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SCANNED MAY 2 4 2017

Form 990-PF Department of the Treasury Internal Revenue Service **Return of Private Foundation**

OMB No 1545-0052

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

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

Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. , and ending

For caler	ndar year 2016 or tax year beginning		, and ending	,	
Name of	f foundation	A Employer identification	number		
_	HENRY P. & M. PAGE DUR	KEE LAUGHLIN			
	NDATION, INC.			<u>52-6080760</u>	<u> </u>
	and street (or P O box number if mail is not delivered to street	·	Room/suite	B Telephone number	
	HIGHLAND STREET, SUITE			301-695-57	
_	own, state or province, country, and ZIP or foreign p DERICK, MD 21701	ostal code		C If exemption application is p	ending, check here
	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return			
	Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test, proputation
H Check	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	
Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	under section 507(b)(1)	
I Fair ma	arket value of all assets at end of year J Accounti	ng method: L Cash	X Accrual	F If the foundation is in a	60-month termination
		ther (specify)		under section 507(b)(1)	(B), check here
<u>▶</u> \$	3,261,648. (Part I, colu	mn (d) must be on cash b	basis.)	 	
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	15,092.			
2	Check If the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	107,413.	107,413.	107,413.	STATEMENT 1
5a	Gross rents				
l b	Net rental income or (loss)				
o 6a	Net gain or (loss) from sale of assets not on line 10	34,599.			
Revenue 2	Gross sales price for all assets on line 6a				
ð 7	Capital gain net income (from Part IV, line 2)		34,599.		
8 2	Net short-term capital gain			N/A	
9	Income modifications Gross sales less returns				
10a	and allowances		 		
				<u></u>	
1.0	: Gross profit or (loss) Other income		<u> </u>	 	
11	Total. Add lines 1 through 11	157,104.	142,012.	107,413.	<u> </u>
13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
14	Other employee salaries and wages		<u>_</u>		<u>-</u> -
15	Pension plans, employee benefits				
φ .	Legal fees				
ğ b	Accounting fees STMT 2	2,940.	2,940.	0.	0.
Expense	Other professional fees				
<u>9</u> 17	Interest				
Operating and Administrative 12 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Taxes STMT 3	140.	140.	0.	0.
. <u>≅</u> 19	Depreciation and depletion				
통 20	Occupancy	RECEIVE	} 		
ĕ 21	Travel, conferences, and meetings	REULIVE			·
E 22	Printing and publications	2 24 6 1001		<u> </u>	
E 23	Other expenses STMT 4	MA321, 41201	(32,209)	0.	0.
ta 24		35,490	35,289.	0.	0.
රි ₂₅	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	(154,100.	133,203.		154,100.
26		1 1 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			124,100.
20	Add lines 24 and 25	189,590.	35,289.	L 0.	154,100.
27	Subtract line 26 from line 12:			·	
	Excess of revenue over expenses and disbursements	-32,486.			
1	Net investment income (if negative, enter -0-)		106,723.		
	Adjusted net income (if negative, enter -0-)			107,413.	



	23	Total liabilities (add lines 17 through 22)	0.	0.
		Foundations that follow SFAS 117, check here		
	ļ	and complete lines 24 through 26 and lines 30 and 31.		
Balances	24	Unrestricted		
lan	25	Temporarily restricted		
	26	Permanently restricted		
ru Du		Foundations that do not follow SFAS 117, check here		
	ŀ	and complete lines 27 through 31.		
Assets or	27	Capital stock, trust principal, or current funds	0.	0.
Set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.
AS.	29	Retained earnings, accumulated income, endowment, or other funds	3,132,903.	3,261,648.
ě	30	Total net assets or fund balances	3,132,903.	3,261,648.
_	31	Total liabilities and net assets/fund balances	3.132.903.	3.261.648.

Part III Analysis of Changes in Net Assets or Fund Balances

20 Loans from officers, directors, trustees, and other disqualified persons

21 Mortgages and other notes payable22 Other liabilities (describe ►

_	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	$\overline{}$	
,			2 122 002
	(must agree with end-of-year figure reported on prior year's return)	\perp	3,132,903.
2	Enter amount from Part I, line 27a	2	-32,486.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 5	3	161,231.
4	Add lines 1, 2, and 3	4	3,261,648.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,261,648.

FOUNDATION, INC. 52-6080760

(a) List and describe	the kind(s) of property sold (e.g	., real estate,	income	(b) H	ow acquired Purchase Donation	(c)	Date acquired	(d) Date sold
	ouse; or common stock, 200 shs	S. MLU (0.)		D-			no., day, yr.)	(mo., day, yr)
MORGAN STANLEY -				<u> </u>	<u>P</u>		RIOUS	12/31/16
b MORGAN STANLEY - c CAPITAL GAINS DI				 	P	VA	RIOUS	12/31/16
d GAPITAL GAINS DI	VIDENDS			<u> </u>		+		
e				 		-		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		at or other basis expense of sale				(h) Gain or (loss) plus (f) minus	
a 425,847.			413,09	8.				12,749.
b 1,399,531.			1,383,11	1.				16,420.
c 5,430.]				5,430.
d								
<u>e</u>		1	10,01,00					
Complete only for assets showing g	 _					(1) Gai	ns (Col. (h) gain but not less tha	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			Lo. (k),	sses (from col. ((h))
a		ļ	·					12,749.
<u>b</u>								16,420.
<u>c</u>		<u> </u>						5,430.
<u>d</u>				\dashv				
e				$\overline{}$				
2 Capital gain net income or (net capita	If gain, also enter $\left\{\begin{array}{l} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{array}\right.$			}	2			34,599.
Net short-term capital gain or (loss)		nd (6):		3	Ì			
If gain, also enter in Part I, line 8, col	umn (c).			•				10 740
Part V Qualification Unc	ler Section 4940(e) for	Reduced	Tax on Net	Inve	stment I	псоп		12,749.
f section 4940(d)(2) applies, leave this Was the foundation liable for the section f "Yes," the foundation does not qualify	4942 tax on the distributable an	mplete this pa	rt.					Yes X No
1 Enter the appropriate amount in each	n column for each year; see the i	nstructions bef	fore making any ei	ntries.				
(a) Base period years Calendar year (or tax year beginning i			Net value of no				Dıstrıt (col. (b) dıv	(d) oution ratio rided by col. (c))
2015		4,000.			170,35			.048575
2014		1,429.	 		088,55			.055505
2013		3,094.			486,02			.049654
2012		3,998.			519,27			.049441
2011		0,065.		, د	600,54	45.		.019460
2 Total of line 1, column (d)				-		}_	2	.222635
3 Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5,	or by the number	or yea	rs		3	.044527
4 Enter the net value of noncharitable-	use assets for 2016 from Part X,	line 5					4	3,084,798.
Multiply line 4 by line 3							5	137,357.
5 Enter 1% of net investment income (1% of Part I, line 27b)						6	1,067.
7 Add lines 5 and 6							7	138,424.
B Enter qualifying distributions from Pa	art XII, line 4						8	154,100.
If line 8 is equal to or greater than lin	e 7, check the box in Part VI, line	th, and comp	lete that part usin	g a 1%	tax rate.			

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN FOUNDATION, INC.

Form 990-PF (2016) FOUNDATION, INC.		52-6080	760	١	Page 4
Part VI Excise Tax Based on Investment Income (Section 4)	940(a), 4940(b), 4940(e), or 4	948 - see	instr	uctio	ns)
1a 'Exempt operating foundations described in section 4940(d)(2), check here an	d enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1		1,0	67.
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). 丿				
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		1,0	67.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y. Others enter -0-)	4			0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	į	5		<u>1,0</u>	67.
6 Credits/Payments:	1 1	1			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 3,520.				
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		3,5	20.
8 Enter any penalty for underpayment of estimated tax. Check here 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 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpain	1 ▶ [10		2,4	53.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	2,453 Refunded ►	11			0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or intervene	in		Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pu	rposes (see instructions for the definition)	?	16		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	s and copies of any materials publish	ed or			Ī
distributed by the foundation in connection with the activities.]	}
c Did the foundation file Form 1120-POL for this year?			1c		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:				
(1) On the foundation. > \$ 0 . (2) On foundation management				[
e Enter the reimbursement (if any) paid by the foundation during the year for political expi]
managers.▶\$ 0.	·				İ
2 Has the foundation engaged in any activities that have not previously been reported to the	ne IRS?		2		X
If "Yes," attach a detailed description of the activities.					
3 Has the foundation made any changes, not previously reported to the IRS, in its governi	ng instrument, articles of incorporation, or	7	ļ		Į .
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	-		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	•	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ear?	,	5		X
If "Yes," attach the statement required by General Instruction T.					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d either:		İ		
By language in the governing instrument, or			}		
 By state legislation that effectively amends the governing instrument so that no mand 	atory directions that conflict with the state	law			
remain in the governing instrument?	,		6	х	
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	
Plu tilo louitouton nuto ut louit posoco in accord at any timo auting the your in 100,	oomplete varing oor (o), and varint		<u> </u>		
8a Enter the states to which the foundation reports or with which it is registered (see instru	ctions)			ĺ	
MD				l	ł
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	ne Attorney General (or designate)		1		
of each state as required by General Instruction G? If "No," attach explanation	.oornoy donoral (or dosignate)		86	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of	f section 4942(1)(3) or 4942(1)(5) for calar	ndar	- 00	-17	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes	• • • • • • • • • • • • • • • • • • • •	iudi	9		X_
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sci	•		10	-	X
To Did any persons become substantial continuators during the tax year. If "Yes," attach a sc	requie insting their names and addresses		rm 99 ()_DE	

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FOUNDATION, INC.

52-6080760 Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 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 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ JOHN R. LAUGHLIN Telephone no. ► 301 - 371 - 4975 Located at ▶ 4910 RIDGE CREST CT, FREDERICK, MD ZIP+4 ►21702 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, Yes No securities, or other financial account in a foreign country? 16 X See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country 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): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) 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)? N/A 16 Organizations relying on a current notice regarding disaster assistance check here 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 2016? 1c X 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If "Yes," list the years 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 N/A statement - see instructions.) 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. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes 🗓 No during the year? b If "Yes," did it have excess business holdings in 2016 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 2016.) N/A 36 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? X 4a 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 2016? Form 990-PF (2016)

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN Form 990-PF (2016) FOUNDATION, 52-6080760 Page 6 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: Yes X No '(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? X Yes L (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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)? 5b X Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 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. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, (a) Name and address enter -0-) allowances 0 SEE STATEMENT 8 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

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

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN

Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service		(a) Companyation
(a) Name and address of each person paid more than \$50,000 (b) Type of service NONE		(c) Compensation
NONE		
		
	ľ	
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 ANNUAL AWARDS TO GRADUATING PSYCHIATRIC RESIDENCY STUDENTS	+	
AT APPROXIMATELY 20 MEDICAL SCHOOLS.	7	
		25,200.
2 ANNUAL GRANTS TO COLLEGES, FOUNDATIONS, AND OTHER NON-PROFIT	_	
ORGANIZATIONS IN DIRECT SUPPORT OF THEIR CHARITABLE	4	100 000
ACTIVITIES.	 -	128,900.
<u> </u>	-	
4		
	4	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	T	Amount
1 N/A		
		
2	_	
	\dashv	
All other program-related investments. See instructions.	 	
3		
	4	
	-	
	-	
Total. Add lines 1 through 3	1	0.
		- 000 DE (0010)

4940(e) reduction of tax in those years.

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	3,116,716.
	Average of monthly cash balances	1b	15,059.
	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	3,131,775.
	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	3,131,775.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	46,977.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,084,798.
6	Minimum investment return. Enter 5% of line 5	6	154,240.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	154,240.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,067.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	153,173.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	153,173.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	153,173.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	<u> </u>
b	Program-related investments - total from Part IX-B	1b	<u>0.</u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	154,100.
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	5	1,067.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	153,033.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

Form **990-PF** (2016)

52-6080760 Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				153,173.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			154,081.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011				
b From 2012				
c From 2013				j I
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				***
Part XII, line 4: ► \$ 154,100.				
a Applied to 2015, but not more than line 2a			154,081.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				19.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				·
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line		- 0.		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must			1	
be distributed in 2017				153,154.
7 Amounts treated as distributions out of				233/1310
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				
				5 000 DE (0010)

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN

orm 990-PF (2016) FOUNDATI		otnictions and Dark's	(II A munatus = O)		<u>-6080760</u> Pa
Part XIV Private Operating For			· · · · · · · · · · · · · · · · · · ·	N/A	
1 a If the foundation has received a ruling or of					
foundation, and the ruling is effective for 2			▶ └ <u></u>	1 40 40()(0)	1000000
b Check box to indicate whether the foundat		ng toundation described		4942(j)(3) or L	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 2015	Prior 3 years	(4) 2012	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					-
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				-	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			 	 	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		<u> </u>		 	
(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)			ļ		
(2) Support from general public				T	
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 Infor			if the foundation	n had \$5,000 c	or more in assets
at any time during th	e year-see inst	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who			ntributions received by the	e foundation before t	the close of any tax
year (but only if they have contributed mo	re than \$5,000). (See s	section 507(d)(2).)			
IONE					
b List any managers of the foundation who			n (or an equally large porti	on of the ownership	of a partnership or
other entity) of which the foundation has a	10% or greater intere	st.			
NONE					
2 Information Regarding Contributio	n, Grant, Gift, Loan	, Scholarship, etc.,	Programs:		
Check here 🕨 🗶 If the foundation onl					
the foundation makes gifts, grants, etc. (s					, c, and d.
a The name, address, and telephone number	r or e-mail address of	the person to whom ap	olications should be addre	ssed:	
b The form in which applications should be	submitted and informa	ition and materials they	should include:		
c Any submission deadlines:					

52-6080760

Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year ADVOCATES FOR THE HOMELESS NONE INSTITUTION SPECIAL AWARDS TRUST FUND 216 ABRECHT PL FREDERICK, MD 21701 10,000. NONE ALAN SETH LEWIS, MD, PHD C/O YALE INDIVIDUAL EDUCATIONAL 25 PARK ST NEW HAVEN, CA 06519 400. ALISON LENET, MD C/O COLUMBIA INDIVIDUAL EDUCATIONAL UNIVERSITY 722 W. 168TH STREET NEW HAVEN, NY 10029 1,200. NONE AMERICAN COLLEGE OF PSYCHOANALYSTS INSTITUTION 6912 MAIN ST. SUITE 10 DOWNERS GROVE, IL 60516 10,000. AMERICAN SOCIETY OF PSYCHOANALYTIC NONE INSTITUTION **PHYSICIANS** 4804 JASMINE DRIVE ROCKVILLE MD 20853 2 500. SEE CONTINUATION SHEET(S) **▶** 3a Total 154,100. b Approved for future payment NONE

▶ 3b

Total

FOUNDATION, INC.

52-6080760 Page 12

Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
				
		14	107,413.	
	·			
				
		1		
		18	34,599.	
<u> </u>				
				
				
 		+		
 - 				
		- 		
			142 012	0
	<u>_</u>			
o the Assem	plichment of I	Evamet Di	IPDOCOG	
o the Accom	pusument or t	=xempt Pu	rposes	
			importantly to the accomp	lishment of
by providing funds	for such purposes).			
				·
				
				
				
				
				
	me is reported in c	to the Accomplishment of I	me is reported in column (e) of Part XVI-A contributed	18 34,599. 18 34,599. 0. 142,012. 13

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN Form 990-RF (2016) FOUNDATION, INC. 52-6080760 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) Х (3) Rental of facilities, equipment, or other assets 1b(3) X X (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees X 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. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (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 Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 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 aration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr)? Sign Here X Yes DIRECTOR Signature of officer or trustee Date Title

SPARKS

HAMMOND

SUITE 100

Phone no. (301)662-2400 Form **990-PF** (2016)

P00168979

Check | If

self- employed

PTIN

Firm's EIN ► 52-0547375

Paid

Preparer

Use Only

Print/Type preparer's name

PAUL M. STECKEL

Firm's name ► MCLEAN, KOEHLÆR,

Firm's address ▶ 70 THOMAS JOHNSON DRIVE,

FREDERICK, MD 21702-4317

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Name of the organization

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN

FOUNDATION, INC.

52-6080760

Organizat	i on type (check on	ιθ)·
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	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
•	_	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General F	Rule	
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions
Special R	ules	
s	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1. Complete Parts I and II.
y	ear, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for truelty to children or animals. Complete Parts I, II, and III.
t 1 7	vear, contributions s checked, enter h ourpose. Don't con	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.
but it mus	st answer "No" on	part isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)
LHA For	Paperwork Redu	action Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN FOUNDATION, INC.

FOUND	ATION, INC.		<u>2-6080760</u>
Part I	Contributors (See instructions). Use duplicate copies of Part I if additional additional contributors.	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE HENRY AND PAGE LAUGHLIN FAMILY LIMITED PARTNERSHIP 307 UPPER COLLEGE TERRACE FREDERICK, MD 21701	\$15,092.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN

FOUNDATION, INC.

Employer identification number

52-6080760 Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed Part II (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I \$

Name of organization

Employer identification number

DR. H	ENRY	P.	&	Μ.	PAGE	DURKEE	LAUGHLIN
-------	------	----	---	----	------	--------	----------

art III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition.	columns (a) through (e) and the follows, charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 to wing line entry. For organizations rises for the year (Enter this info once)
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
No. om rt l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_		(e) Transfer of gif	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

52-6080760

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN FOUNDATION, INC.

Part XV | Supplementary Information

3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual,	 		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
ANDREW ORR, MD C/O THOMAS JEFFERSON		INDIVIDUAL	EDUCATIONAL	
UNIVERSITY				
130 SOUTH 9TH STREET				
PHILADELPHIA, PA 19107		 		600
ANNE TAYLOR, MD C/O UNIVERSITY OF		INDIVIDUAL	EDUCATIONAL	
PENNSYLVANIA 3451 WALNUT ST.				
PHILADELPHIA PA 19104				800
111111111111111111111111111111111111111				000,
AUSTIN BUTTERFIELD C/O UNIVERSITY OF		INDIVIDUAL	EDUCATIONAL	
COLORADO				
P.O. BOX 17126				
DENVER, CO 80217				600.
			L	
BRANDON RILEY, MD C/O UTMB HEALTH		INDIVIDUAL	EDUCATIONAL	
301 UNIVERSITY BLVD GALVESTON TX 77555				600.
GALVESTON, IX //333		 -		800.
C. JACQUETTA BLACKER, B.M.B. CH. C/O		INDIVIDUAL	EDUCATIONAL	
MAYO CLINIC				
200 FIRST STREET SW				
ROCHESTER MN 55905				600.
CECILIA LIVESEY, MD C/O UNIVERSITY OF		INDIVIDUAL	EDUCATIONAL	
PENNSYLVANIA				
3451 WALNUT ST. PHILADELPHIA PA 19104				800.
PHILADELPHIA, PA 19104				800,
DANA BILUPS BRADLEY, MD C/O BAYLOR		INDIVIDUAL	EDUCATIONAL	
6655 TRAVIS STREET, SUITE 700				
HOUSTON, TX 77030				1,200.
DANIEL MORENO DE LUCA, MD, M.SC. C/O		INDIAIDAY	EDUCATIONAL	
YALE 25 PARK ST				
NEW HAVEN, CA 06519				400.
NEW INVIN., CA 00319				400,
DAVID WINTERS, MD C/O THOMAS		INDIVIDUAL	EDUCATIONAL	
JEFFERSON UNIVERSITY				
130 SOUTH 9TH STREET				
PHILADELPHIA, PA 19107_				600,
		,		
DEANNA CONSTANCE CHAUKOS, MD C/O		INDIVIDUAL	EDUCATIONAL	
MCLEAN HOSPITAL				
115 MILL STREET				1 000
BELMONT, MA 02478 Total from continuation sheets	<u> </u>			1,200, 130,000,
TOTAL HALL AALIMISTRATAL SHOOTS	····			<u> </u>

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN

FOUNDATION, INC. 52-6080760

Part XV Supplementary Information

Part XV Supplementary Information	<u> </u>			
3 Grants and Contributions Paid During the Y	,			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
EDWARD THOMAS LEWIS, III, M.D. C/O MEDICAL UNIVERSITY OF SOUTH CAROLINA 902 SUMTER STREET		INDIVIDUAL	EDUCATIONAL	
COLUMBIA, SC 29208		 		1,200,
FOLABO Y. DARE, D.O. C/O MAYO CLINIC 200 FIRST STREET SW ROCHESTER, MN 55905		INDIVIDUAL	EDUCATIONAL	600,
FRIENDS FOR NEIGHBORHOOD PROGRESS,		INSTITUTION		
INC. 100 SOUTH MARKET STREET		į		
FREDERICK, MD_21701			1	5,000,
manufaction, in 11701				3,000,
FREDERICK COMMUNITY COLLEGE 7932 OPOSSUMTOWN PIKE	NONE	INSTITUTION	DR HENRY P AND M PAGE LAUGHLIN AWARDS	
FREDERICK, MD 21702		 		5,000.
FREDERICK COUNTY MEDICAL SOCIETY 127 FAIRVIEW AVE FREDERICK, MD 21701	NONE	INSTITUTION	EDUCATIONAL	4,000,
FREDERICK MEMORIAL HOSPITAL 400 WEST SEVENTH STREET	NONE	INSTITUTION	LAUGHLIN AWARDS FUND	10.000
FREDERICK, MD 21701		 		10,000.
FREDERICK RESCUE MISSION 419 WEST SOUTH STREET	NONE	INSTITUTION	OR HENRY P AND M PAGE LAUGHLIN AWARDS	
FREDERICK, MD 21701		 	 	10,400.
HEARTLY HOUSE, INC. P.O. BOX 857	NONE	INSTITUTION	LAUGHLIN AWARDS FUND	
FREDERICK MD 21705		 	 	7,500.
HILJA RUEGG, MD C/O UNIVERSITY OF CINCINNATI		INDIVIDUAL	EDUCATIONAL	
2600 CLIFTON AVE CINCINNATI OH 45220				1,200.
VALUE AND AND AND AND AND AND AND AND AND AND				1,200,
HONG CHAI, MD C/O UTMB HEALTH		INDIVIDUAL	EDUCATIONAL	
301 UNIVERSITY BLVD GALVESTON, TX 77555				600,
Total from continuation sheets				

FOUNDATION, INC.

Part XV Supplementary Information

52-6080760

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Name and address (home or husiness)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
HOOD COLLEGE	NONE	INSTITUTION	LAUGHLIN FELLOWS	
401 ROSEMONT AVENUE	HONE	INSTITUTION	SCHOLARSHIP FUND	
FREDERICK MD 21701				10,000
HOSPICE OF FREDERICK COUNTY	NONE	INSTITUTION	LAUGHLIN AWARDS FUND	
516 TRAIL AVENUE - P.O. BOX 1799		1	}	
FREDERICK, MD 21702		 		7,500
KATRINA BURNS, MD C/O UNIVERISTY OF		INDIVIDUAL	EDUCATIONAL	
ILLINOIS			1	
901 WEST ILLINOIS STREET				
URBANA IL 61801		 	 	1,200
LEE ANN SCHUHMANN, MD C/O UNIVERSITY		INDIVIDUAL	EDUCATIONAL	
OF LOUISVILLE			1	
901 WEST ILLINOIS STREET				
URBANA, IL 61801		 		1,200
LISETTE RODRIGUEZ-CABEZAS, MD C/O		INDIVIDUAL	EDUCATIONAL	
NORTHWESTERN UNIVERSITY				
633 CLARK STREET				
EVANSTON, IL 60208	 	 	 	1,200
LUKE LI, MD C/O WRIGHT STATE		INDIVIDUAL	EDUCATIONAL	
UNIVERSITY		11.5211250.23		
3640 COLONEL GLENN HIGHWAY				
DAYTON, OH 45435		 	 	1,200.
MEDICAL AND CHIRURGICAL FACULTY OF MD	NONE	INSTITUTION	LAUGHLIN AWARDS TRUST	
1211 CATHEDRAL STREET		}	FUND	
BALTIMORE, MD 21201	 	 		3,000.
MENTAL HEALTH ASSOCIATION OF	NONE	INSTITUTION	LAUGHLIN AWARDS FUND	
FREDERICK COUNTY				
263 WEST PATRICK STREET				
FREDERICK, MD 21701		 		5,000,
MICHELLE JOY, MD C/O UNIVERSITY OF		INDIVIDUAL	EDUCATIONAL	
PENNSYLVANIA				
3535 MARKET ST., SUITE 2009				
PHILADELPHIA, PA 19104	-	 		800.
		1		
MONTGOMERY COUNTY MEDICAL SOCIETY	NONE	INSTITUTION	LAUGHLIN AWARDS FUND	
15855 CRABBS BRANCH WAY	1			
ROCKVILLE, MD 20855				2,500.
Total from continuation sheets				

FOUNDATION, INC.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Y	ear (Continuation)			"
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
MOUNT ST. MARY'S UNIVERSITY	NONE	INSTITUTION	EDUCATIONAL	
16300 OLD EMMITSBURG ROAD				
EMMITSBURG, MD 21727				4,000.
NEETA SHENAI, MD C/O UNIVERSITY OF		INDIVIDUAL	EDUCATIONAL	
PITTSBURGH				
3811 O'HARA STREET PITTSBURGH, PA 15213				600.
FIIIBBONGH, FA 13213		1		
RAJIV RADHAKRISHNAN, MBBS, MD C/O		INDIVIDUAL	EDUCATIONAL	
YALE				
25 PARK STREET NEW HAVEN, CA 06519				400.
RELIGIOUS COALITION FOR EMERGENCY	NONE	INSTITUTION	DR HENRY P AND M PAGE	
HUMAN NEEDS 27 DEGRANGE STREET			LAUGHLIN AWARDS	
FREDERICK, MD 21701				5,000.
ROBERT C. EATON, MD, C/O TEMPLY		INDIVIDUAL	EDUCATIONAL	
UNIVERSITY 1801 N. BROAD ST.				
PHILADELPHIA, PA 19122				1,200.
ROBIN VALPEY, MD C/O UNIVERSITY OF PITTSBURGH		INDIVIDUAL	EDUCATIONAL	
3811 O'HARA STREET				
PITTSBURGH, PA 15213		<u> </u>		600.
SEAN LENGUE C/O UNIVERSITY OF		INDIVIDUAL	EDUCATIONAL	
COLORADO			ED CHITCHIE	
3535 MARKET ST., SUITE 2009				
PHILADELPHIA, PA 19104				600.
SHIPPENSBURG UNIVERSITY	NONE	INSTITUTION	SPECIAL AWARDS TRUST	
1871 OLD MAIN DR			FUND	
SHIPPENSBURG, PA 17257	 			10,000,
TANUJA GANDHI, MD C/O ALBERT EINSTEIN		INDIVIDUAL	EDUCATIONAL	
1300 MORRIS PARK AVE		1		1,200,
BRONX, NY 19107				1,200,
		1		
TEMPLE UNIVERSITY MEDICAL SCHOOL	NONE	INSTITUTION	LAUGHLIN DISTINGUISHED	
3223 N. BROAD ST, SUITE 415 (603-00) PHILADELPHIA, PA 19140			TEACHING AT CLINICAL AFFILIAT	5,000.
Total from continuation sheets	····	•		

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN FOUNDATION, INC.

Part XV Supplementary Information

52-6080760

Part XV Supplementary Information		-		
3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
THE ROYAL COLLEGE OF PSYCHIATRISTS 21 PRESCOT STREET LONDON E18BB	NONE	INSTITUTION	SPECIAL AWARDS TRUST FUND	2,400.
UNITED WAY OF FREDERICK COUNTY P.O. BOX 307, 22 SOUTH MARKET ST, STE 5 FREDERICK, MD 21705	NONE	INSTITUTION	SPECIAL AWARDS TRUST FUND	5,000.
UNIV OF LOUISVILLE MEDICAL SCHOOL 501 EAST BROADWAY, SUITE 340	NONE	INSTITUTION		
LOUISVILLE, KY 40202			- 	2,500,
URSINUS COLLEGE P.O. BOX 1000	NONE	INSTITUTION	LAUGHLIN AWARDS FUND	
COLLEGEVILLE, PA 19426				5,000,
1				
Total from continuation sheets				

C) USTED INCOME 3,254. 4,159. 7,413. NT 2 D) ITABLE POSES 0. 0.
4,159. 7,413. NT 2 D) ITABLE POSES 0.
NT 2 D) ITABLE POSES 0.
D) ITABLE POSES 0.
TABLE POSES
0.
NT 3
D) ITABLE POSES
0.
0.
NT 4
O) ITABLE POSES
0.
0.

FORM 990-PF OTHER INCREASES IN NET ASSETS OR	FUND BALANCES	STATEMENT	5
DESCRIPTION		AMOUNT	
UNREALIZED GAIN/(LOSS) ON INVESTMENTS		161,2	31.
TOTAL TO FORM 990-PF, PART III, LINE 3		161,2	31.
FORM 990-PF CORPORATE STOCK		STATEMENT	6
DESCRIPTION	BOOK VALUE	FAIR MARKE	ľ
MORGAN STANLEY - EQUITIES	1,935,118.	1,935,1	18.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,935,118.	1,935,1	18.
FORM 990-PF CORPORATE BONDS		STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKE	r
MORGAN STANLEY - FIXED INCOME	1,316,929.	1,316,9	29.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,316,929.	1,316,9	29.

	ST OF OFFICERS, D D FOUNDATION MANA	STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JOHN R LAUGHLIN 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	EXECUTIVE DIRE	CCTOR 0.	0.	0.
LORI BURTON 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	SECRETARY/TREA	ASURER 0.	0.	0.
CONSTANCE KUHN 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	DIRECTOR 1.00	0.	0.	0.
ROBERT LAUGHLIN 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	DIRECTOR 1.00	0.	0.	0.
BARBARA GALANT 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	DIRECTOR 1.00	0.	0.	0.
DEBORAH MOSS 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.