



For calendar year 2017 or tax year beginning

Return of Private Foundation

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

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

, and ending

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Na	me of	foundation	. -					A Employer identification	number
100		HENRY P. & M. PA	GE DUR	KEE LAUGI	ILIN				
_		NDATION, INC.						52-6080760	
		nd street (or P O box number if mail is not de		•			Room/suite	B Telephone number	
		HIGHLAND STREET,						301-695-57	36
		own, state or province, country, and ZII	P or foreign p	ostal code				C If exemption application is p	ending, check here
		DERICK, MD 21701							
G (Check	all that apply: Initial return				rmer public o	harity	D 1. Foreign organizations	s, check here
		Final return		Amended				Foreign organizations me check here and attach co	eting the 85% test.
	N I	Address ch		Name cha	<u> </u>			check here and attach co	mputation
H (_			empt private found		•	σŲ	E If private foundation sta	
		ction 4947(a)(1) nonexempt charitable		Other taxable privat				under section 507(b)(1)	
		•	J Account	-	Cash	X Accr	uai	F If the foundation is in a (
	•\$	Part II, col. (c), line 16) 3 , 510 , 214 .	(Part L colun	her (specify)	ach haci	e)		under section 507(b)(1)	(B), check here
		Analysis of Revenue and Expenses						(a) Admeted and	(d) Disbursements
-	<u> </u>	(The total of amounts in columns (b), (c), an necessarily equal the amounts in column (a	d (d) may not	(a) Revenue a expenses per t	na ooks	(b) Net in	vestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., recei						-	(casii basis ciliy)
)	2	Check Mrs, grits, grants, etc., recei							
_	3	Interest on savings and temporary cash investments							
1	4	Dividends and interest from securities	.	121,	786.	12	1,786.	121.786.	STATEMENT 1
1	5a	Gross rents	•		, 00.		<u> </u>	121//001	<u> </u>
	_	Net rental income or (foss)							
	69 Net (1) form colo of to to to to			104,	126.				
	b	Gross sales price for all assets on line 6a 1,426							-
Revenue	7	Capital gain net income (from Part IV, line 2)		EIVED	7	10	4,126.		
č	8	Net short-term capital gain	NEC					N/A	
	9	Income modifications]	6	3			,	
	10a	Gross sales less returns and allowances	MAY :	7 2018					
	b	Less Cost of goods sold		ő	2				
200	C	Gross profit or (loss)	OGD	EN, UT					
7.018	11	Other income						<u> </u>	
	12	Total. Add lines 1 through 11		225,		22	<u>5,912.</u>	121,786.	
3 2	13	Compensation of officers, directors, trustees	s, etc		0.		0.	0.	0.
	14	Other employee salaries and wages							
໘ູ	15	Pension plans, employee benefits							
ال nses	1	Legal fees			205		0 005		
ۋ	. b		MT 2	2,	905.	-	2,905.	0.	0.
SCANNED Operating and Administrative Expe	C	Other professional fees		<u> </u>					
Zį	17	Interest Taxes ST	MT 3		180.		180.	0.	0.
\$\$	18 19		мт э	-	100.		T90.	· · · · · · · · · · · · · · · · · · ·	
က်ခြုံ	20	Depreciation and depletion Occupancy							-
₽	21	Travel, conferences, and meetings							-
þ	22	Printing and publications							-
<u>a</u>	23	• •	мт 4	33	264.	3	3,209.	0.	0.
ij	24	Total operating and administrative		33,			<u> </u>		<u> </u>
oer:	-`	expenses. Add lines 13 through 23		36.	349.	3	6,294.	0.	0.
ō	25	Contributions, gifts, grants paid		153,	300.		<u> </u>		153,300.
	26	Total expenses and disbursements.							
		Add lines 24 and 25		189,	<u>649.</u>	3	6,294.	0.	153,300.
	27	Subtract line 26 from line 12:							
	a	Excess of revenue over expenses and disbu	rsements	36,	263.				
	i	Net investment income (if negative, ent				18	9,618.		
		Adjusted net income (if negative, enter					· ·	121,786.	
7235	01 01	-03-18 LHA For Paperwork Reduct	tion Act Notic	e, see instructions					Form 990-PF (2017)

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN Form 990-PF (2017) 52-6080760 FOUNDATION. INC. Page 2 Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year Part II (a) Book Value (b) Book Value (c) Fair Market Value 7,148 4,389 4,389. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 2,453 10a Investments - U.S. and state government obligations 1,935,118 2,076,394. 2,076,394. b Investments - corporate stock STMT 1,429,431. c Investments - corporate bonds STMT 1,316,929. 1,429,431. 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis I Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 3,510,214. 3,261,648 3,510,214. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 0 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here $\triangleright |X|$ and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 3,261,648. 3,510,214 30 Total net assets or fund balances 3,261,648 3,510,214 3,261,648 31 Total liabilities and net assets/fund balances 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	3,261,648.
2	Enter amount from Part I, line 27a		2	36,263.
3	Other increases not included in line 2 (itemize)	' 5	3	212,303.
4	Add lines 1, 2, and 3		4	3,510,214.
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	3,510,214.

153,300.

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

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.

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN

FORM 990-PF (2017) FOUNDATION, INC.		<u>2-6080</u>		Page 4	
Part VI Excise Tax Based on Investment Income (Section 4		16 - see	instruct	uons)	
1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) \(\bigs\) a	and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter i	if necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check her	e ▶ 🔛 and enter 1%	1	3	<u>,792.</u>	
of Part I, line 27b	1	1			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, ent	ter 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	nly; others, enter -0-)	2		0.	
3 Add lines 1 and 2		3	3	,792.	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of	nly; others, enter -0-)	4		0.	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	· · · · · · · · · · · · · · · · · · ·	5	3	,792.	
6 Credits/Payments:	-	<u> </u>		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 2,453.				
b Exempt foreign organizations - tax withheld at source	6b 0.				
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld	6d 0.	_	^	453	
7 Total credits and payments. Add lines 6a through 6d	<u> </u>	7	2	<u>,453.</u>	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	s attached	8		0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ ↓	9	1	<u>,339.</u>	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	ıid	10			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded ▶	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it participate or intervene in		Y	es No	
any political campaign?			1a	<u> </u>	
b Did it spend more than \$100 during the year (either directly or indirectly) for political p	urposes? See the instructions for the definition	on	1b	X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co	pies of any materials published or				
distributed by the foundation in connection with the activities.	•		\	l l	
c Did the foundation file Form 1120-POL for this year?			1c	X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed durin	in the year.		"		
(1) On the foundation. > \$ 0 . (2) On foundation man	•				
e Enter the reimbursement (if any) paid by the foundation during the year for political ex					
managers. > \$ 0.	periodure tax imposed on foundation		1		
	the IDCO			x	
2 Has the foundation engaged in any activities that have not previously been reported to	the INO!		2	— ^	
If "Yes," attach a detailed description of the activities.			1 1	1	
3 Has the foundation made any changes, not previously reported to the IRS, in its govern			1.1		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	<u>X</u>	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	e year?		4a	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	year?		5	X	
If "Yes," attach the statement required by General Instruction T.			1 1	- {	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf	ied either:		1 1	1	
 By language in the governing instrument, or 					
 By state legislation that effectively amends the governing instrument so that no man 	datory directions that conflict with the state k	lW	1 1		
remain in the governing instrument?	•		6	x	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	complete Part II. col. (c), and Part XV			X	
The state of the s	(0), 2.10 a.c., 1		 	-	
8a Enter the states to which the foundation reports or with which it is registered. See insti	ructions				
MD				1	
	the Atternay Caparel (as decreate)				
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)) a.	v	
of each state as required by General Instruction G? If "No," attach explanation			8b	X	ገ
9 Is the foundation claiming status as a private operating foundation within the meaning		iar	1		
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,			9	X	/
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a s	schedule listing their names and addresses		10	<u>X</u> _	
		F	orm 990-	PF (2017)	

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 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 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A The books are in care of > JOHN R. LAUGHLIN Telephone no. > 301-371-4975Located at ▶ 4910 RIDGE CREST CT, FREDERICK, MD ZIP+4 ▶21702 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 No At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank. Yes 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 No Yes 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): 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 a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No 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 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 2017? X 1c Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(i)(3) or 4942(i)(5)); a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes X No 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 statement - see instructions.) N/A 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2017 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 2017.) N/A 3b 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 2017?

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DR. HENRY P. & M. PAGE DURKEE LAUGHLIN Form 990-PF*(2017) FOUNDATION, INC. 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 No 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? (3) Provide a grant to an individual for travel, study, or other similar purposes? X Yes L (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 X 5b 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 expenditure responsibility for the grant? N/A 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 a personal benefit contract? Yes X No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 6b If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No 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 List all officers, directors, trustees, and foundation managers and their compensation. (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred (e) Expense account, other (If not paid, (a) Name and address allowances enter -0-) compensation SEE STATEMENT 8 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other allowances (a) Name and address of each employee paid more than \$50,000 (c) Compensation NONE

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

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN Form 990-PF (2017) FOUNDATION, INC. 52-6080760 Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 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 (c) Compensation (b) Type of service NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 ANNUAL AWARDS TO GRADUATING PSYCHIATRIC RESIDENCY STUDENTS AT APPROXIMATELY 20 MEDICAL SCHOOLS. 22,800. 2 ANNUAL GRANTS TO COLLEGES, FOUNDATIONS, AND OTHER NON-PROFIT ORGANIZATIONS IN DIRECT SUPPORT OF THEIR CHARITABLE ACTIVITIES. 130,500. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.

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Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations	s, 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	3,235,261.
b	Average of monthly cash balances	1b	3,235,261. 7,493.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	3,242,754.
е	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	3,242,754.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,641.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,194,113.
6	Minimum investment return. Enter 5% of line 5	6	159,706.
P	Part 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 certair	1
1	Minimum investment return from Part X, line 6	1	159,706.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	_3,792.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	155,914.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	155,914.
6	Deduction from distributable amount (see instructions)	_6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	155,914.
_	Part XII Qualifying Distributions (see instructions)	г т	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:] .	152 200
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	153,300.
	Program-related investments - total from Part IX-B	1b	0.
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:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	153,300.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	153,300.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		0
•	Income. Enter 1% of Part I, line 27b	5 6	0. 153,300.
6	Adjusted qualifying distributions. 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 4940(e) reduction of tax in those years.	quaiiles	IOI THE SECTION

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				155,914.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			153,154.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.1	ł		
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$153,300.				
a Applied to 2016, but not more than line 2a			153,154.	
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 2017 distributable amount				146.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017 (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:		į		
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 2016. Subtract line			 -	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				155,768.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				Į.
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	0.		L	
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014		j		
c Excess from 2015				
d Excess from 2016				
e Excess from 2017			L	5 000 DE (0043)

	RY P. & M. ION, INC.	PAGE DURKEE	LAUGHLIN	52-608	8 0760 Page,10
Part XIV Private Operating Fo	oundations (see in:	structions and Part VII	-A. guestion 9)	N/A	0/60 Page III
1 a If the foundation has received a ruling or			74 94000000000	N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the found		_	n section	4942(j)(3) or 494	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	19 100110011011011011011	Prior 3 years		20101
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for			- (3/	1 /	
each year listed					
· ·		 		-/-/-	
b 85% of line 2a				 	
c Qualifying distributions from Part XII,			ļ		
line 4 for each year listed			<u> </u>		
d Amounts included in line 2c not				X = 1	
used directly for active conduct of			/	/	
exempt activities		ļ			
e Qualifying distributions made directly					
for active conduct of exempt activities.				1	
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			Ĺ		
(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	
(1) Total support other than gross					
investment income (interest,	4	<i>Y</i>)		
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		 -			
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets
at any time during the			ii tiio ioanaati	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.0 000010
1 Information Regarding Foundation		<u> </u>			
a List any managers of the foundation who	_	than 2% of the total cont	ributions received by t	he foundation before the close	e of any tax
year (but only if they have contributed m			induction to control by t	no roundation policie the close	or any tax
ONE					
b List any managers of the foundation who	o own 10% or more of th	ne stock of a corporation	(or an equally large po	rtion of the ownership of a pa	rtnership or
other entity) of which the foundation has			(
IONE_					
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc., Pi	ograms:		 -
Check here ► 🗶 If the foundation or	nly makes contributions	to preselected charitable	organizations and doe	s not accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone numb	per or email address of the	he person to whom appli	cations should be addr	essed:	
b The form in which applications should be	e submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	ough as by assessed	al arong showth to the	lundo of material	or other feetare	

3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of orant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ABRAHAM THENGAMPALIL, M.D. C/O	NONE	INDIVIDUAL	EDUCATIONAL	
COLUMBIA UNIVERSITY				
722 W. 168TH STREET NEW HAVEN NY 10029				1.200
ALEXANDRA HEDBERG, MD C/O	NONE	INDIVIDUAL	EDUCATIONAL	
NORTHWESTERN UNIVERSITY				
533 CLARK STREET				4 004
EVANSTON, IL 60208	 			1,200
AMY L. STARK, M.D. C/O MAYO CLINIC	NONE	INDIVIDUAL	EDUCATIONAL	
200 FIRST STREET SW		}		
ROCHESTER, MN 55905	 	 	 	600
ANDREW MIGLIACCIO, MD C/O UNIVERSITY	NONE	INDIVIDUAL	EDUCATIONAL	
OF PENNSYLVANIA 3451 WALNUT ST.				
PHILADELPHIA, PA 19104		<u> </u>		600
BANNER SCHOOL 1730 N. MARKET STREET	NONE	INSTITUTION	TECHNOLOGY GRANT	
FREDERICK MD 21701				5_000
Total SEE CO	NTINUATION SHE	ET(S)	▶ 3a	153,300
b Approved for future payment				
NONE				
	 	 		
	 	 	 	·
		}		H
Total		1	▶ 3b	
				orm 990-PF (20

FOUNDATION, INC.

52-6080760 Page 12

Part XVI-A Analysis of Income-Proc	lucing Activi	ties
Enter gross amounts unless otherwise indicated.	Unrelate	ed business income
Enter gross amounts amous saler mes maiotics.		

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue: -	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-	code		2000		
a			_		
b			├		
C					
d			<u> </u>		
e					
f			l		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			ł		
4 Dividends and interest from securities			14	121,786.	
5 Net rental income or (loss) from real estate:			 	121/1001	
a Debt-financed property			+-		
	ļ————		+-		
b Not debt-financed property	<u> </u>		+		
6 Net rental income or (loss) from personal					
property	<u> </u>				
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other					
than inventory			18	104,126.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b			1 -		
c					
			-		
d			<u> </u>		
de		0		225 912	0.
d e 12 Subtotal. Add columns (b), (d), and (e)		0.		225,912.	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.			0. 225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	0. 225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	o the Acc			13	0. 225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to		omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incon	ne is reported	omplishment of E	xemp	13 _ ot Purposes	225,912.

DR. HENRY P. & M. PAGE DURKEE LAUGHLIN Form 990-PF (2017) 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) (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: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: X (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets 1b(3) X (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) 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. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (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) (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 May the IRS discuss this of preparer (other than taxpayer) is based on all information of which preparer has any knowledge **EXECUTIVE** and belief, it is true Sign return with the preparer Here DIRECTOR X Yes Signature of officer or trustee Title Date Print/Type preparer's name Preparer's sygnature Check [| If self- employed PAUL M. STECKEL

JOHNSON DRIVE SUITE,

MD 21702

Form **990-PF** (2017)

P00168979

<u>301-662-2400</u>

Firm's EIN ► 52-0547375

Phone no.

Paid

Preparer

Use Only

CPA

Firm's name ► MCLEAN, KOEHLER,

FREDERICK

Firm's address ► 70 THOMAS

Part XV Supplementary Information			······································	
3 Grants and Contributions Paid During the Y	,			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
THE HADDEN AND GIVE VINITURE OF A PARTICULAR O				
EN HUNTER, MD C/O UNIVERSITY OF ENNSYLVANIA	NONE	INDIVIDUAL	EDUCATIONAL	
451 WALNUT ST.		}		
PHILADELPHIA, PA 19104			<u> </u>	600.
		Ì		
HRISTOPHER BLAZES, MD. C/O ALBERT		INDIVIDUAL	EDUCATIONAL	
INSTEIN				
501 OLD YORK ROAD HILADELPHIA, PA 19104		1		1,200
MIDADEDINIA, FA 13104	 	 	 	1,200,
CODY MCMAHAN, M.D C/O UTMB HEALTH	NONE	INDIVIDUAL	EDUCATIONAL	
01 UNIVERSITY BLVD ALVESTON, TX 77555				600
ALTESTON, IA 11333	1	†	- 	800,
RISTIN MCDERMOTT, MD C/O UNIVERSITY	NONE	INDIVIDUAL	EDUCATIONAL	
F PITTSBURGH]		
550 TERRACE STREET				
ITTSBURGH, PA 15213	 	 		1,200
WILN LIGOU MD 0/0 TEREPRON NOTCO.	NONE	TAID THE TAIL T	EDUCAMITONA	
MILY LISCO, MD C/O JEFFERSON MEDICAL OLLEGE	NONE	INDIVIDUAL	EDUCATIONAL	1
020 SANSOM STREET, SUITE 1652-G				1
HILADELPHIA PA 19104		1		300
WA D. BIEBER, MD C/O MAYO CLINIC	NONE	INDIVIDUAL	EDUCATIONAL	
00 FIRST STREET SW				600
OCHESTER, MN 55905	 	+		800
ABIANO NERY, MD, PHD, C/O UNIVERSITY	NONE	INDIVIDUAL	EDUCATIONAL	1
F CINCINNATI				
600 CLIFTON AVE				
INCINNATI OH 45220	 	 		1,200
ARGU CONT. AR G (O MERCEL CONT.				
ARSH SONI, MD C/O MEDICAL UNIVERSITY F SOUTH CAROLINA	NONE	INDIVIDUAL	EDUCATIONAL	
F SOUTH CAROLINA 7 PRESIDENT STREET, PO BOX 250861	1			
HARLESTON SC 20853				600
				1
ESSICA REIS, MD C/O UNIVERSITY OF	NONE	INDIVIDUAL	EDUCATIONAL	
OUISVILLE				
01 WEST ILLINOIS STREET				ł
RBANA, IL 61801	 	+	 	1,200
OCUITA COTENTANO MO CAO INTERNACEME	MONE	TMOSTSTON	EDITORATONA	1
OSHUA GRIFFITHS, MD C/O UNIVERSITY F COLORADO	NONE	INSTITUTION	EDUCATIONAL	
3001 E 17TH PLACE				
URORA, CO 80045	1			1,200
Total from continuation sheets				144,700

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
JULIE KAY, MD C/O JEFFERSON MEDICAL	NONE	INDIVIDUAL	EDUCATIONAL	
COLLEGE]
.020 SANSOM STREET, SUITE 1652-G		ļ		
PHILADELPHIA, PA 19104		 	 	300
MAC WILSON ABERNATHY, MD C/O MEDICAL	NONE	INDIVIDUAL	EDUCATIONAL	
JNIVERSITY OF SOUTH CAROLINA		INDIVIDUAL	BBOCHTIONIB	
171 ASHLEY AVENUE				
CHARLESTON, SC 29425	 	 	 	600
MICARLA PRA OMNON MO GAO MOLDAN	hrown			
MICAELA BEA OWUSU, MD C/O MCLEAN HOSPITAL	NONE	INDIVIDUAL	EDUCATIONAL	j
13TH & BERN STREETS]
READING, PA 19612	<u> </u>			1,200
	1			
NITA BHATT, MD, MPH C/O WRIGHT STATE INIVERSITY	NONE	INDIVIDUAL	EDUCATIONAL	
6640 COLONEL GLENN HIGHWAY	1	1		
AYTON, OH 45435				1,200
ARAH ROSENBAUM, MD C/O UNIVERSITY OF	NONE	INDIVIDUAL	EDUCATIONAL	
PENNSYLVANIA		1		
3535 MARKET ST., SUITE 2009 PHILADELPHIA, PA 19104		1	1	600
		 		
COTT MARIOUW, MD C/O UNIVERSITY OF	NONE	INDIVIDUAL	EDUCATIONAL	
LLINOIS				
901 WEST ILLINOIS STREET	1			1 200
RBANA, IL 61801	 	 	 	1,200
SHANE TUSSEY, MD C/O JEFFERSON	NONE	INDIVIDUAL	EDUCATIONAL	1
MEDICAL COLLEGE				1
1020 SANSOM STREET, SUITE 1652-G		1		
HILADELPHIA, PA 19014	 	 	 	300
SEETHA CHANDRASEKHARA, MD C/O TEMPLE	NONE	INSTITUTION	EDUCATIONAL	
NIVERSITY	}			
3401 NORTH BROAD ST				•
PHILADELPHIA, PA 19104		 		1,200
SHIRALI PATEL MD C/O BAYLOR COLLEGE	NONE	INSTITUTION	EDUCATIONAL	
655 TRAVIS ST., SUITE 700		1		
OUSTON, TX 77030	 	 	 	1,200
TEPHANIE CROSS, MD, PHD, C/O	NONE	TMDTUTDUAL	EDUCATIONA!	
NIVERSITY OF PENNSYLVANIA	HOME	INDIVIDUAL	EDUCATIONAL	
535 MARKET ST., SUITE 2009	1			
PHILADELPHIA, PA 19104		1		600
Total from continuation sheets				

Part XV Supplementary Information	1			
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contibution	
TODD MARTIN, MD C/O JEFFERSON MEDICAL	NONE	INDIVIDUAL	EDUCATIONAL	
COLLEGE	NONE	INDIVIDUAL	EDUCATIONAL	
1020 SANSOM STREET, SUITE 1652-G		1		
PHILADELPHIA PA 19014	·	ļ		300.
		1		
UNITED WAY OF FREDERICK COUNTY	NONE	INSTITUTION	SPECIAL AWARDS TRUST	
P.O. BOX 307, 22 SOUTH MARKET ST, STE			FUND	
5 FREDERICK MD 21705	<u> </u>	<u> </u>		78,750.
YOUNGSUN CHO, MD C/O YALE UNIVERSITY	NONE	INDIVIDUAL	EDUCATIONAL	
25 PARK ST	HOME	INDIVIDORE	EDUCATIONAL	
NEW HAVEN CA 06519		<u> </u>		1,200.
WILLIE OF AN APPRICATO TIME THAT MILE	NOVE		EDVICE ET ONE	
YU LILY QUAN, MBBS C/O UTMB HEALTH 301 UNIVERSITY BLVD	NONE	INDIVIDUAL	EDUCATIONAL	
GALVESTON, TX 77555				600.
		1		
VARIOUS OTHER CHARITITES	NONE	INSTITUTION		
550 HIGHLAND STREET, SUITE 303 FREDERICK MD 21701				46,750,
MADERICK, NO 21/VI		1		
		1		
		4		
	 	 		
		1		
	 	 	+	
		1		
	 	 		
	 	 	_	
		1	1	
		1	1	
Total from continuation sheets				

SOURCE	FORM 990-PF DI	VIDENDS	AND INTER	EST FROM SECUR	ITIES ST	ATEMENT 1	
To part 1, line 4 125,230. 3,824. 3,245.			GAINS	REVENUE	NET INVEST-	(C) ADJUSTED NET INCOME	
FORM 990-PF ACCOUNTING FEES (A) EXPENSES NET INVEST- ADJUSTED CHARITABLE ACCOUNTING FEES ACCOUNTING FORM 990-PF, PG 1, LN 16B ACCOUNTING FEES ACCOUNTING ACCOUNTING FEES ACCOUNTING ACCOUNTING FEES ACCOUNTING FEES ACCOUNTING FEES ACCOUNTING ACCOUNTING FEES ACCOUNTING AC			·			117,962. 3,824. 121,786.	
(A)	TO PART I, LINE 4 1	.25,230.	3,44	121,786.	121,786.		
EXPENSES NET INVEST- ADJUSTED CHARITABI	FORM 990-PF		ACCOUNTI	NG FEES	ST	'ATEMENT 2	
TO FORM 990-PF, PG 1, LN 16B 2,905. 2,905. 0. (C) (D) FORM 990-PF TAXES STATEMENT (A) (B) (C) (D) (D) (CHARITABILITY DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURPOSES FOREIGN TAXES PAID 180. 180. 0. (C) (D) TO FORM 990-PF, PG 1, LN 18 180. 180. 0. (C) (D) FORM 990-PF OTHER EXPENSES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABILITY DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURPOSES OFFICE SUPPLIES 55. 0. 0. 0. (D) MORGAN STANLEY FEES 33,209. 33,209. 0.	DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES	
TAXES	ACCOUNTING FEES		2,905.	2,905.	0.	0.	
(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE PER BOOKS MENT INCOME NET INCOME PURPOSES FOREIGN TAXES PAID 180. 180. 0. TO FORM 990-PF, PG 1, LN 18 180. 180. 0. (A) (B) (C) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE PER BOOKS MENT INCOME NET INCOME PURPOSES OFFICE SUPPLIES 55. 0. 0. MORGAN STANLEY FEES 33,209. 33,209. 0.	TO FORM 990-PF, PG 1, I	N 16B	2,905.	2,905.	0.	0.	
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARITABILED PER BOOKS MENT INCOME NET INCOME PURPOSES FOREIGN TAXES PAID 180. 180. 180. 0. TO FORM 990-PF, PG 1, LN 18 180. 180. O. TO FORM 990-PF OTHER EXPENSES OTHE	FORM 990-PF		TAX	ES	ST	'ATEMENT 3	
TO FORM 990-PF, PG 1, LN 18 180. 180. 0. (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE PER BOOKS MENT INCOME PURPOSES OFFICE SUPPLIES 55. 0. 0. 0. MORGAN STANLEY FEES 33,209. 33,209. 0.	DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES	
FORM 990-PF OTHER EXPENSES (A) EXPENSES OTHER EXPENSES (B) EXPENSES OTHER EXPENSES (C) EXPENSES OTHER EXPENSES OTHER EXPENSES INVEST- ADJUSTED CHARITABLE OFFICE SUPPLIES OFFICE SUPPLIES MORGAN STANLEY FEES 33,209. 33,209. OTHER EXPENSES STATEMENT OTHER EXPENSES STATEMENT OTHER EXPENSES STATEMENT OTHER EXPENSES OTHER EXPENSES STATEMENT OTHER EXPENSES OTHER EXPENSES STATEMENT OTHER EXPENSES OTHER EXPENSES OTHER EXPENSES OTHER EXPENSES OTHER EXPENSES STATEMENT OTHER EXPENSES OTHER EXPE	FOREIGN TAXES PAID		180.	180.	0.	0.	
(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES OFFICE SUPPLIES MORGAN STANLEY FEES (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES 33,209. 33,209. (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES 33,209. (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES 33,209. (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES 33,209. (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES 33,209. (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES 35. (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES (C) (D) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES (C) (D) (C)	TO FORM 990-PF, PG 1, I	N 18	180.	180.	0.	0.	
DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURPOSES OFFICE SUPPLIES 55. 0. 0. 0. MORGAN STANLEY FEES 33,209. 33,209. 0.	FORM 990-PF		OTHER E	KPENSES	SI	CATEMENT 4	
MORGAN STANLEY FEES 33,209. 33,209. 0.	DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES	
TO FORM 990-PF, PG 1, LN 23 33,264. 33,209. 0.		_				0.	

FORM 990-PF OTHER INCREASES IN NET ASSETS OR F	UND BALANCES	STATEMENT	5	
DESCRIPTION	AMOUNT 212,303.			
UNREALIZED GAIN/(LOSS) ON INVESTMENTS				
TOTAL TO FORM 990-PF, PART III, LINE 3		212,303.		
FORM 990-PF CORPORATE STOCK		STATEMENT	6	
DESCRIPTION	BOOK VALUE	FAIR MARKE	r	
MORGAN STANLEY - EQUITIES	2,076,394.	2,076,3	94.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,076,394.	2,076,394.		
FORM 990-PF CORPORATE BONDS		STATEMENT	7	
DESCRIPTION	BOOK VALUE	FAIR MARKE	r	
MORGAN STANLEY - FIXED INCOME	1,429,431.	1,429,4	31.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,429,431.	1,429,431. 1,429,431.		

	ST OF OFFICERS, DE FOUNDATION MANA	STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
JOHN R LAUGHLIN 550 HIGHLAND STREET, SUITE 303 FREDERICK, MD 21701	EXECUTIVE DIRE 2.00	ECTOR 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.