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## EXTENSION GRANTED

Form 990-PF

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

OMB No. 1545-0052

2015

Department of the Treasury  
Internal Revenue Service► 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](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2015 or tax year beginning 10/01/15, and ending 09/30/16

Name of foundation  <b>JOAN W JENKINS FOUNDATION</b>		A Employer identification number  <b>52-1486477</b>		
		B Telephone number (see instructions)  <b>410-289-9100</b>		
Number and street (or P O box number if mail is not delivered to street address)  <b>PO BOX 572</b>		Room/suite		
City or town, state or province, country, and ZIP or foreign postal code  <b>OCEAN CITY MD 21843-0572</b>				
G Check all that apply  <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity  <input type="checkbox"/> Final return <input type="checkbox"/> Amended return  <input type="checkbox"/> Address change <input type="checkbox"/> Name change		C If exemption application is pending, check here ► <input type="checkbox"/>  D 1 Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>  E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>  F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>		
H Check type of organization  <input 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				
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► <b>\$ 1,269,823</b>	J Accounting method  <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual  <input type="checkbox"/> Other (specify)	(Part I, column (d) must be on cash basis)		
<b>Part I Analysis of Revenue and Expenses</b> (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)		<b>201,579</b>		
2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments		<b>3,870</b>	<b>3,870</b>	<b>3,870</b>
4 Dividends and interest from securities		<b>36,106</b>	<b>36,106</b>	<b>36,106</b>
5a Gross rents		<b>40,876</b>	<b>40,876</b>	<b>40,876</b>
b Net rental income or (loss) <b>32,630</b>				
6a Net gain or (loss) from sale of assets not on line 10		<b>STMT 1</b>	<b>17,910</b>	
b Gross sales price for all assets on line 6a		<b>595,919</b>		
7 Capital gain net income (from Part IV, line 2)			<b>0</b>	
8 Net short-term capital gain				<b>0</b>
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		<b>300,341</b>	<b>80,852</b>	<b>80,852</b>
13 Compensation of officers, directors, trustees, etc			<b>0</b>	
14 Other employee salaries and wages		<b>103,746</b>	<b>51,873</b>	<b>51,873</b>
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 2</b>	<b>9,725</b>	<b>9,725</b>
19 Depreciation (attach schedule) and depletion		<b>STMT 3</b>	<b>8,246</b>	<b>8,246</b>
20 Occupancy			<b>21,517</b>	
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (att. sch.)		<b>STMT 4</b>	<b>10,389</b>	<b>10,389</b>
24 Total operating and administrative expenses.			<b>153,623</b>	<b>80,233</b>
Add lines 13 through 23			<b>59,055</b>	
25 Contributions, gifts, grants paid			<b>212,678</b>	<b>80,233</b>
26 Total expenses and disbursements. Add lines 24 and 25				<b>110,928</b>
27 Subtract line 26 from line 12			<b>87,663</b>	
a Excess of revenue over expenses and disbursements				<b>619</b>
b Net investment income (if negative, enter -0-)				
c Adjusted net income (if negative, enter -0-)				<b>619</b>

For Paperwork Reduction Act Notice, see instructions.

DAA

Form 990-PF (2015)

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Operating and Administrative Expenses

929

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash – non-interest-bearing		463,303	524,868	524,868
2	Savings and temporary cash investments		707,811	744,955	744,955
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) ►		0		
	Less allowance for doubtful accounts ►				
8	Inventories for sale or use				
9	Prepaid expenses and deferred charges				
10a	Investments – U S and state government obligations (attach schedule)				
b	Investments – corporate stock (attach schedule)				
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)				
14	Land, buildings, and equipment basis ►	403,776			
	Less accumulated depreciation (attach sch) ► STMT 5	219,870			
15	Other assets (describe ►)		192,151	183,906	
16	Total assets (to be completed by all filers – see the instructions Also, see page 1, item I)	)	1,363,265	1,453,729	1,269,823
17	Accounts payable and accrued expenses			2,801	
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 ►)	)	0	2,801	
23	Total liabilities (add lines 17 through 22)				
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	► <input type="checkbox"/>			
24	Unrestricted				
25	Temporarily restricted				
26	Permanently restricted				
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	► <input checked="" type="checkbox"/>				
27	Capital stock, trust principal, or current funds		1,363,265	1,450,928	
28	Paid-in or capital surplus, or land, bldg, and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds				
30	Total net assets or fund balances (see instructions)		1,363,265	1,450,928	
31	Total liabilities and net assets/fund balances (see instructions)		1,363,265	1,453,729	

## 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	1,363,265
2	Enter amount from Part I, line 27a	2	87,663
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	1,450,928
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	1,450,928

**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.)
1a <b>N/A</b>					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(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			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			3		

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

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

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

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

 Yes  No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	108,137	1,151,810	0.093884
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

- 2 Total of line 1, column (d) 2 0.378711
- 3 Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 0.075742
- 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 4 1,242,990
- 5 Multiply line 4 by line 3 5 94,147
- 6 Enter 1% of net investment income (1% of Part I, line 27b) 6
- 7 Add lines 5 and 6 7 94,153
- 8 Enter qualifying distributions from Part XII, line 4 8 110,928

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

**Part VI** Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see 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)	1	6
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		
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	6
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	6
6	<b>Credits/Payments</b>		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	48
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	48
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	42
11	Enter the amount of line 10 to be <b>Credited to 2016 estimated tax</b> ►	11	
		42	Refunded ►

**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
1b	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
1c	Did the foundation file Form 1120-POL for this year?		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
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	2	X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►		
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

**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)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14	The books are in care of ► <b>MARGIE MCBANE</b> <b>PO BOX 572</b>	Telephone no ►
	Located at ► <b>OCEAN CITY</b>	MD ZIP+4 ► <b>21843-0572</b>
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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16	At any time during calendar year 2015, 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. If "Yes," enter the name of the foreign country ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**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.		
1a	During the year did the foundation (either directly or indirectly)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(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	<b>N/A</b>
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 2015?	<b>N/A</b>
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? If "Yes," list the years ► <b>20 20 20 20</b>	<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>
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► <b>20 20 20 20</b>	<b>2b</b>
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 2015 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 2015)	<b>N/A</b>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>3b</b>
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 2015?	<b>4a</b> <input checked="" type="checkbox"/>
		<b>4b</b> <input checked="" type="checkbox"/>

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

5a	During the year did the foundation pay or incur any amount to	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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	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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	5b
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	
6a	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	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	X
7a	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	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	7b

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MICHAEL H JONES PO BOX 572	OCEAN CITY MD 21843-0572	VICE PRESIDE 2.00	0	0
CHARLES JENKINS PO BOX 572	OCEAN CITY MD 21843-0572	PRESIDENT 2.00	0	0
MARGIE MCBANE PO BOX 572	OCEAN CITY MD 21843-0572	SECRETARY 2.00	0	0
LAURA R JENKINS PO BOX 572	OCEAN CITY MD 21843	VICE PRESIDE 2.00	0	0

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

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

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

▶ 0

**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
<b>NONE</b>		

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 ACTIVITES 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.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	759,826
b	Average of monthly cash balances	1b	502,093
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,261,919
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,261,919
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see instructions)	4	18,929
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,242,990
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	62,150

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

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5	2a	
b	Income tax for 2015 (This does not include the tax from Part VI )	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	<b>Distributable amount as adjusted</b> Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes	1a	110,928
a	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1b	
b	Program-related investments – total from Part IX-B	2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	3a	
3	Amounts set aside for specific charitable projects that satisfy the	3b	
a	Suitability test (prior IRS approval required)	4	110,928
b	Cash distribution test (attach the required schedule)	5	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	6	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	6	110,922
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4		

**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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ <u>110,928</u>				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus	<u>110,928</u>			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:	<u>110,928</u>			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount – see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount – see instructions				
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				
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)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

**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 2015, 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 <input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed				
b	85% of line 2a				
c	Qualifying distributions from Part XII, line 4 for each year listed				
d	Amounts included in line 2c not used directly for active conduct of exempt activities				
e	Qualifying distributions made directly for active conduct of exempt activities				
	Subtract line 2d from line 2c				
3	Complete 3a, b, or c for the alternative test relied upon				
a	"Assets" alternative test – enter				
(1)	Value of all assets				
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)				
b	"Endowment" alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
c	"Support" alternative test – enter				
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
(3)	Largest amount of support from an exempt organization				
(4)	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	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year <b>SEE STATEMENT 6</b>				<b>59,055</b>
<b>Total</b>			► 3a	<b>59,055</b>
b Approved for future payment <b>N/A</b>				
<b>Total</b>			► 3b	

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

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations )

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

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
1a(1)		<b>X</b>
1a(2)		<b>X</b>
1b(1)		<b>X</b>
1b(2)		<b>X</b>
1b(3)		<b>X</b>
1b(4)		<b>X</b>
1b(5)		<b>X</b>
1b(6)		<b>X</b>
1c		<b>X</b>

- a Transfers from the reporting foundation to a noncharitable exempt organization of
  - (1) Cash
  - (2) Other assets
- b Other transactions
  - (1) Sales of assets to a noncharitable exempt organization
  - (2) Purchases of assets from a noncharitable exempt organization
  - (3) Rental of facilities, equipment, or other assets
  - (4) Reimbursement arrangements
  - (5) Loans or loan guarantees
  - (6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes  No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

May the IRS discuss this return  
with the preparer shown below  
(see instructions)?  Yes  No

Sign  
Here

 Walter Lamm

18-8-17

Date

*Vice* (see  
PRESIDENT)

---

**Title**

Signature of owner or trustee		Date	Title	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name		Preparer's signature	Date
	<b>TIMOTHY J KING</b>		<b>TIMOTHY J KING</b>	<b>07/27/17</b>
	Firm's name ► <b>FAW, CASSON &amp; CO., LLP</b>		PTIN	
Firm's address ► <b>9748 STEPHEN DECATUR HWY STE 103 OCEAN CITY, MD 21842-9358</b>		Firm's EIN ►		
		Phone no	<b>410-213-8700</b>	
		Check <input type="checkbox"/> if self-employed		

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

Department of the Treasury  
Internal Revenue Service

OMB No 1545-0047

**2015**

**Schedule of Contributors**

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

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

Name of the organization

**JOAN W JENKINS FOUNDATION**

Employer identification number

**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)

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) (2015)

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	\$ 54,567	Person <input 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 )

**Federal Statements****Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets**

Whom Sold	Description	Date Acquired	Date Sold	How Received		Expense	Depreciation	Net Gain / Loss
				Sale Price	Cost			
PRINCIPAL MID CAP FUND CLASS INS		10/08/15	12/16/15	\$ 120,919	\$ 120,000	\$		\$ 919
SECTOR SPDR TR SBI BASIC IND\$		8/16/11	9/30/15	\$ 39,901	\$ 34,440			\$ 5,461
SECTOR SPDR TR SHS BEN		8/16/11	10/08/15	\$ 26,250	\$ 19,600			\$ 6,650
VANGUARD MID CAP	VARIOUS	10/08/15		\$ 60,584	\$ 38,684			\$ 21,900
VANGUARD MID CAP GROWTH INDEX	VARIOUS	10/08/15		\$ 60,107	\$ 38,505			\$ 21,602
AMERICAN WATER WORKS CO INC	2/11/16	8/12/16		\$ 13,986	\$ 11,838			\$ 2,148
GOLDMAN SACHS GRTH OPPOR	2/25/15	2/10/16		\$ 13,887	\$ 20,000			\$ -6,113
ISHARES TR S &P MIDCAP 400	12/16/15	2/04/16		\$ 111,062	\$ 119,942			\$ -8,880
TOUCHSTONE SANDS CAPITAL SELECT	10/08/15	4/19/16		\$ 70,985	\$ 80,000			\$ -9,015
GOLDMAN SACHS GRTH OPPOR INSTIT	CLAS	2/10/16		\$ 37,150	\$ 45,000			\$ -7,850
TEMPLETON INSTL FDS INC	VARIOUS	2/10/16		\$ 41,088	\$ 50,000			\$ -8,912
TOTAL				\$ 595,919	\$ 578,009	\$ 0	\$ 0	\$ 17,910

  

Description	Total	Net Investment		Adjusted Net	Charitable Purpose
		\$ 9,677	\$ 48		
Description	Total	Net Investment		Adjusted Net	Charitable Purpose
Description	Total	Net Investment		Adjusted Net	Charitable Purpose
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Description	Total	Net Investment		Adjusted Net	Charitable Purpose

## Federal Statements

Statement 3 - Form 990-PF, Part I, Line 19 - Depreciation

Description		Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
Date Acquired	Cost Basis						
ROUTE 50 BUILDING 9/30/88	\$ 246,530	\$ 169,232	S/L	40	\$ 6,164	\$ 6,164	\$ 6,164
ROUTE 50 LAND 9/30/88	75,000			0			
ROUTE 50 TELEPHONE 9/30/88	1,460	1,460		10			
ROUTE 50 CARPET 7/25/96	2,340	2,340	S/L	5			
ROUTE 50 IMPROVEMENT 1/08/98	4,000	1,775	S/L	40	100	100	
NEW HEATING & AIR UNIT 10/01/98	52,600	22,355	S/L	40	1,315	1,315	
CAPIT. LABOR-HEATING UNIT 11/19/98	9,916	4,173	S/L	40	248	248	
FURNISHINGS 3/02/05	9,000	9,000	S/L	7			
ICE MAKER 9/04/12	2,930	1,290	S/L	7	419	419	
TOTAL	\$ 403,776	\$ 211,625			\$ 8,246	\$ 8,246	\$ 8,246

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$
EXPENSES				
INSURANCE BUILDING & CONTENTS	4,581	4,581	4,581	
WORKMEN'S COMPENSATION	524	524	524	
INVESTMENT FEES	2,888	2,888	2,888	
MISCELLANEOUS	327	327	327	
PAYROLL PROCESSING FEES	2,069	2,069	2,069	
TOTAL	\$ 10,389	\$ 10,389	\$ 10,389	\$ 0

## Federal Statements

## Statement 5 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
BUILDING	\$ 115,511	\$ 313,046	\$ 205,361	\$
EQUIPMENT	1,640	4,390	3,169	
FURNITURE & FIXTURE		11,340	11,340	
LAND	75,000	75,000		
TOTAL	\$ 192,151	\$ 403,776	\$ 219,870	\$ 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
ACADEMY ART MUSEUM EASTON MD 21601	106 SOUTH STREET			UNRESTRICTED	100
AMERICAN FRIENDS OF THE HEBREW WASHINGTON DC 20016	NONE UNIV 5100 WISCONSIN AVE NW NONE			UNRESTRICTED	1,000
AMERICAN LEGION TULSA OK 747121-101	PO BOX 21016			UNRESTRICTED	200
APPALACHIAN TRAIL CONSERVACY HARPERS FERRY WV 25425	NONE	P.O. BOX 807		UNRESTRICTED	100
ART LEAGUE OF OCEAN CITY OCEAN CITY MD 21843	NONE	P O BOX 3503		UNRESTRICTED	2,200
ASSATEAGUE COASTAL TRUST BERLIN MD 21811	NONE	P.O. BOX 731		UNRESTRICTED	2,000
ATLANTIC GENERAL HOSPITAL FOUNDATIO BERLIN MD 21811	9733 HEALTHWAY DRIVE			UNRESTRICTED	7,652
ATLANTIC GENERAL HOSPITAL FOUNDATIO BERLIN MD 21811	NONE			UNRESTRICTED	500
AUTISTIC CHILDREN'S GROUP OF WORCES BERLIN MD 21811	NONE			ROBERT E WARFIELD MEMORIAL TOURNAMEN	500
BERLIN FIRE COMPANY INC BERLIN MD 21811	PO BOX 5			IN MEMORY OF KENNETH L TAYLOR	500
BLESS OUR CHILDREN SALISBURY MD 21801	NONE			UNRESTRICTED	2,000
CEDAR CHAPEL SCHOOL SNOW HILL MD 21863	1729 N. SALISBURY BLVD			UNRESTRICTED	1,000
CHESAPEAKE BAY FOUNDATION ANNAPOLIS MD 21403	NONE	510 COULBOURNE LANE		UNRESTRICTED	5,000
COASTAL HOSPICE SALISBURY MD 21802	NONE	6 HERNDON AVE		UNRESTRICTED	100
COMMUNITY FOUNDATION OF THE E.S. SALISBURY MD 21804	NONE	P.O. BOX 1733		UNRESTRICTED	200
DEFENDERS OF WILDLIFE MERRIFIELD VA 22116	NONE	1324 BELMONT AVE STE 401		UNRESTRICTED	1,000
DEL-MAR-VA COUNCIL BOY SCOUTS OF AM SALISBURY MD 21804	NONE	P.O. BOX 1551		UNRESTRICTED	30
DIAKONIA OCEAN CITY MD 21842	NONE	31901 TRI-COUNTY WAY 12747 OLD BRIDGE ROAD		IN HONOR OF MICHAEL & MARILYN JAMES	1,000
DISABLED VETERANS NATIONAL FUNDATIO WASHINGTON DC 20090-6648	NONE	PO BOX 96648		UNRESTRICTED	2,000
				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
EASTER SEALS	203 EAST DICKERSON LANE				215
EASTERN SHORE LAND CONSERVANCY	NONE			UNRESTRICTED	
EASTON MD 21601	114 S WASHINGTON ST			UNRESTRICTED	500
EASTERN SHORE OF VIRGINIA COMMUNITY PO BOX 205	NONE			UNRESTRICTED	
ONLEY VA 23418	NONE			UNRESTRICTED	100
EISENHOWER FOUNDATION	PO BOX 35			UNRESTRICTED	50
ABILENE KS 67410-0035	NONE			UNRESTRICTED	
FURNACE TOWN	PO BOX 207			UNRESTRICTED	
SNOW HILL MD 21863	NONE			UNRESTRICTED	50
GLICK AWARD GALA	11036 WORCESTER HIGHWAY			UNRESTRICTED	
BERLIN MD 21811	NONE			UNRESTRICTED	3,000
HABITAT FOR HUMANITY	P O BOX 6439			UNRESTRICTED	
AMERICUS GA 31709	NONE			UNRESTRICTED	
HUMANE SOCIETY OF THE TREASURE COAS	4100 SW LEIGHTON FARM AVE			UNRESTRICTED	200
PALM CITY FL 34990	NONE			UNRESTRICTED	
LOWER SHORE LAND TRUST	9931 OLD OCEAN CITY BLVD			UNRESTRICTED	200
BERLIN MD 21811	NONE			UNRESTRICTED	
NATIONAL GEOGRAPHIC SOCIETY	PO BOX 98197			UNRESTRICTED	2,000
WASHINGTON DC 20077-7137	NONE			UNRESTRICTED	
NATIONAL PARK FOUNDATION	P.O. BOX 17394			UNRESTRICTED	25
BALTIMORE MD 21298	NONE			UNRESTRICTED	
NATIONAL PARKS CONSERVATION ASSOCIAT	P.O. BOX 97202			UNRESTRICTED	25
WASHINGTON DC 20077	NONE			UNRESTRICTED	
NATIONAL WILDLIFE FEDERATION	PO BOX 1691			UNRESTRICTED	25
MERRIFIELD VA 22116-1691	NONE			UNRESTRICTED	
NATURE CONSERVANCY VIRGINIA CHAPTER	PO BOX 6015			UNRESTRICTED	
ALBERT LEA MN 56007	NONE			UNRESTRICTED	
OCEAN CITY VOLUNTEER FIRE CO	PO BOX 27			UNRESTRICTED	15
OCEAN CITY MD 21843	NONE			UNRESTRICTED	
OCEAN CITY VOLUNTEER FIRE COMPANY	PO BOX 27			IN MEMORY OF JAMES T. BUNTING	500
OCEAN CITY MD 21843	NONE			IN MEMORY OF JAMES T. BUNTING	1,000
OCEAN CONSERVANCY	P.O. BOX 96003			UNRESTRICTED	
WASHINGTON DC 20090	NONE			UNRESTRICTED	50
SACRED HEART LEAGUE	6050 HWY 161			UNRESTRICTED	
WALLS MS 38686	NONE			UNRESTRICTED	15

## 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
SALISBURY UNIVERSITY FOUNDATION SALISBURY MD 21801-6861	1101 CAMDEN AVE PO BOX 2979	NONE		G RAY THOMPSON ENDOWMENT FUND	1,000
SALISBURY ZOO COMMISSION SALISBURY MD 21802	NONE			UNRESTRICTED	200
SHIRLEY GRACE PREGNANCY CENTER BERLIN MD 21811	NONE		10226 OLD OCEAN CITY BLVD	UNRESTRICTED	500
SIERRA CLUB PALM COAST FL 32142	P.O. BOX 421042	NONE		UNRESTRICTED	43
SMART GROWTH AMERICA WASHINGTON DC 20036	1707 L ST NW PO BOX 164	NONE		UNRESTRICTED	1,000
SPCA OF ONLEY VA ONLEY VA 23418	NONE		513 S MAIN ST	IN MEMORY OF SHERWOOD SHREAVES	500
ST MARTIN'S CHURCH FOUNDATION BERLIN MD 21811	NONE		17TH STREET	UNRESTRICTED	1,000
ST MARY STAR OF THE SEA OCEAN CITY MD 21842	NONE		203 CHURCH ST	UNRESTRICTED	500
ST PAUL'S EPISCOPAL CHURCH VIENNA VIENNA MD 21869	NONE			UNRESTRICTED	500
ST. MARTIN'S CHURCH FOUNDATION, INC OCEAN CITY MD 21843	PO BOX 718 PO BOX 958	NONE		UNRESTRICTED	400
STAUNTON MILITARY ACADEMY STAUNTON VA 24402-0958	NONE			UNRESTRICTED	1,000
STEVENSON UNITED METHODIST CHURCH BERLIN MD 21811	NONE		MAIN ST	UNRESTRICTED	1,000
TAYLORVILLE UNITED METHODIST CHURCH BERLIN MD 21811	PO BOX 456 P.O. BOX 263	NONE		UNRESTRICTED	700
THE ATLANTIC CLUB OCEAN CITY MD 21843	TENANT			RENOVATE MGR ROOM	1,000
THE ATLANTIC CLUB OCEAN CITY MD 21843	PO BOX 263	NONE		IN MEMORY OF DAVID MCLOUD	250
THE ATLANTIC CLUB OCEAN CITY MD 21843	PO BOX 563 TENANT			WALK FOR RECOVERY	300
THE BAY JOURNAL JACOBUS PA 17407-0222	TENANT		PO BOX 222	UNRESTRICTED	100
THE JESSE KLUMP MEMORIAL FUND BISHOPVILLE MD 21813	INC 10737 PINEY ISLAND DR NONE			UNRESTRICTED	250

## 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
THE RACKLiffe HOUSE BERLIN MD 21811	P O BOX 561	NONE	UNRESTRICTED	300	
UNITED STATES SHERIFF'S ASSOCIATION WILTON NH 03086	P.O. BOX 957	NONE	UNRESTRICTED	25	
UNITED WAY OF THE LOWER EASTERN SHO SALISBURY MD 21801	803 N SALISBURY BLVD NONE	UNRESTRICTED	UNRESTRICTED	1,000	
VE'S LAND TRUST EXMORE VA 23350	P.O. BOX 1114	NONE	UNRESTRICTED	200	
VIRGINIA EASTERN SHORE LAND TRUST EXMORE VA 23350	PO BOX 1114	NONE	UNRESTRICTED	200	
WESLEY THEOLOGICAL SEMINARY ANNUAL WASHINGTON DC 20016	4500 MASSACHUSETTS AVE NW	NONE	UNRESTRICTED	1,000	
WOR-WIC COMMUNITY COLLEGE FOUNDATIO SALISBURY MD 21804-1486	32000 CAMPUS DRIVE	NONE	UNRESTRICTED	1,000	
WORCESTER COUNTY ARTS COUNCIL BERLIN MD 21811	6 JEFFERSON ST	NONE	PAINT BERLIN	500	
WORCESTER COUNTY DEVELOPMENTAL NEWARK MD 21841	CENT P.O. BOX 70	NONE	UNRESTRICTED	1,250	
WORCESTER COUNTY HUMANE SOCIETY BERLIN MD 21811	P.O. BOX 48	NONE	UNRESTRICTED	2,000	
WORCESTER COUNTY WARRIORS BISHOPVILLE MD 21813	12005 TURTLE MILL RD	NONE	UNRESTRICTED	1,000	
WORCESTER PREPARATORY SCHOOL BERLIN MD 21811	P.O. BOX 1006	NONE	UNRESTRICTED	4,740	
WORLD WILDLIFE FUND WASHINGTON DC 20090-6555	PO BOX 96555	NONE	UNRESTRICTED	20	
WOUNDED WARRIOR PROJECT TOPEKA KS 66675	P.O. BOX 25	NONE	UNRESTRICTED	25	
YOUTH FOR CHRIST BALTIMORE MD 21237	6715 QUAD AVE	NONE	UNRESTRICTED	400	
TOTAL				59,055	