



<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	339,235	241,933	241,933		
	<b>2</b> Savings and temporary cash investments . . . . .					
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>5</b> Grants receivable . . . . .					
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>8</b> Inventories for sale or use . . . . .					
	<b>9</b> Prepaid expenses and deferred charges . . . . .	1,304				
	<b>10a</b> Investments—U S and state government obligations (attach schedule)					
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .					
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .					
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	<b>12</b> Investments—mortgage loans . . . . .					
	<b>13</b> Investments—other (attach schedule) . . . . .					
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
<b>15</b> Other assets (describe ▶ _____)						
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	340,539	241,933	241,933			
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .					
	<b>18</b> Grants payable . . . . .	215,000	166,000			
	<b>19</b> Deferred revenue . . . . .					
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons					
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .					
	<b>22</b> Other liabilities (describe ▶ _____)					
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	215,000	166,000			
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.</b>					
	<b>24</b> Unrestricted . . . . .					
	<b>25</b> Temporarily restricted . . . . .					
	<b>26</b> Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.</b>					
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0			
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds	125,539	75,933			
<b>30</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	125,539	75,933				
<b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	340,539	241,933				

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> 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)	<b>1</b>	125,539
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-49,606
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	75,933
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	75,933

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

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

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <span style="float: right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	<b>2</b>	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 <span style="float: right;">{ }</span>	<b>3</b>	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	689,696	251,504	2 742286
2015	775,749	284,989	2 722031
2014	719,156	309,624	2 322675
2013	768,005	527,701	1 455379
2012	794,737	938,606	0 846721
<b>2 Total</b> of line 1, column (d)			<b>2</b> 10 089092
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 2 017818
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			<b>4</b> 196,545
<b>5</b> Multiply line 4 by line 3			<b>5</b> 396,592
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 0
<b>7</b> Add lines 5 and 6			<b>7</b> 396,592
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 795,277

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

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	0
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	0
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	0
<b>6</b>	Credits/Payments		
<b>a</b>	2017 estimated tax payments and 2016 overpayment credited to 2017	<b>6a</b>	0
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	0
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	0
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2018 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation ▶ \$ _____ <b>(2)</b> On foundation managers ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	Yes
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ FL, MD		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

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

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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).	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW GRACE VERSAIC COM</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>WILLIAM DOCKMAN</b> Telephone no <b>(410) 531-4000</b>			

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<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> <b>1b</b>			
<b>c</b>	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? <input type="checkbox"/> <b>1c</b>			<b>No</b>
<b>2</b>	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))			
<b>a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> <b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <b>4a</b>			<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? <b>4b</b>			<b>No</b>

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

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

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

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

[illegible]

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

[illegible]

<b>Total</b> number of other employees paid over \$50,000.	0
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3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".	
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[illegible]

<b>Total</b> number of others receiving over \$50,000 for professional services.	0
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<b>Part IX-A</b>	<b>Summary of Direct Charitable Activities</b>
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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	
2	
3	
4	

<b>Part IX-B</b>	<b>Summary of Program-Related Investments</b> (see instructions)
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Summary of Program-Related Investments (see instructions)		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		
<b>1</b>		
<b>2</b>		
All other program-related investments See instructions		
<b>3</b>		
<b>Total.</b> Add lines 1 through 3		

[illegible]

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	199,538
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	199,538
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	199,538
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	2,993
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	196,545
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	9,827

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	9,827
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	9,827
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	9,827
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	9,827

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	795,277
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	795,277
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	795,277

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



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

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				9,827
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .	715,413			
<b>b</b> From 2013. . . . .	741,620			
<b>c</b> From 2014. . . . .	703,675			
<b>d</b> From 2015. . . . .	761,500			
<b>e</b> From 2016. . . . .	677,121			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	3,599,329			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>795,277</u>				
<b>a</b> Applied to 2016, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2017 distributable amount. . . . .				9,827
<b>e</b> Remaining amount distributed out of corpus	785,450			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,384,779			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	715,413			
<b>9</b> <b>Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	3,669,366			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .	741,620			
<b>b</b> Excess from 2014. . . . .	703,675			
<b>c</b> Excess from 2015. . . . .	761,500			
<b>d</b> Excess from 2016. . . . .	677,121			
<b>e</b> Excess from 2017. . . . .	785,450			

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

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	<b>Tax year</b>	<b>Prior 3 years</b>			<b>(e) Total</b>
	<b>(a) 2017</b>	<b>(b) 2016</b>	<b>(c) 2015</b>	<b>(d) 2014</b>	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

<b>1 Information Regarding Foundation Managers:</b>
<b>a</b> List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )
<b>b</b> List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed WWWGRACEVERSAICCOM 32 W 25TH AVENUE SUITE 203 SAN MATEO, CA 944032266 (817) 712-9495 WWW GRACE VERSAIC COM
<b>b</b> The form in which applications should be submitted and information and materials they should include NO FORMS ARE REQUIRED. HOWEVER, EACH REQUEST SHOULD BE SUBMITTED VIA E-MAIL WITH THE FOLLOWING INFORMATION: 1. THE NATURE AND BACKGROUND OF THE ORGANIZATION, 2. THE SUM BEING REQUESTED, 3. THE SPECIFIC PURPOSE OF THE GRANT REQUEST, AND 4. PHOTOCOPY OF THE CURRENT IRS DETERMINATION LETTER. SHOULD THE FOUNDATION EXPRESS FURTHER INTEREST IN THE ORGANIZATION, IT WOULD REQUIRE IN ADDITION TO THE ABOVE: 1. A CURRENT FINANCIAL STATEMENT, AND 2. A LIST OF CURRENT DONORS, PARTICULARLY COMPANIES, FOUNDATIONS AND GOVERNMENTAL AGENCIES, INDICATING THE AMOUNTS CONTRIBUTED ON AN ANNUAL BASIS
<b>c</b> Any submission deadlines N/A
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors N/A

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	789,422
<b>b</b> <i>Approved for future payment</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3b</b>	166,000

## Enter gross amounts unless otherwise indicated

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**Form **990-PF** (2017)

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

<b>1</b> 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?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</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 <b>(d)</b> the value of the goods, other assets, or services received.			

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

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

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

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	***** 2018-06-21 *****	May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	LORI S BURGHAUSER		2018-06-21		P00370694
	Firm's name ▶ SC&H TAX & ADVISORY SERVICES LLC				Firm's EIN ▶ 20-5991824
	Firm's address ▶ 910 RIDGEBROOK ROAD SPARKS, MD 21152				Phone no (410) 403-1500

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MARK A SHELNITZ	DIRECTOR & CHAIRMAN 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
ELIZABETH C BROWN	DIRECTOR & VICE CHAIRMAN 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
KEITH N COLE	DIRECTOR & VICE CHAIRMAN 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
WILLIAM DOCKMAN	VICE CHAIRMAN & TREASURER 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
MICHAEL W CONRON	SECRETARY 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
JEREMY ROHEN	ASSISTANT TREASURER 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
SEAN DEMPSEY	ASSISTANT SECRETARY 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
SHIRLEY HEWITT	DEPUTY EXECUTIVE DIRECTOR 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				
DIANNA MATTESON	DEPUTY EXECUTIVE DIRECTOR 1 00	0	0	0
7500 GRACE DRIVE COLUMBIA, MD 21044				

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
A STEP FORWARD 800 N FULTON AVENUE BALTIMORE, MD 21217	NONE	PC	HEALTH AND SOCIAL WELFARE	3,500
ABRAHAM'S TEST ASSOCIATION PO BOX 19124 LAKE CHARLES, LA 70616	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
ACTION FOR HEALTHY KIDS INC 600 W VAN BUREN ST STE 720 CHICAGO, IL 60607	NONE	PC	HEALTH AND SOCIAL WELFARE	8,945
AMERICAN CANCER SOCIETY 1 LAKESHORE DRIVE LAKE CHARLES, LA 70629	NONE	PC	HEALTH AND SOCIAL WELFARE	931
AMERICAN CHEMICAL SOCIETY 1155 16TH ST NW WASHINGTON, DC 20036	NONE	PC	EDUCATION AND SCIENCE	13,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN FOUNDATION FOR SUICIDE PREVENTION 120 WALL STREET 29TH FLOOR NEW YORK, NY 10005	NONE	PC	HEALTH AND SOCIAL WELFARE	1,675
AMERICAN HEART ASSOCIATION 217 E REDWOOD ST BALTIMORE, MD 21202	NONE	PC	HEALTH AND SOCIAL WELFARE	9,151
AMERICAN HEART ASSOCIATION P O BOX 50045 PRESCOTT, AZ 86304	NONE	PC	HEALTH AND SOCIAL WELFARE	3,500
AMERICAN HEART ASSOCIATION 630 W PRIEN LAKE ROAD LAKE CHARLES, LA 70601	NONE	PC	HEALTH AND SOCIAL WELFARE	800
AMERICAN RED CROSS - HARVEY DISASTER FUND 8550 ARLINGTON BLVD FAIRFAX, VA 22031	NONE	PC	HEALTH AND SOCIAL WELFARE	100,000
<b>Total . . . . .</b> ► <b>3a</b>				789,422



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ARCHBISHOP CURLEY HIGH SCHOOL 3701 SINCLAIR LANE BALTIMORE, MD 21213	NONE	PC	MATCHING GRANTS	300
ARCHDIOCESE OF BALTIMORE PARTNERS IN EXCELLENCE 320 CATHEDRAL STREET BALTIMORE, MD 21201	NONE	PC	EDUCATION AND SCIENCE	10,000
ATHLETES SERVING ATHLETES INC P O BOX 4222 LUTHERVILLE, MD 21094	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
ATHOLTON HIGH SCHOOL TECHNOLOGY BOOSTERS 6520 FREETOWN ROAD COLUMBIA, MD 21044	NONE	PC	EDUCATION AND SCIENCE	1,000
BALTIMORE MUSEUM OF INDUSTRY 1415 KEY HIGHWAY BALTIMORE, MD 21230	NONE	PC	URBAN, CIVIC, AND CULTURE	2,500
<b>Total . . . . . ▶</b> <b>3a</b>				789,422


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF ALBANY P O BOX 691 ALBANY, OR 97321	NONE	PC	EDUCATION AND SCIENCE	2,500
BUCKNELL UNIVERSITY 301 MARKET ST STE 2 LEWISBURG, PA 17837	NONE	PC	MATCHING GRANTS	500
BUSINESS VOLUNTEERS MARYLAND 1201 S SHARP ST STE 206 BALTIMORE, MD 21230	NONE	PC	URBAN, CIVIC, AND CULTURE	1,000
CASA OF LINN COUNTY INCP O BOX 100 ALBANY, OR 97321	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
CENTRE COLLEGE600 W WALNUT ST DANVILLE, KY 40422	NONE	PC	MATCHING GRANTS	100
<b>Total . . . . .</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHAMINADE HIGH SCHOOL 340 JACKSON AVENUE MINEOLA, NY 11501	NONE	PC	MATCHING GRANTS	250
CHAMPIONS AGAINST CANCER P O BOX 115 HIGHLAND, MD 20777	NONE	PC	HEALTH & SOCIAL WELFARE	2,000
CHARLESTON CATHOLIC HIGH SCHOOL 1033 VIRGINIA ST EAST CHARLESTON, WV 25301	NONE	PC	MATCHING GRANTS	500
CHEROKEE AREA COUNCIL BOY SCOUTS OF AMERICA 6031 LEE HIGHWAY CHATTANOOGA, TN 37421	NONE	PC	URBAN, CIVIC AND CULTURE	500
CHILDRENS SCIENCE CENTER 2214 ROCK HILL ROAD STE 380 HERNDON, VA 20170	NONE	PC	EDUCATION AND SCIENCE	5,000
<b>Total</b> . . . . . 				789,422
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COLUMBIA ASSOCIATION 6310 HILLSIDE COURT 100 COLUMBIA, MD 21046	NONE	PC	URBAN, CIVIC AND CULTURE	50,000
COLUMBIA FESTIVAL OF THE ARTS 5575 STERRETT PLACE STE 280 COLUMBIA, MD 21044	NONE	PC	URBAN, CIVIC, AND CULTURE	10,000
COMMUNITY ACTION COUNCIL OF HOWARD COUNTY INC 6751 GATEWAY DR 2ND FLOOR COLUMBIA, MD 21046	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
COMMUNITY COLLEGE OF BALTIMORE COUNTY FOUNDATION 7200 SOLLERS POINT ROAD BALTIMORE, MD 21222	NONE	PC	EDUCATION AND SCIENCE	5,000
COMMUNITY OF CURTIS BAY ASSOCIATION INC 1503 ELMTREE ST BALTIMORE, MD 21226	NONE	PC	URBAN, CIVIC, AND CULTURE	8,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DIABETES CAMP OF WEST VIRGINIA P O BOX 224 DALLAS, WV 26036	NONE	PC	HEALTH AND SOCIAL WELFARE	4,000
DRINK AT THE WELL 4710 PENNINGTON AVENUE BALTIMORE, MD 21226	NONE	PC	HEALTH AND SOCIAL WELFARE	10,000
ERLANGER HEALTH SYSTEM FOUNDATIONS 975 EAST THIRD ST NO B-508 CHATTANOOGA, TN 37403	NONE	PC	HEALTH AND SOCIAL WELFARE	1,000
EXECUTIVE ALLIANCE WOMEN OF EXCELLENCE 3601 JOPPA ROAD TOWSON, MD 21234	NONE	PC	URBAN, CIVIC, AND CULTURE	3,500
FONDATION DE L'HOPITAL DU SUROIT 150 RUE ST-THOMAS VALLEYFIELD, QUEBEC J6T-6C1 CA	NONE	PC	HEALTH AND SOCIAL WELFARE	15,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRANCISCAN CENTER INC 101 WEST 23RD STREET BALTIMORE, MD 21218	NONE	PC	HEALTH AND SOCIAL WELFARE	1,000
GALVESTON BAY FOUNDATION 1100 HERCULES AVE STE 200 HOUSTON, TX 77058	NONE	PC	URBAN, CIVIC, AND CULTURE	1,000
GEORGETOWN PREPARATORY SCHOOL 10900 ROCKVILLE PIKE NORTH BETHESDA, MD 20852	NONE	PC	MATCHING GRANTS	750
GIRL SCOUTS OF CENTRAL MARYLAND 4806 SETON DRIVE BALTIMORE, MD 21215	NONE	PC	URBAN, CIVIC, AND CULTURE	5,000
GLENELG HIGH SCHOOL FIRST ROBOTICS 14025 BURNTWOODS ROAD GLENELG, MD 21737	NONE	PC	EDUCATION AND SCIENCE	2,000
<b>Total</b> . . . . . 				789,422
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GONZAGA COLLEGE HIGH SCHOOL 19 EYE STREET NORTHWEST WASHINGTON, DC 20001	NONE	PC	MATCHING GRANTS	100
HB PLANT HIGH SCHOOL 2415 S HIMES AVENUE TAMPA, FL 33629	NONE	PC	MATCHING GRANTS	500
HABITAT FOR HUMANITY SUSQUEHANNA 205 S HAYS STREET BEL AIR, MD 21014	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
HAMILTON COUNTY DEPARTMENT OF EDUCATION 3074 HICKORY VALLEY ROAD CHATTANOOGA, TN 37421	NONE	PC	EDUCATION AND SCIENCE	6,000
HAVEN HOUSE834 CHICAGO STREET HAMMOND, IN 46327	NONE	PC	HEALTH & SOCIAL WELFARE	2,000
<b>Total . . . . .</b> ► <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
HELP END HOMELESSNESS HOWARD COUNTY 5410 LEAF TRADER WAY COLUMBIA, MD 21044	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
HELPING UP MISSION 1029 E BALTIMORE STREET BALTIMORE, MD 21202	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
HOPEWORKS OF HOWARD COUNTY INC 5457 TWIN KNOLLS ROAD STE 310 COLUMBIA, MD 21045	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
HOUSE OF RUTH2201 ARGONNE DRIVE BALTIMORE, MD 21218	NONE	PC	HEALTH AND SOCIAL WELFARE	1,000
HOWARD COMMUNITY COLLEGE EDUCATIONAL FOUNDATION 10901 LITTLE PATUXENT PARKWAY COLUMBIA, MD 21044	NONE	PC	EDUCATION AND SCIENCE	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422




**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOWARD COUNTY CONSERVANCY P O BOX 175 WOODSTOCK, MD 21163	NONE	PC	URBAN, CIVIC, AND CULTURE	25,000
HOWARD COUNTY POLICE FOUNDATION 3410 COURT HOUSE DRIVE ELLCOTT CITY, MD 21043	NONE	PC	URBAN, CIVIC AND CULTURE	1,000
HOWARD HOSPITAL FOUNDATION 5755 CEDAR LANE COLUMBIA, MD 21044	NONE	PC	HEALTH AND SOCIAL WELFARE	44,000
INNER COUNTY OUTREACH INC 529 EDMUND STREET ABERDEEN, MD 21001	NONE	PC	HEALTH AND SOCIAL WELFARE	1,000
INSTITUTE OF NOTRE DAME 901 AISQUITH STREET BALTIMORE, MD 21202	NONE	PC	MATCHING GRANTS	13,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
IONIC 6 INC11137 199TH STREET ST ALBANS, NY 11412	NONE	PC	EDUCATION AND SCIENCE	1,000
ITINERIS INC2050A ROCKROSE AVENUE BALTIMORE, MD 21211	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
JIM O'MALLEY CHARITABLE FOUNDATION 7001 BRIGHT MEMORY DR COLUMBIA, MD 21044	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
JUNIOR ACHIEVEMENT OF CENTRAL MARYLAND INC 10711 RED RUN BLVD STE 110 OWINGS MILLS, MD 21117	NONE	PC	EDUCATION AND SCIENCE	5,000
JUNIPER ELEMENTARY SCHOOL 9400 I AVENUE HESPERIA, CA 92345	NONE	PC	EDUCATION AND SCIENCE	4,500
<b>Total . . . . . ►</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KIDSPEACE 5575 STERRETT PLACE STE 200 COLUMBIA, MD 21044	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
KIPP DC 2600 VIRGINIA AVENUE NW SUITE 900 WASHINGTON, DC 20037	NONE	PC	EDUCATION AND SCIENCE	25,000
LA PORTE EDUCATION FOUNDATION P O BOX 1272 LA PORTE, TX 77572	NONE	PC	EDUCATION AND SCIENCE	1,500
LOUISIANA TECH UNIVERSITY FOUNDATION INC P O BOX 3183 RUSTON, LA 71272	NONE	PC	EDUCATION AND SCIENCE	5,000
LOUISIANA TECH UNIVERSITY PO BOX 3183 RUSTON, LA 71272	NONE	PC	MATCHING GRANTS	3,000
<b>Total</b> . . . . . 				789,422
<b>3a</b>				


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LOYOLA UNIVERSITY MARYLAND 4501 N CHARLES STREET BALTIMORE, MD 21210	NONE	PC	EDUCATION AND SCIENCE	5,000
MARIAN HOUSE949 GORSUCH AVENUE BALTIMORE, MD 21218	NONE	PC	HEALTH AND SOCIAL WELFARE	6,985
MARYLAND FAMILY NETWORK 1001 EASTERN AVE 2ND FLOOR BALTIMORE, MD 21202	NONE	PC	URBAN, CIVIC, AND CULTURE	1,000
MARYLAND FOOD BANK 2200 HALETHORPE FARMS ROAD BALTIMORE, MD 21227	NONE	PC	HEALTH AND SOCIAL WELFARE	1,000
MARYLAND SCIENCE CENTER 601 LIGHT STREET BALTIMORE, MD 21230	NONE	PC	URBAN, CIVIC, AND CULTURE	36,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MARYLAND STEM FESTIVAL 3000 ROUTE 97 STE 203 GLENWOOD, MD 21738	NONE	PC	EDUCATION AND SCIENCE	5,000
MARYLAND VOLUNTEER LAWYERS SERVICE 1 N CHARLES STREET STE 222 BALTIMORE, MD 21201	NONE	PC	URBAN, CIVIC, AND CULTURE	2,500
MCNEESE STATE UNIVERSITY FOUNDATION P O BOX 91989 LAKE CHARLES, LA 70609	NONE	PC	EDUCATION AND SCIENCE	5,000
MDA OF GREATER MARYLAND 8501 LASALLE RD STE 106 TOWSON, MD 21286	NONE	PC	HEALTH AND SOCIAL WELFARE	1,323
MDBIO FOUNDATION INC 9210 CORPORATE BLVD STE 470 ROCKVILLE, MD 20850	NONE	PC	EDUCATION AND SCIENCE	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEALS ON WHEELS OF CENTRAL MARYLAND INC 515 SOUTH HAVEN STREET BALTIMORE, MD 21224	NONE	PC	HEALTH AND SOCIAL WELFARE	7,500
MERCY HOME FOR BOYS & GIRLS 1140 WEST JACKSON CHICAGO, IL 60607	NONE	PC	HEALTH AND SOCIAL WELFARE	891
MICHIGAN STATE UNIVERSITY 535 N CHESTNUT RD RM 300 EAST LANSING, MI 48824	NONE	PC	MATCHING GRANTS	700
MIDDLE PATUXENT ENVIRONMENTAL FOUNDATION 6225 SMITH AVENUE BALTIMORE, MD 21209	NONE	PC	EDUCATION AND SCIENCE	5,000
MOSE & GARRISON SISKIN MEMORIAL FOUNDATION DBA SISKIN CHILDREN'S INSTITUTE 1101 CARTER STREET CHATTANOOGA, TN 37402	NONE	PC	HEALTH AND SOCIAL WELFARE	4,500
<b>Total . . . . .</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MOUNT SAINT JOSEPH HIGH SCHOOL 4403 FREDERICK AVENUE BALTIMORE, MD 21229	NONE	PC	MATCHING GRANTS	375
MY SISTER'S CIRCLE INC 2063 MT HOREB ROAD TIMONIUM, MD 21094	NONE	PC	HEALTH AND SOCIAL WELFARE	5,000
MY SISTER'S PLACE WOMEN'S CENTER 320 CATHEDRAL STREET BALTIMORE, MD 21201	NONE	PC	HEALTH AND SOCIAL WELFARE	1,000
NATIONAL AQUARIUM 501 EAST PRATT STREET BALTIMORE, MD 21202	NONE	PC	URBAN CIVIC & CULTURE	10,000
NEW YORK UNIVERSITY - SCHOOL OF LAW 25 W 4TH ST 4TH FLOOR NEW YORK, NY 10012	NONE	PC	MATCHING GRANTS	1,000
<b>Total . . . . .</b> ► <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OUR DAILY BREAD 320 CATHEDRAL STREET BALTIMORE, MD 21201	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH ST NW WASHINGTON, DC 200063517	NONE	PC	HEALTH AND SOCIAL WELFARE	5,000
PAUL J KELLEY JR CHARITABLE FOUNDATION INC 6030 DAYBREAK CIRCLE A150 BOX 232 CLARKSVILLE, MD 21029	NONE	PC	HEALTH AND SOCIAL WELFARE	5,000
PORT DISCOVERY CHILDREN'S MUSEUM 35 MARKET PLACE BALTIMORE, MD 21202	NONE	PC	EDUCATION AND SCIENCE	2,500
RELAY FOR LIFE CATONSVILLE 409 WILLIAMS COURT STE 120 BALTIMORE, MD 21220	NONE	PC	HEALTH AND SOCIAL WELFARE	774
<b>Total</b> . . . . . 				789,422
<b>3a</b>				



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RIVER HILL ROBOTICS 12101 CLARKSVILLE PIKE CLARKSVILLE, MD 21029	NONE	PC	EDUCATION AND SCIENCE	1,000
ROBINSON NATURE CENTER 6692 CEDAR LANE COLUMBIA, MD 21044	NONE	PC	EDUCATION AND SCIENCE	500
ROTARY CLUB OF COLUMBIA FOUNDATION P O BOX 916 COLUMBIA, MD 21044	NONE	PC	URBAN, CIVIC AND CULTURE	2,600
ROY MAAS YOUTH ALTERNATIVES 3103 WEST AVENUE SAN ANTONIO, TX 78213	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
SCHOLARSHIP AMERICA FIRST NATIONAL BANK P O BOX 240 ST PETER, MN 56082	NONE	PC	SCHOLARSHIPS	62,000
<b>Total . . . . .</b> ► <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SHARE OUR STRENGTHPO BOX 75203 BALTIMORE, MD 21275	NONE	PC	HEALTH AND SOCIAL WELFARE	8,219
SOUTH CARROLL HIGH SCHOOL ROBOTICS CLUB 1300 WEST OLD LIBERTY ROAD SYKESVILLE, MD 21784	NONE	PC	EDUCATION AND SCIENCE	1,000
SOWELA TECHNICAL COMMUNITY COLLEGE FOUNDATION 3820 SEN J BENNETT JOHNSTON AVE LAKE CHARLES, LA 70615	NONE	PC	EDUCATION AND SCIENCE	2,500
ST JOSEPH'S CARMELITE HOME FOR GIRLS 4840 GRASSELLI AVENUE EAST CHICAGO, IN 46312	NONE	PC	HEALTH AND SOCIAL WELFARE	2,000
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PL MSC 512 MEMPHIS, TN 38105	NONE	PC	HEALTH AND SOCIAL WELFARE	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
STELLA MARIS INC 2300 DULANEY VALLEY ROAD TIMONIUM, MD 21093	NONE	PC	HEALTH AND SOCIAL WELFARE	2,500
SUSAN G KOMEN 4141 VETERANS MEMORIAL BLVD STE202 METAIRIE, LA 70002	NONE	PC	HEALTH AND SOCIAL WELFARE	1,607
TENNESSEE AQUARIUMPO BOX 11048 CHATTANOOGA, TN 37401	NONE	PC	URBAN, CIVIC, AND CULTURE	1,000
TEXAS CONSERVATION FUND P O BOX 58405 HOUSTON, TX 77258	NONE	PC	URBAN, CIVIC, AND CULTURE	1,000
THE COLLINGS FOUNDATION RIVERHILL FARM STOW, MA 01775	NONE	POF	URBAN, CIVIC, AND CULTURE	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE COOPER UNION 30 COOPER SQUARE 8TH FLOOR NEW YORK, NY 10003	NONE	PC	MATCHING GRANTS	100
THE KEYSTONE SCIENCE SCHOOL INC 1053 SODA RIDGE ROAD KEYSTONE, CO 80435	NONE	PC	EDUCATION AND SCIENCE	17,600
THE PENNSYLVANIA STATE UNIVERSITY 2583 GATEWAY DR STE 130 STATE COLLEGE, PA 16801	NONE	PC	MATCHING GRANTS	600
THE REGENTS OF THE UNIVERSITY OF MICHIGAN DEPT CH 10189 PALATINE, IL 60055	NONE	PC	MATCHING GRANTS	2,000
THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 2929 WALNUT ST STE 300/GAAR PHILADELPHIA, PA 19104	NONE	PC	MATCHING GRANTS	4,000
<b>Total . . . . .</b> ► <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE WHITE MOUNTAIN SCHOOL 371 WEST FARM ROAD BETHLEHEM, NH 03574	NONE	PC	MATCHING GRANTS	3,000
TOWSON STATE UNIVERSITY 8000 YORK ROAD TOWSON, MD 21252	NONE	PC	MATCHING GRANTS	500
ULMAN CANCER FUND FOR YOUNG ADULTS INC 1215 E FORT AVENUE BALTIMORE, MD 21230	NONE	PC	HEALTH AND SOCIAL WELFARE	5,000
UNITED WAY OF CENTRAL MARYLAND P O BOX 64282 BALTIMORE, MD 212644282	NONE	PC	UNITED WAY	1,369
UNITED WAY WOMEN EMERGING LEADERS 1800 WASHINGTON BOULEVARD STE 340 BALTIMORE, MD 21230	NONE	PC	UNITED WAY	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNITED WAYP O BOX 933875 ATLANTA, GA 31193	NONE	PC	UNITED WAY	70,932
UNIVERSITY OF BALTIMORE 1130 N CHARLES ST BALTIMORE, MD 21201	NONE	PC	MATCHING GRANTS	500
UNIVERSITY OF FLORIDAPO BOX 14425 GAINESVILLE, FL 32604	NONE	PC	MATCHING GRANTS	100
UNIVERSITY OF ILLINOIS 1305 WEST GREEN ST URBANA, IL 61801	NONE	PC	MATCHING GRANTS	420
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION 3216 KIM BUILDING COLLEGE PARK, MD 20742	NONE	PC	EDUCATION AND SCIENCE	2,500
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF MARYLAND 4603 CALVERT ROAD COLLEGE PARK, MD 20740	NONE	PC	MATCHING GRANTS	4,625
URSINUS COLLEGE601 E MAIN ST COLLEGEVILLE, PA 19426	NONE	PC	MATCHING GRANTS	100
VIRGINIA TECH 902 PRICES FORK ROAD - 0336 BLACKSBURG, VA 24061	NONE	PC	MATCHING GRANTS	100
WAYNE STATE UNIVERSITY 5700 CASS AVE STE 1200 DETROIT, MI 48202	NONE	PC	MATCHING GRANTS	1,000
WEST VIRGINIA UNIVERSITY P O BOX 1650 MORGANTOWN, WV 26507	NONE	PC	MATCHING GRANTS	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				789,422

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WORLD TRADE CENTER INSTITUTE ANNUAL WOMEN SPANNING THE GLOBE 401 EAST PRATT STREET STE 232 BALTIMORE, MD 21202	NONE	PC	URBAN, CIVIC, AND CULTURE	5,000
<b>Total</b> . . . . .  <b>3a</b>				789,422



**TY 2017 Accounting Fees Schedule****Name:** WR GRACE FOUNDATION INC**EIN:** 65-0630671**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	2,700	0	0	0

**TY 2017 DissolutionStmt**

**Name:** WR GRACE FOUNDATION INC  
**EIN:** 65-0630671

Dissolution Name	Dissolution Address	Explanation	Dissolution Amount
NO DISSOLUTION	NONE OC	SEE ATTACHED STATEMENT PERTAINING TO FORM 990-PF, PART VII-A, LINE 5	0

**TY 2017 General Explanation Attachment****Name:** WR GRACE FOUNDATION INC**EIN:** 65-0630671**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	GRANT DISBURSEMENTS BY CATEGORY	FORM 990-PF, PART XV	HEALTH, SCIENCE AND SOCIAL WELFARE \$285,582 EDUCATION 231,600 URBAN, CIVIC AND CULTURE 172,819 UNITED FUNDS/COMMUNITY CHESTS 73,301 MATCHING GIFT CHECKS 26,120 ----- TOTAL GRANTS AS OF DECEMBER 31, 2017 \$789,422 =====

**TY 2017 LiquidationExplanationStmnt**

**Name:** WR GRACE FOUNDATION INC

**EIN:** 65-0630671

**Statement:** AFTER REVIEWING THE 2017 W.R. GRACE FOUNDATION FUNDED STATUS, IT WAS DETERMINED THAT THE BALANCE AVAILABLE, ALONG WITH THE 2017 CONTRIBUTIONS RECEIVED TO DATE, WERE ADEQUATE TO FULFILL THE 2017 EXPENSES AND DISBURSEMENTS. THE CURRENT YEAR EXPENSES, COMBINED WITH GRANT OUTLAYS, RESULTED IN A SUBSTANTIAL CONTRACTION.

**TY 2017 Other Expenses Schedule****Name:** WR GRACE FOUNDATION INC**EIN:** 65-0630671**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT AND BANK FEES	607	0	0	0
SCHOLARSHIP AMERICA	5,855	0	0	5,855
POSTAGE FEE	22	0	0	0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491215002148	
<div>Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small></div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a></div>			<div>OMB No 1545-0047</div> <div>2017</div>
<div>Name of the organization</div> <div>WR GRACE FOUNDATION INC</div>				<div>Employer identification number</div> <div>65-0630671</div>	
<div>Organization type (check one)</div>					
<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>					
<div>Section:</div> <div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>					
<div>Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b>.</div> <div><b>Note.</b> Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions</div>					
<div>General Rule</div> <div><input checked="" type="checkbox"/> For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.</div>					
<div>Special Rules</div> <div><input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.</div> <div><input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.</div> <div><input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$</div>					
<div><b>Caution.</b> An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it <b>must</b> answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).</div>					
<div>For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF</div> <div>Cat No 30613X</div> <div>Schedule B (Form 990, 990-EZ, or 990-PF) (2017)</div>					

<b>Name of organization</b> WR GRACE FOUNDATION INC	<b>Employer identification number</b> 65-0630671
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<b>Part I</b> <b>Contributors</b> (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WR GRACE 7500 GRACE DRIVE COLUMBIA, MD 21044	\$ 700,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> WR GRACE FOUNDATION INC	<b>Employer identification number</b> 65-0630671
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<b>Part II</b>	<b>Noncash Property</b> (See instructions) Use duplicate copies of Part II if additional space is needed
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	



<b>Name of organization</b> WR GRACE FOUNDATION INC	<b>Employer identification number</b> 65-0630671
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<b>Part III</b>	<b>Exclusively</b> religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	