

Form **990-PF** 

**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 ► Go to www irs.gov/Form990PF for instructions and the latest information

For c	alendar year 2017 or tax year beginning NOV	21, 2017	, and ending	DEC 31, 2017	·
Nam	e of foundation			A Employer identification	n number
TI	HE FRIER FOUNDATION, INC.			82-3519690	)
	ber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
13	3 ASTON COURT			410-262-42	243
City	or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is i	pending, check here
O	WINGS MILLS, MD 21117				
G C	neck all that apply X Initial return	Initial return of a for	rmer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		2 Foreign organizations m	eeting the 85% lest
	Address change	Name change		2 Foreign organizations m check here and attach c	omputation Lest,
H C	heck type of organization: X Section 501(c)(3) ex		04	E If private foundation sta	
<u>Ш</u>	( / /	Other taxable private founda		under section 507(b)(1	)(A), check here
	r market value of all assets at end of year   J   Accounti		Accrual	F If the foundation is in a	
•	om Part II, col. (c), line 16)	her (specify)		under section 507(b)(1	)(B), check here
_					(d) -
Pa	TI Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
$\neg$	1 Contributions, gifts, grants, etc., received	7,000,000.		N/A	(cach seeks ship)
	2 Check I the foundation is not required to attach Sch B	, -, -		1	
	Interest on savings and temporary cash investments	·		<u> </u>	
	Dividends and interest from securities			"	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
Revenue	b Gross sales price for all assets on line 6a				
eve	7 Capital gain net income (from Part IV, line 2)		0.		
č	8 Net short-term capital gain				
	9 Income modifications				
	Gross sales less returns and allowances				
	<b>b</b> Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total Add lines 1 through 11	7,000,000.	0.		
	13 Compensation of officers, directors trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
w	15 Pension plans, employed Refrects EIVED				<del></del>
ıse	16a Legal fees	S		ļ	· :
Expense	b Accounting fees by JUL 3 0 2018				
	[m]	181			<del>                                     </del>
ţį	17 Interest	7 =			<del> </del>
Operating and Administrative	17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy				<del> </del>
Ξ̈́	19 Depreciation and depletion		<del></del>	<del> </del>	
Ē,					_
φ	21 Travel, conferences, and meetings	-			+
E .	22 Printing and publications				<del>                                     </del>
ting	23 Other expenses				+
era	24 Total operating and administrative expenses. Add lines 13 through 23	0.	0.		0.
õ	25 Contributions, gifts, grants paid	0.		-	0.
	26 Total expenses and disbursements.				<u> </u>
	Add lines 24 and 25	0.	0.		0.
	27 Subtract line 26 from line 12:	-		-	<del>                                     </del>
	a Excess of revenue over expenses and disbursements	7,000,000.			
	b Net investment income (if negative enter -0-)	.,,	0.		
	c Adjusted net income (if negative enter -0-)			N/A	
	- riejadida nat madina (i negatire città o )			1	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

		Balance Sheets Attached schedules and amounts in the description	beginning of year	Eno o	or year
Pa	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
$\Box$	1	Cash - non-interest-bearing		7,000,000.	7,000,000.
	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			
		Receivables due from officers, directors, trustees, and other			-
	-	disqualified persons			
	7	Other notes and loans receivable		<del></del>	
		Less, allowance for doubtful accounts			
ွှ	8	Inventories for sale or use	·		
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			-
ĺ		Investments - corporate stock		,	
		Investments - corporate bonds			
		Investments land, buildings, and equipment basis			
	••		1		
	12	Less accumulated depreciation Investments - mortgage loans			
	1	Land, buildings, and equipment; basis	—		
	17	Less accumulated depreciation			
	15	Other assets (describe			<del>-</del>
		Total assets (to be completed by all filers - see the			
	10	` , ,	0.	7,000,000.	7,000,000.
_	17	instructions. Also, see page 1, item I)  Accounts payable and accrued expenses	0.	7,000,000.	7,000,000.
		Grants payable			+
	18	• •			1
Liabilities	19	Deferred revenue			-
ii	20	Loans from officers, directors, trustees, and other disqualified persons			+
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			
	,,	Total lightilities (add lines 17 through 22)	0.	0.	
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here			4
		and complete lines 24 through 26, and lines 30 and 31.			
S	۱,,	Unrestricted			
Balances	ı	Temporarily restricted			1
ala	ı	Permanently restricted			1
	20	·			-
ڌ					
ŏ	۰,	and complete lines 27 through 31.	0.	0.	
Net Assets or Fund	27	Capital stock, trust principal, or current funds	0.		4
SS(	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	7,000,000.	-
et A	29	Retained earnings, accumulated income, endowment, or other funds	0.	7,000,000.	4
ž	30	Total net assets or fund balances	· · ·	7,000,000.	4
	١,,	W-A-1 11-6 1114	0.	7,000,000.	
_	31			7,000,000.	<u> </u>
P	art	Analysis of Changes in Net Assets or Fund B	Balances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	0.
		ir amount from Part I, line 27a		2	7,000,000.
		er increases not included in line 2 (itemize)		3	n.
		lines 1, 2, and 3		4	7,000,000.
		reases not included in line 2 (itemize)		5	0.
-		Il net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	7,000,000.
			1. 11		

(a) List and describe th	e kind(s) of pr	roperty sold (for exa	mple, real esta		(б) Т	How aco	quired	(c) Date acquired	(d) Date sold	
2-story brick ware	house, or con	nmon stock, 200 sh	s MLC Co.)		Ď	- Dona	tion	(mo., day, yr)	(mo., day, yr.)	
1a					<u> </u>					
b NON	<u> </u>	<del></del>			ļ					
d d					┢					
e				· · · · · · · · · · · · · · · · · · ·	┢			<del></del>		
(e) Gross sales price		ciation allowed illowable)		st or other basis expense of sale				(h) Gain or (loss ((e) plus (f) minus (		
a										
b					]					
С										
d										
e			<u> </u>	40/04/00						
Complete only for assets showing				<del></del>				Gains (Col. (h) gain (k), but not less thai		
(i) FMV as of 12/31/69		usted basis 12/31/69		cess of col. (i)	_			Losses (from col. (		
a			<u> </u>		ļ					
b			ļ <u> </u>							
C			<del> </del>	· <del>-</del>	_					
d			<u> </u>							
e			<u>.                                    </u>		$\overline{}$					
Capital gain net income or (net cap	ıtal loss)	If gain, also ente			}	2				
Net short-term capital gain or (loss	) as defined in	sections 1222(5) a	nd (6).		, l					
If gain, also enter in Part I, line 8, co	olumn (c).				- } l					
If (loss), enter -0- in Part I, line 8	day Cast	4040/-\-	Dadwaa	l Tay and Mad		3	ant las			
Part V   Qualification Un		<del></del>		···—			ent inc	ome	37 / 3	
For optional use by domestic private f	oundations su	bject to the section	4940(a) tax oi	i net investment ir	icome	9.)			N/A	
f section 4940(d)(2) applies, leave this	s part blank.									
Was the foundation liable for the section	on 4042 tay or	the dictributable as	mount of any v	oar in the bace no	rıod?				Yes N	
f "Yes," the foundation doesn't qualify				•	i iou •				res in	
Enter the appropriate amount in ea					ntries	<u> </u>				
(a)		(b)			(c)				(d)	
Base periód years Calendar year (or tax year beginning	gin) Ad	djusted qualifying dis	stributions	Net value of no			use assets	Distribution ratio (col. (b) divided by col. (c))		
2016										
2015										
2014							_			
2013										
2012										
2 Total of line 1, column (d)								2		
Average distribution ratio for the 5-	, ,		on line 2 by 5	0, or by the numb	er of	years		2		
	, ,		on line 2 by 5	0, or by the numb	er of	years		3		
Average distribution ratio for the 5- the foundation has been in existence	ce if less than 5	5 years	•	0, or by the numb	er of	years				
Average distribution ratio for the 5- the foundation has been in existence	ce if less than 5	5 years	•	O, or by the numb	er of y	years				
Average distribution ratio for the 5- the foundation has been in existence     Enter the net value of noncharitable	ce if less than 5	5 years	•	O, or by the numb	er of y	years		3 4		
<ul> <li>2 Total of line 1, column (d)</li> <li>3 Average distribution ratio for the 5-the foundation has been in existence</li> <li>4 Enter the net value of noncharitable</li> <li>5 Multiply line 4 by line 3</li> </ul>	ce if less than 5	5 years	•	O, or by the numb	er of y	years		3		
Average distribution ratio for the 5- the foundation has been in existence.  Enter the net value of noncharitable.  Multiply line 4 by line 3	ce if less than 5	5 years or 2017 from Part X,	•	O, or by the numb	er of	years		3 4 5		
Average distribution ratio for the 5- the foundation has been in existence Enter the net value of noncharitable Multiply line 4 by line 3	ce if less than 5	5 years or 2017 from Part X,	•	0, or by the numb	er of y	years		3 4		
Average distribution ratio for the 5- the foundation has been in existence Enter the net value of noncharitable Multiply line 4 by line 3 Enter 1% of net investment income	ce if less than 5	5 years or 2017 from Part X,	•	0, or by the numb	er of y	years		3 4 5		
Average distribution ratio for the 5- the foundation has been in existence Enter the net value of noncharitable Multiply line 4 by line 3 Enter 1% of net investment income	ce if less than 5	5 years or 2017 from Part X,	•	O, or by the numb	er of y	years		3 4 5		
Average distribution ratio for the 5- the foundation has been in existence Enter the net value of noncharitable Multiply line 4 by line 3 Enter 1% of net investment income Add lines 5 and 6	ce if less than secuse assets for	5 years or 2017 from Part X, , line 27b)	•	O, or by the numb	er of y	years		3 4 5		
Average distribution ratio for the 5- the foundation has been in existence     Enter the net value of noncharitable	ce if less than se-use assets for e (1% of Part I,	5 years or 2017 from Part X, , line 27b)	, line 5				ate	3 4 5 6 7		

	990-PF (2017) THE FRIER FOUNDATION, INC.			82-351			Page 4	
Pai	t VI Excise Tax Based on Investment Income (Section 49	40(a), 4940(l	o), 4940(e), or 4	1948 - see	instru	ıctio	ns)	
1a	xempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and	enter "N/A" on line	e 1					
	Date of ruling or determination letter (attach copy of letter if n	ecessary-see ins	tructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ and ent	er 1%	1			0.	
	of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line	12. col (b).	1 1				
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only,	•	, \- /- /-	2			0.	
	Add lines 1 and 2	, ,		3			0.	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	others enter -0-1		4			0.	
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	, 5		5			0.	
	Credits/Payments:			<del></del>			<del>- • •</del>	
	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0.					
	Exempt foreign organizations - tax withheld at source	6b	<u></u>	1 1				
	Fax paid with application for extension of time to file (Form 8868)	6c	0.	1				
		6d	0.	1 1				
	Backup withholding erroneously withheld	00		4 1			^	
	Total credits and payments. Add lines 6a through 6d			7			0.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	паспед	_	8			0.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			0.	
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				
	enter the amount of line 10 to be: Credited to 2018 estimated tax		Refunded <b>▶</b>	11				
	t VII-A Statements Regarding Activities				<del></del>			
	During the tax year, did the foundation attempt to influence any national, state, or local leg	jislation or did it p	articipate or intervene	: In		Yes		
	any political campaign?				1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purp	oses? See the ins	tructions for the defin	ution	1b		X	
	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copie	s of any materials	published or					
	distributed by the foundation in connection with the activities.						ĺ	
C	Did the foundation file Form 1120-POL for this year?				1c		Х	
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t	he year					_	
	(1) On the foundation. <b>&gt;</b> \$ 0 . (2) On foundation manage	ers 🕨 \$	0.					
е	nter the reimbursement (if any) paid by the foundation during the year for political exper			_		)	ļ	
	managers. ▶ \$ 0.							
2	Has the foundation engaged in any activities that have not previously been reported to the	IRS?			2		Х	
	f "Yes," attach a detailed description of the activities							
	Has the foundation made any changes, not previously reported to the IRS, in its governin	o instrument, artic	les of incornoration of	or				
	pylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	g, a	rab or moorporation, t		3	ľ	х	
	Did the foundation have unrelated business gross income of \$1,000 or more during the y	ear?			4a	$\vdash$	X	
	f "Yes," has it filed a tax return on Form 990-T for this year?	oui		N/A	4b	<del>                                     </del>		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year	r?		14/21	5		X	
	f "Yes," attach the statement required by General Instruction T				J-	<del> </del>		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	outhor						
		either.						
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandat	ory directions that	conflict with the state	e law				
	remain in the governing instrument?				6		<u>X</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," cor	nplete Part II, col	(c), and Part XV		7	X		
8a	Enter the states to which the foundation reports or with which it is registered. See instruct	tions						
	MD							
b	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General	(or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				8b	Х		
9	s the foundation claiming status as a private operating foundation within the meaning of	section 4942(j)(3)	or 4942(j)(5) for cale	ndar				1
					1	1	v	_
	ear 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," co	mplete Part XIV			9		X	-C
	ear 2017 or the tax year beginning in 2017? See the instructions for Part XIV  If "Yes," co. Old any persons become substantial contributors during the tax year? ii "Yes " attach a sche	-	es and addresses S	TMT 1	10	Х		C

Part VII-A Statements Regarding Activities (continued)				
			Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
section 512(b)(13)? If "Yes," attach schedule. See instructions		11		Х
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advised.	sory privileges?			
If "Yes," attach statement. See instructions		12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	L
Website address N/A			0.4.5	
	e no ▶ <u>410-26</u>		243	
Located at ► 13 ASTON CT, OWINGS MILLS, MD	ZIP+4 ▶21	117		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			<b>,</b> , ▶	<u></u>
and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16 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	Ц	Х
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				ĺ
foreign country ►  Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		l		
	<del></del>		   	NI.
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year, did the foundation (either directly or indirectly):  (1) Faces on the selection and page as leaves of property with a discussified page 2	Yes X No			ĺ
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Tes No	1	]	1
(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			l
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			1
(5) Transfer any income or assets to a disqualified person (or make any of either available	162 [V] 110			
	Yes X No			1
for the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception Check "No"	162 _Z_ NU	İ		
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 )	Yes X No	ł		{
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
Organizations relying on a current notice regarding disaster assistance, check here	N/21	<del> "</del>		<del></del>
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.	od.			
before the first day of the tax year beginning in 2017?	ou .	1c		l x
<ul> <li>Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating found</li> </ul>	ation	<del>  "</del>		<del>                                     </del>
defined in section 4942(j)(3) or 4942(j)(5))	ution			ĺ
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) be	ainaina			l
before 2017?	Yes X No			ĺ
If "Yes," list the years  , , , , , , , , , , , , , , , , , , ,				l
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to inc	orrect			1
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and				
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				
<b>•</b>				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				ĺ
during the year?	Yes X No			1
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified person	ons after	Ì		
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 Schedu	le C,			
Form 4720, to determine if the foundation had excess business holdings in 2017 )	N/A	3b		l
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pi	urpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2017?		4b		Х
	For	m <b>99</b> 0	)-PF	(2017)

orm 990 PF (2017) THE FRIER FOUNDATION, IN			82-35196	90	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y <sub>1</sub>	es X No		1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			es X No	ł	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	Y	es X No	İ	1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			- 1	
4945(d)(4)(A)? See instructions		Y	es X No	Ì	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h	nere				<b>T</b>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned		- }	1
expenditure responsibility for the grant?	N	/A 🔲 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	oay premiums on				1
a personal benefit contract?	ay promising on		es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	X
If "Yes" to 6b, file Form 8870.	order benefit contract		<u> </u>	<del></del>	+
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		es X No		
b if "Yes," did the foundation receive any proceeds or have any net income attribu		I'	·	7b	+
Part VIII Information About Officers, Directors, Trust		nagere Highly		70	
Paid Employees, and Contractors	ees, roundation wa	mayers, mym	y		
List all officers, directors, trustees, and foundation managers and t	heir compensation.	<del></del>	<del></del> _		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) E	coense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	accour	kpense nt, other
ROBERT FRIER	to position PRESIDENT & T	enter -0-) REASURER	compensation	allow	ances
13 ASTON CT	LVESIDENI & I	KEASUKEK			
OWINGS MILLS, MD 21117	1.00	0.	0.	Ì	0.
	VICE PRESIDEN			<u> </u>	
JANINE FRIER	AICE LKESIDEN	L & SECKE	TARY		
13 ASTON CT	1 00	١ ^	۸ ا	\	^
OWINGS MILLS, MD 21117	1.00	0.	0.	<u> </u>	<u> </u>
		<u> </u>			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(A)		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) EX	opense nt, other
	devoted to position	(0)	compensation	allow	rances
NONE					
		L	_		
		<u> </u>		<u> </u>	
Total number of other employees paid over \$50,000	<u>,</u>		<u> </u>	i	
Total number of other employees paid over quotions		<del></del>	Form	990-PI	
			1 01111	220-P	(2017)

Form 990-PF (2017) THE FRIER FOUNDATION, INC.	82-3	519690 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions.		-

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	1,750,000.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	1,750,000.
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	1,750,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,250.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,723,750.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	9,681.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here   ☐ and do not complete this part )	nd certain	
1	Minimum investment return from Part X, line 6	1	9,681.
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	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	9,681.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,681.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	9,681.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1.1	0
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
	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	<del></del>
3	Amounts set aside for specific charitable projects that satisfy the:		
a	···································	3a	<del></del>
	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
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  Adjusted qualifying distributions Subtract line 5 from line 4	6	0.
6	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		<del></del>
	note. The amount of line of will be used in Fair V, column (u), in subsequent years when calculating whether the foundation	quaimes 10	HIE SECTION

## 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				
2 Undistributed income, if any as of the end of 2017				9,681
a Enter amount for 2016 only				
b Total for prior years			0.	<u> </u>
		0.		
3 Excess distributions carryover, if any, to 2017:				
<b>a</b> From 2012			ļ 	
<b>b</b> From 2013				
c From 2014				
<b>d</b> From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				<u> </u>
Part XII, line 4 ►\$ 0.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior	<del></del>			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	Ì		
d Applied to 2017 distributable amount	<del></del>			<del> </del>
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2017	0.			ļ
(If an amount appears in column (d), the same amount must be shown in column (a) )				0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			ĺ
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			Ī	
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions		_		
e Undistributed income for 2016. Subtract line		0.		
4a from line 2a Taxable amount - see instr				
f Undistributed income for 2017 Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0 601
7 Amounts treated as distributions out of				9,681.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012		·		
not applied on line 5 or line 7	0.		i	
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9				
a Excess from 2013		ŀ	1	
b Excess from 2014		ļ		
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				
23581 01-03-18				

	ER FOUNDATI				19690 Page 10
Part XIV   Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective for	r 2017, enter the date of t	he ruling	<b>&gt;</b>		
<b>b</b> Check box to indicate whether the found	lation is a private operatir	ig foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		J 7
income from Part I or the minimum	"(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for	"				
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,	1			1 1	
line 4 for each year listed				14	
d Amounts included in line 2c not				12	
used directly for active conduct of			,	1	
exempt activities					
e Qualifying distributions made directly			11/		
for active conduct of exempt activities.					
Subtract line 2d from line 2c			<u> </u>		
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</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:				<del> </del>	<del> </del>
(1) Total support other than gross				1	
investment income (Interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income				+	<del>                                     </del>
Part XV   Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5.000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh year (but only if they have contributed n	o have contributed more		ributions received by the	e foundation before the clo	se of any tax
SEE STATEMENT 2	, , ,	, ,, ,,			
b List any managers of the foundation wh			or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	ot.			
NONE					
2 Information Regarding Contribut Check here ► X if the foundation of the foundation makes gifts, grants, etc.,	only makes contributions	to preselected charitable (	organizations and does		uests for funds If
a The name, address, and telephone num					
<b>2</b> 770 1010, 200 000, 212 000, 1010		о розвол во плот цррпо			
b The form in which applications should b	oe submitted and informa	tion and materials they sh	ould include.		
c Any submission deadlines					
d Any restrictions or limitations on award:	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors	
			•		
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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	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient		_ <del>_</del>			
a Paid during the year							
NONE							
•							
Total	T	ī	<b>▶</b> 3a	0.			
<b>b</b> Approved for future payment							
NONE							
Total		•	<b>▶</b> 3b	0.			
	- <del>-</del>			orm <b>990-PF</b> (2017)			

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

Enter gross amounts unless otherwise indicated	Unrelated business income		Exclu	ided by section 512 513 or 514	(e)		
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue	code		code				
a							
b			ļ				
C			ļ <u>.</u>				
d			<u></u>				
e							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments							
4 Dividends and interest from securities			-				
5 Net rental income or (loss) from real estate			_				
a Debt-financed property			1				
b Not debt-financed property			ļ				
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other	1						
than inventory	1						
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
•			}				
-			1				
	<u> </u>						
C	<u> </u>						
d			<del> </del>				
e			-	ļ			
12 Subtotal. Add columns (b), (d), and (e)		0.		0.			
13 Total. Add line 12, columns (b), (d), and (e)				13_	0.		
(See worksheet in line 13 instructions to verify calculations )							
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incor			contri	buted importantly to the accor	nplishment of		
the foundation's exempt purposes (other than t	by providing it	ands for such purposes).					
		· · · · · · · · · · · · · · · · · · ·					
		·					
		· · · · · · · · · · · · · · · · · · ·					
	<del></del>			<del></del>			
		· · · · · · · · · · · · · · · · · · ·					
	·			<del></del>	<del>,</del>		
					·		
723621 01-03-18					Form <b>990-PF</b> (2017)		

Form 990-PF (2		RIER FOU				82-351			ıge 13
Part XVII	Information Re Exempt Organ		nsfers to ar	nd Transactions	and Relations	ships With Noncha	ritable	•	
1 Did the or	rganization directly or indi		of the following	with any other organiz	ation described in se	ction 501(c)		Yes	No
	an section 501(c)(3) organ					ction 50 I(c)		103	140
,	from the reporting found	,	, ,		13.				
(1) Cash	· •	anon to a nonchart	abic excilipt orga	inization of.			10/1)		х
(2) Othe							1a(1)		X
<b>b</b> Other tran							1a(2)		
	•	ble everent ergeniz	ation				45/45		v
	s of assets to a noncharita						1b(1)		X
٠,	hases of assets from a no	•	organization				1b(2)		
• •	al of facilities, equipment,						1b(3)	_	X
	nbursement arrangements						1b(4)		X
• •	is or loan guarantees			_			1b(5)	-	X
	ormance of services or me						1b(6)		X
=	of facilities, equipment, ma	-		•	tat a calla di e		1c	<u> </u>	X
						market value of the goods,		ets,	
				o less than fair market v	value in any transaction	on or sharing arrangement,	snow in		
	d) the value of the goods, (b) Amount involved			exempt organization	T (4) = '-				
(a)Line no	(b) Amount involved	(c) Name (		exempt organization	(U) Descripti	on of transfers, transactions, and	d sharing ar	rangeme	nts
	·		N/A						
<del></del>			<del></del>		<del></del>				
-						<del></del>			
						<u> </u>			
	-	<del></del>		<del>-</del> -					
		-			-				
				<del>-</del>					
					<del></del>				
						<del></del>			
				<del></del>			_		
						<del></del>			
				-					
				<del></del>					
					_				
2a Is the fou	indation directly or indirec	tly affiliated with, or	related to, one of	or more tax-exempt org	anizations described				
	501(c) (other than sectio	•				[	Yes	X	No
	omplete the following sch							-	
	(a) Name of org			(b) Type of organization	on	(c) Description of relation	ship		
	N/A							-	
-									-
	r penalties of perjury, I declare belief it is true correct and cor						ay the IRS o	fiscuss t	his
Sign   👢	A I A	inplete Declaration of p	oreparer (other than	taxpayer) is based on all in	formation of which prepa	rer has any knowledge	turn with th lown below	e prepari	er
Here	Monune	_2		7/23/18	PRESI		X Yes		No
Sig	nature of officer or trustee			Date	Title				
	Print/Type preparer's na	ame	Preparer's sig	nature	Date	Check if PTIN			
	JOEL B. CH	ARKATZ,	V NB	/ MCPA	1.1	self- employed			
Paid	CPA, CVA,		јо <b>р</b> Гв.	CHARKATZ,	17/-2/18		0435		
Preparer	Firm's name ► KAT	Z ABOSCH	ι		1,0	Firm's EIN ▶ 52-1	0037	88	
Use Only				1/					
	Firm's address ▶ 96								
	TI	MONIUM, 1	MD 21093	3 <b>V</b>		Phone no. (410)	828-	643	2

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

**Employer identification number** 

THE FRIER FOUNDATION, INC. 82-3519690 Organization type (check one) Section: Filers of: \_\_\_\_ 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ Caution: An organization that 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 must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990 EZ, or 990 PF)

Name of organization

Employer identification number

THE	FRIER	FOUNDATION,	INC.
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HE F	RIER FOUNDATION, INC.		2-3519690
Part I	Contributors (see instructions) Use duplicate copies of Part I	of additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT & JANINE FRIER  13 ASTON COURT  OWINGS MILLS, MD 21117	\$\$.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-6		\$S_	Person Payroll Noncash (Complete Part II for noncash contributions) m 990. 990-FZ, or 990-PF) (201

**Employer identification number** 

## THE FRIER FOUNDATION, INC.

82-3519690

art II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(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>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

t III	ER FOUNDATION, INC.  Exclusively religious charitable etc. con	tributions to organizations described in s	82-3519690 ection 501(c)(7), (8), or (10) that total more than \$1,000				
	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 exclusively religiou. Use duplicate copies of Part III if addition	is charitable, etc., contributions of \$1 000 or less hal space is needed	for the year (Enter this info once)				
No. m			(d) Description of how gift is held				
ti	(b) Furpose of grit	(c) Use of gift	(d) Description of now girt is need				
<del></del>			_				
-   -							
-							
		(e) Transfer of gift					
l							
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							
-							
No. m t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
_   _							
-		(1) 7					
ļ	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
_							
No.							
m t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_			_				
-			-				
-							
	(e) Transfer of gift						
	Transferee's name, address, a	ind ZIP + 4	Relationship of transferor to transferee				
-	·						
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
t I							
-							
_   _							
-	(a) Tanget and the						
	(e) Transfer of gift						
1	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
			The state of the s				

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	1
NAME OF CONTRIBUTOR	ADDRESS		
ROBERT FRIER	13 ASTON COURT OWINGS MILLS, MD 21117		
JANINE FRIER	13 ASTON COURT OWINGS MILLS, MD 21117		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	2

NAME OF MANAGER

ROBERT FRIER JANINE FRIER