b> During the year did the foundation pay or incur any amount to			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	<b>N/A</b> <input type="checkbox"/>	<b>5b</b>	
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<b>N/A</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		<b>6b</b>	<b>X</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<b>N/A</b>	<b>7b</b>	

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 5				
<b>2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000</b>				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 ALCOHOLICS ANONYMOUS USES THE BUILDING OWNED BY THE FOUNDATION FOR MEETINGS NUMEROUS TIMES PER WEEK. ALSO AL-ANON AND AL-ATEEN.	
2 NARCOTICS ANONYMOUS USES THE BUILDING OWNED BY THE FOUNDATION FOR MEETINGS NUMEROUS TIMES PER WEEK.	
3 GAMBLERS ANONYMOUS USES THE BUILDING OWNED BY THE FOUNDATION FOR THEIR MEETINGS.	
4 BUILDING IS KEPT OPEN 24 HOURS, 7 DAYS A WEEK FOR THESE ACTIVITIES AS WELL AS PROVIDING A SUBSTANCE FREE ENVIRONMENT FOR ACTIVITIES INCLUDED COUNSELING ETC.	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3 ▶



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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	<b>697,736</b>
<b>b</b>	Average of monthly cash balances	<b>1b</b>	<b>471,614</b>
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	<b>0</b>
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	<b>1,169,350</b>
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	<b>0</b>
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	<b>0</b>
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	<b>1,169,350</b>
<b>4</b>	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	<b>4</b>	<b>17,540</b>
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	<b>1,151,810</b>
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	<b>57,591</b>

**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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	
<b>2a</b>	Tax on investment income for 2014 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2014 (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	<b>1a</b>	<b>108,184</b>
<b>b</b>	Program-related investments – total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	<b>108,184</b>
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	<b>5</b>	<b>47</b>
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	<b>108,137</b>

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

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
<b>1</b> Distributable amount for 2014 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2014				
<b>a</b> Enter amount for 2013 only				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009				
<b>b</b> From 2010				
<b>c</b> From 2011				
<b>d</b> From 2012				
<b>e</b> From 2013				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ <b>108,184</b>				
<b>a</b> Applied to 2013, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required – see instructions)				
<b>d</b> Applied to 2014 distributable amount				
<b>e</b> Remaining amount distributed out of corpus	<b>108,184</b>			
<b>5</b> Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	<b>108,184</b>			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b Taxable amount – see instructions				
<b>e</b> Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount – see instructions				
<b>f</b> Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				
<b>7</b> 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)				
<b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2010				
<b>b</b> Excess from 2011				
<b>c</b> Excess from 2012				
<b>d</b> Excess from 2013				
<b>e</b> Excess from 2014				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling **06/17/87**

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

	Prior 3 years				(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	<b>4,688</b>				<b>4,688</b>
<b>b</b> 85% of line 2a	<b>3,985</b>				<b>3,985</b>
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed	<b>108,184</b>	<b>101,417</b>	<b>80,403</b>	<b>52,064</b>	<b>342,068</b>
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	<b>108,184</b>	<b>101,417</b>	<b>80,403</b>	<b>52,064</b>	<b>342,068</b>
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test – enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	<b>38,394</b>	<b>36,398</b>	<b>35,868</b>	<b>31,079</b>	<b>141,739</b>
<b>c</b> "Support" alternative test – enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

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

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

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

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

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:  
**CHARLES R JENKINS 410-289-9100**  
**PO BOX 572 OCEAN CITY MD 21843**

**b** The form in which applications should be submitted and information and materials they should include  
**NO SPECIFIC FORM OR INFORMATION IS REQUESTED**

**c** Any submission deadlines  
**N/A**

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

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year <b>SEE STATEMENT 6</b>				<b>59,140</b>
<b>Total</b>			<b>► 3a</b>	<b>59,140</b>
<b>b</b> Approved for future payment <b>N/A</b>				
<b>Total</b>			<b>► 3b</b>	





**Schedule of Contributors**

OMB No 1545-0047

**2014**

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

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

**JOAN W JENKINS FOUNDATION**

**52-1486477**

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- ☐ 501(c)( ) (enter number) organization
- ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 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**

- ☒ 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 $\frac{1}{3}$ % 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)

Name of organization

JOAN W JENKINS FOUNDATION

Employer identification number

52-1486477

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE ATLANTIC CLUB P.O.BOX 563  OCEAN CITY MD 21843	\$ 52,657	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



## Federal Statements

## Statement 1 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
PAYROLL TAXES	\$ 9,644	\$ 9,644	\$ 9,644	\$
TOTAL	\$ 9,644	\$ 9,644	\$ 9,644	\$ 0

## Statement 2 - Form 990-PF, Part I, Line 19 - Depreciation

Date Acquired	Description	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
9/30/88	ROUTE 50 BUILDING	\$ 246,530	\$ 163,069	S/L	40	\$ 6,163	\$ 6,163	\$ 6,163
9/30/88	ROUTE 50 LAND	75,000			0			
9/30/88	ROUTE 50 TELEPHONE	1,460	1,460		10			
7/25/96	ROUTE 50 CARPET	2,340	2,340	S/L	5			
1/08/98	ROUTE 50 IMPROVEMENT	4,000	1,675	S/L	40	100	100	100
10/01/98	NEW HEATING & AIR UNIT	52,600	21,040	S/L	40	1,315	1,315	1,315
11/19/98	CAPIT. LABOR-HEATING UNIT	9,916	3,925	S/L	40	248	248	248
3/02/05	FURNISHINGS	9,000	9,000	S/L	7			
9/04/12	ICE MAKER	2,930	872	S/L	7	418	418	418
TOTAL	\$ 403,776	\$ 203,381				\$ 8,244	\$ 8,244	\$ 8,244

## Federal Statements

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
BANK AND CREDIT CHARGES				
INSURANCE BUILDING & CONTENTS	4,462	4,462	4,462	
WORKMENS COMPENSATION	524	524	524	
INVESTMENT FEES	2,202	2,202	2,202	
MISCELLANEOUS	115	115	115	
PAYROLL PROCESSING FEES	2,087	2,087	2,087	
TOTAL	\$ 9,390	\$ 9,390	\$ 9,390	\$ 0

Statement 4 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
BUILDING	\$ 123,337	\$ 313,046	\$ 197,535	\$
EQUIPMENT	2,058	4,390	2,750	
FURNITURE&FIXTURE		11,340	11,340	
LAND	75,000	75,000		
TOTAL	\$ 200,395	\$ 403,776	\$ 211,625	\$ .0

Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
MICHAEL H JONES PO BOX 572 OCEAN CITY MD 21843-0572	CEO/VICE PRE	2.00	0	0	0
CHARLES JENKINS PO BOX 572 OCEAN CITY MD 21843-0572	CEO/PRESIDEN	5.00	0	0	0
MARGIE MCBANE PO BOX 572	SECRETARY-TR	2.00	0	0	0

## Federal Statements

Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,  
Etc. (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
OCEAN CITY MD 21843-0572					
TIMOTHY KING 612 SOUTH PACIFIC AVE OCEAN CITY MD 21842	CFO/VICE PRE	2.00	0	0	0
BRUCE MOORE P.O. BOX 563 OCEAN CITY MD 21843	VICE PRESIDE	2.00	0	0	0
WENDY NATHAN 10211 WILLOWBROOK DR BERLIN MD 21811	ASST SEC-TRE	2.00	0	0	0

**Form 990-PF, Part XV, Line 2b - Application Format and Required Contents**Description

NO SPECIFIC FORM OR INFORMATION IS REQUESTED

## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year

Name		Address		Relationship	Status	Purpose	Amount
AMERICAN CANCER-RELAY FOR LIFE				P O BOX 751		UNRESTRICTED	1,000
OCEAN CITY MD 21843					NONE		
AMERICAN DIABETES ASSOCIATION				P O BOX 11454		MEMORY OF LOUISE MARIAN PEUSER	500
ALEXANDRIA VA 22312					NONE		
AMERICAN HEART ASSOCIATION				P.O. BOX 78851		UNRESTRICTED	90
PHOENIX AZ 85062					NONE		
APPALACHIAN TRAIL CONSERVACY				P.O. BOX 807		UNRESTRICTED	100
HARPERS FERRY WV 25425					NONE		
ART LEAGUE OF OCEAN CITY				P O BOX 3503		UNRESTRICTED	190
OCEAN CITY MD 21843					NONE		
ASBURY UNITED METHODIST CHURCH				1401 CAMDEN AVE		MEMORY OF H ORLAND LANGRALL JR	1,000
SALISBURY MD 21801					NONE		
ASSATEAGUE COASTAL TRUST				P.O. BOX 731		UNRESTRICTED	500
BERLIN MD 21811					NONE		
ATLANTIC GENERAL HOSPITAL FOUNDATIO				9733 HEALTHWAY DRIVE		UNRESTRICTED	500
BERLIN MD 21811					NONE		
ATLANTIC GENERAL HOSPITAL FOUNDATIO				9733 HEALTHWAY DRIVE		WOMEN'S HEALTH CENTER	5,000
BERLIN MD 21811					NONE		
BLESS OUR CHILDREN				1729 N. SALISBURY BLVD		UNRESTRICTED	1,000
SALISBURY MD 21801					NONE		
CAMP TRIDENT				P O BOX 9		UNRESTRICTED	3,000
CAPE CHARLES VA 23310					NONE		
CHESAPEAKE BAY FOUNDATION				P.O. BOX 17447		UNRESTRICTED	100
BALTIMORE MD 21298					NONE		
CHESAPEAKE BAY FOUNDATION				6 HERNDON AVE		MEMORY OF DANIEL PATRICK DUFFY	250
ANNAPOLIS MD 21403					NONE		
CHESAPEAKE BAY JOURNAL FUND				P.O. BOX 222		UNRESTRICTED	100
JACOBUS PA 17407					NONE		
COASTAL HOSPICE				P.O. BOX 1733		UNRESTRICTED	5,650
SALISBURY MD 21802					NONE		
COMMUNITY FOUNDATION OF THE E.S.				1324 BELMONT AVE STE 401		UNRESTRICTED	700
SALISBURY MD 21804					NON		
DEFENDERS OF WILDLIFE				P.O. BOX 1551		UNRESTRICTED	20
MERRIFIELD VA 22116					NONE		
DIAKONIA				12747 OLD BRIDGE ROAD		UNRESTRICTED	6,000
OCEAN CITY MD 21842					NONE		
EASTER SEALS				203 EAST DICKERSON LANE		UNRESTRICTED	200
MIDDLETOWN DE 19709					NONE		

## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

Name		Address		Relationship	Status	Purpose	Amount
EASTERN SHORE OF VA HISTORICAL SOCIETY	ONANCOCK VA 23417			P O BOX 179	NONE	UNRESTRICTED	200
FRIENDS OF TEACKLE MANSION INC	PRINCESS ANNE MD 21853			P.O. BOX 152	NONE	UNRESTRICTED	500
HABITAT FOR HUMANITY	AMERICUS GA 31709			P O BOX 6439	NONE	UNRESTRICTED	100
HISTORIC ST MARTINS CHURCH FOUNDATION	BERLIN MD 21811			P O BOX 590	NONE	UNRESTRICTED	250
HOPEWELL CANCER SUPPORT	BROOKLANDVILLE MD 21022			P O BOX 755	NONE	MEMORY OF WILLIAM L KIRK	2,000
HUMANE SOCIETY OF THE TREASURE COAST	PALM CITY FL 34990			4100 SW LEIGHTON FARM AVE	NONE	UNRESTRICTED	200
LOWER SHORE LAND TRUST	BERLIN MD 21811			9931 OLD OCEAN CITY BLVD	NONE	UNRESTRICTED	1,000
NATIONAL PARK FOUNDATION	BALTIMORE MD 21298			P.O. BOX 17394	NONE	UNRESTRICTED	25
NATIONAL PARKS CONSERVATION ASSOCIATION	WASHINGTON DC 20077			P.O. BOX 97202	NONE	UNRESTRICTED	25
OCEAN CITY BAPTIST CHURCH	OCEAN CITY MD 21842			12637B OCEAN GATEWAY	NONE	UNRESTRICTED	500
OCEAN CITY DEVELOPMENT CORPORATION	OCEAN CITY MD 21842			108 DORCHESTER ST	NONE	DANCE OF THE DOLPINS PROJECT	1,000
OCEAN CITY LIFE SAVING MUSEUM	OCEAN CITY MD 21843			P O BOX 603	NONE	MEMORY OF GEORGE HURLEY	1,000
OCEAN CONSERVANCY	WASHINGTON DC 20090			P.O. BOX 96003	NONE	UNRESTRICTED	25
OLD SALEM MUSEUMS & GARDENS	WINSTON-SALEM NC 27101			600 SOUTH MAIN STREET	NONE	UNRESTRICTED	500
PENINSULA REGIONAL MED CTR FOUNDATION	SALISBURY MD 21801			100 EAST CARROLL STREET	NONE	ONRESTRICTED	1,000
SACRED HEART LEAGUE	WALLS MS 38686			6050 HWY 161	NONE	UNRESTRICTED	25
SIERRA CLUB	PALM COAST FL 32142			P.O. BOX 421042	NONE	UNRESTRICTED	25
SPCA INTERNATIONAL	WASHINGTON DC 20090			P O BOX 92240	NONE	UNRESTRICTED	150

## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

Name		Address		Relationship	Status	Purpose	Amount
ST JOSEPH'S INDIAN SCHOOL CHAMBERLAIN SD 57326	NONE	P O BOX 326				UNRESTRICTED	100
ST MARY STAR OF THE SEA OCEAN CITY MD 21842	NONE	17TH STREET				UNRESTRICTED	500
ST PAUL'S EPISCOPAL CHURCH VIENNA VIENNA MD 21869	NONE	203 CHURCH ST				UNRESTRICTED	500
ST PAULS EPISCOPAL CHURCH BERLIN BERLIN MD 21811	NONE	P O BOX 429				UNRESTRICTED	1,000
THE AMERICAN LEGION TULSA OK 74121	NONE	P O BOX 21016				UNRESTRICTED	100
THE ATLANTIC CLUB OCEAN CITY MD 21843	TENANT	P.O. BOX 263				UNRESTRICTED	700
THE CRICKET CENTER INC BERLIN MD 21811	NONE	9714 HEALTHWAY DRIVE				UNRESTRICTED	500
THE EISENHOWER FOUNDATION ABILENE KS 67410	NONE	P O BOX 35				UNRESTRICTED	150
THE JESSE KLUMP MEMORIAL FUND INC BISHOPVILLE MD 21813	NONE	10737 PINEY ISLAND DR				UNRESTRICTED	250
THE MAGI FUND, INC SALISBURY MD 21803	NONE	P O BOX 521				UNRESTRICTED	100
THE NATURE CONSERVANCY IN VIRGINIA CHARLOTTESVILLE VA 22901	NONE	490 WESTFIELD ROAD				UNRESTRICTED	500
THE RACKLIFFE HOUSE BERLIN MD 21811	NONE	P O BOX 561				UNRESTRICTED	300
TRI-COUNTY COUNCIL FOUNDATION SALISBURY MD 21804	NONE	31901 TRI-COUNTY WAY				UNRESTRICTED	250
UNITED STATES SHERIFF'S ASSOCIATION WILTON NH 03086	NONE	P.O. BOX 957				UNRESTRICTED	50
UNITED WAY OF THE LOWER EASTERN SHO SALISBURY MD 21801	NONE	803 N SALISBURY BLVD 2100				UNRESTRICTED	500
UNIVERSITY OF BALTIMORE FOUNDATION BALTIMORE MD 21201	NONE	5 CHASE STREET				UNRESTRICTED	10,000
VES LAND TRUST EXMORE VA 23350	NONE	P.O. BOX 1114				UNRESTRICTED	200
VILLAGE OF HOPE SALISBURY MD 21802	NONE	P O BOX 2517				UNRESTRICTED	100

## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

Name		Address		Relationship	Status	Purpose	Amount
WALK ON WATER		OCEAN CITY MD 21842	NONE	9808 STEPHEN DECATUR HWY		BENEFIT OF JOHNS HOPKINS PROGRAM	200
WESLEY THEOLOGICAL SEMINARY ANNUAL		WASHINGTON DC 20016	NONE	4500 MASSACHUSETTS AVE NW		UNRESTRICTED	1,000
WHALEYVILLE UNITED METHODIST CHURCH		WHALEYVILLE MD 21872	NONE	P O BOX 6		UNRESTRICTED	500
WINBER HOSPICE		WINBER PA 15963	NONE	600 SOMERSET AVE		MEMORY OF DAVID HELSEL	500
WORCESTER COUNTY ARTS COUNCIL		BERLIN MD 21811	NONE	6 JEFFERSON ST		PAINT BERLIN	500
WORCESTER COUNTY DEVELOPMENTAL CENT		NEWARK MD 21841	NONE	P.O. BOX 70		UNRESTRICTED	250
WORCESTER COUNTY HUMANE SOCIETY		BERLIN MD 21811	NONE	P.O. BOX 48		UNRESTRICTED	5,120
WORCESTER PREPARATORY SCHOOL		BERLIN MD 21811	NONE	P.O. BOX 1006		UNRESTRICTED	400
WORLD WILDLIFE FUND		WASHINGTON DC 20077	NONE	P.O. BOX 96555		UNRESTRICTED	20
WOUNDED WARRIOR PROJECT		TOPEKA KS 66675	NONE	P.O. BOX 25		UNRESTRICTED	25
YOUTH FOR CHRIST		BALTIMORE MD 21237	NONE	6715 QUAD AVE		UNRESTRICTED	400
TOTAL							59,140