



## **Return of Private Foundation**

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

Employer identification number

Department of the Treasury Internal Revenue Service

Name of 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 calendar year 2017 or tax year beginning 08/01/17, and ending 07/31/18

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图	THE	FRINER FAMILY FOUNDATION, INC	. ,		52	-2206896	•
		street (or P O box number if mail is not delivered to street address)	• Re	oom/suite		phone number (see instruction	s)
		WASHINGTON AVENUE, SUITE 900	-		41	0-494-0100	•
ENVELOPE TRAARK D		, state or province, country, and ZIP or foreign postal code  ON   MD 21204			C If exe	emption application is pending	, check here
<b>&gt;</b> –	TOWS						, [
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2		Final return Amended				oreign organizations meeting 5% test, check here and attact	
		Address change Name cha		- 1//	0.	on test, check here and altau	r computation
H	1	ype of organization X Section 501(c)(3) exempt private		$0 \gamma$		vate foundation status was terr on 507(b)(1)(A), check here	minated under
<b>&amp;</b>			le private foundation				
$\sim$		ket value of all assets at J Accounting method	X Cash Acc	rual '		foundation is in a 60-month to r section 507(b)(1)(B), check h	. [ ]
00	-	ear (from Part II, col (c), Other (specify)	h h h \		under	r section 307(0)(1)(b), check i	lere
- C-175	line 16) <b>Part∖l</b> ்			<u></u>		T	(d) Disbursements
2		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net	for charitable
-Q_		the amounts in column (a) (see instructions) )	books	incon		Income	purposes (cash basis only)
ļ	1	Contributions, gifts, grants, etc , received (attach schedule)	8,481	(SEE STN	(TS#,19)	<b>工作的数据</b>	
	2	Check ► if the foundation is <b>not</b> required to attach Sch B		<b>以在文文</b>			
	3	Interest on savings and temporary cash investments	2		2		
	4	Dividends and interest from securities	816		816		
	5a	Gross rents		117 100 00011 000			RACES ALE
9	b   پ	Net rental income or (loss)	P. S. S. W. E. S.			10.00	
Š	6a	Net gain or (loss) from sale of assets not on line 10	ETS AND AUGUSTICATE PAR CONTRACT CANADOS AN				
oyo d	b   b	Gross sales price for all assets on line 6a					
۵	2 7	Capital gain net income (from Part IV, line 2)		AND THE COMPANY OF TH	0		
	8	Net short-term capital gain	A PROPERTY OF THE PARTY OF THE	(42-51) = 10-4 (40-1)		0	
	9	Income modifications	222	DAYDON ON VI		10.50423.4400.44230.542346.4400.44	
	10a	Gross sales less returns and allowances	Market Comment of the	100 Sept. 100 Se	Tribinity		
	b	Less Cost of goods sold		CO PROGRAM		100 S	
	, c	Gross profit or (loss) (attach schedule)			はかは続いた		
	11	Other income (attach schedule)	0 200		010	0	
_	12	Total. Add lines 1 through 11	9,299		818	U	
C-122018	13	Compensation of officers, directors, trustees, etc	-				
2	15	Other employee salaries and wages Pension plans, employee benefits					· · · · · · · · · · · · · · · · · · ·
<b>∞</b> 2	16a	Legal fees (attach schedule) SEE STMT #1	2,000		2,000		
Final Control	j b	Accounting fees (attach schedule)	2,000		2,000		
Z Z		Other professional fees (attach schedule)		·			<del></del>
		Interest				<del></del>	<del></del>
	18	Taxes (attach schedule) (see instructions) STMT_#1	11				· · · · · · · · · · · · · · · · · · ·
<u> Le jo</u>	19	Depreciation (attach schedule) and depletionED					
S	20	Occupancy RECEIVED 7					A. A. A. STATE OF THE PARTY OF
₹	21	Travel conferences and meetings					
S	22	Printing and publication OCT 2 3 2018   0					
3	23	Other expenses (att sch.)	•				
SCANNED O	24	Total operating and aक्नांगिद्धिकिं experises.					
7	3	Add lines 13 through 23	2,011		2,000	0	0
Ž	25	Contributions, gifts, grants paid	0	なれる	<u> </u>	1777 次 经营销	0
_	26	Total expenses and disbursements. Add lines 24 and 25	2,011		2,000	0	0
	27	Subtract line 26 from line 12	"表示不管的不会是			A	
	a	Excess of revenue over expenses and disbursements	7,288		<u>. '</u>	14 E. S.	
	b	Net investment income (if negative, enter -0-)	And the second		0	18. 3	
	c	Adjusted net income (if negative, enter -0-)	Elmont of the	L		0	11 21 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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Total liabilities (describe ►  23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  31 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)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  6 20,637	es		· ·	·			
Total liabilities (describe ►  23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  31 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)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  6 20,637	=						
Total liabilities (describe ►  23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  31 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)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  6 20,637	ap		•				
Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted  Temporarily restricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds  Read and complete lines 27 through 31.  Total net assets or fund balances (see instructions)  Total net assets or fund balances (see instructions)  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)  Enter amount from Part I, line 27a  Total net assets or fund balances (itemize)   Add lines 1, 2, and 3  Decreases not included in line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  Enter amount from Part I, line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  Enter amount from Part I, line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  Enter amount from Part I, line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  Enter amount from Part I, line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	긔	22		)	-	-	
and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances (see instructions) 32 Paid-iiii Analysis of Changes in Net Assets or Fund Balances 4 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) 4 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5) − Part II, column (b), line 30 6 20,637		23		,	0	0	
and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances (see instructions) 32 Paid-iiii Analysis of Changes in Net Assets or Fund Balances 4 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) 4 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5) − Part II, column (b), line 30 6 20,637	٦			<b>▶</b> : ☐			
Total net assets or fund balances (see instructions)  13,349  20,637	g						
Total net assets or fund balances (see instructions)  13,349  20,637	낅	24	Unrestricted		•		
Total net assets or fund balances (see instructions)  13,349  20,637	癝	25	Temporarily restricted				
Total net assets or fund balances (see instructions)  13,349  20,637	۵	26	Permanently restricted		•		
Total net assets or fund balances (see instructions)  13,349  20,637	튁		Foundations that do not follow SFAS 117, check here	►   <b>X</b> .			in the second
Total net assets or fund balances (see instructions)  13,349  20,637	딘		and complete lines 27 through 31.			•	
Total net assets or fund balances (see instructions)  13,349  20,637	0	27	Capital stock, trust principal, or current funds		13,349	20,637	
Total net assets or fund balances (see instructions)  13,349  20,637	š	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Total net assets or fund balances (see instructions)  13,349  20,637	Asi	29	Retained earnings, accumulated income, endowment, or other funds		-		
Instructions)  13,349  20,637  Rantill Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 13,349  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)   4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)   5 Total net assets or fund balances at end of year (line 4 minus line 5) − Part II, column (b), line 30  6 20,637	e	30	Total net assets or fund balances (see instructions)		13,349	20,637	
Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  6 20,637	z	31	Total liabilities and net assets/fund balances (see				
1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  6 20,637		rae a ar			13,349	20,637	
end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  1 13,349  2 7,288  3 2  4 20,637	_						·
2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  2 7, 288  3 4 20, 637	1			0 (must	agree with		
3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  3						1_1_	
4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  4 20,637  5 5  6 20,637			·			2	7,288
5 Decreases not included in line 2 (itemize) ►			• • •			3	·
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 20,637							20,637
			·		•	<del>                                     </del>	<del></del>
	6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, col	umn (b)	, line 30		

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

8 Enter qualifying distributions from Part XII, line 4

DAA

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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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)

Form 990-PF (2017)

3b

4a

4b

N/A

orm	990-PF (2017) THE FRINER FAM	MILY FOUNDATION, I	NC. 52-2	2206896			Page 6
Pa	art VII-B. Statements Regarding	<b>Activities for Which Form</b>	4720 May Be F	Required (cont	tinued)		
5a	During the year did the foundation pay or inc	ur any amount to					
	(1) Carry on propaganda, or otherwise atten	npt to influence legislation (section 4	1945(e))?		Yes $\overline{X}$ No		
	(2) Influence the outcome of any specific pu	blic election (see section 4955), or t	to carry on,		_		
	directly or indirectly, any voter registratio	n drive?		<u> </u>	Yes X No		
	(3) Provide a grant to an individual for travel	, study, or other similar purposes?		□,	Yes X No		
	(4) Provide a grant to an organization other	than a charitable, etc , organization	described in		_		ĺ
	section 4945(d)(4)(A)? See instructions			<u> </u>	res X No	`	
	(5) Provide for any purpose other than religi	ous, charitable, scientific, literary, or	r educational	_			
	purposes, or for the prevention of cruelty	to children or animals?			res X No	•	
b	If any answer is "Yes" to 5a(1)–(5), did any o			escribed in	1-	1	'
	Regulations section 53 4945 or in a current r				N/A	5b	
	Organizations relying on a current notice reg				▶ 🗀		
С	If the answer is "Yes" to question 5a(4), does		m the tax	/-	_		(
	because it maintained expenditure responsib	•		N/A 🗌 🔻	∕es ∐ No		,
	If "Yes," attach the statement required by Reg					İ	
6a	Did the foundation, during the year, receive a	iny funds, directly or indirectly, to pa	y premiums		. 🖘		
	on a personal benefit contract?				res X No		
b	Did the foundation, during the year, pay prem	niums, directly or indirectly, on a per	sonal benefit contra	ict?		6b	X
_	If "Yes" to 6b, file Form 8870			С.	, <del>.</del>	1	
	At any time during the tax year, was the found	· • •		_	res X No N/A		1
	If "Yes," did the foundation receive any proce art VIII Information About Office	ers, Directors, Trustees, Fo		•		7b	
_га	and Contractors	ers, Directors, Trustees, Pt	Junuation Wall	agers, mgmy	raid Ellipioyi	ee5,	
1 1	ist all officers, directors, trustees, and fou	ndation managers and their com	nensation See in	structions			
					(d) Contributions to	·	
	(a) Name and addres	SS .	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense account,
	(,,		devoted to position	enter -0-)	plans and deferred compensation	other	allowances
BA	RRY FRINER	PIKESVILLE	PRESIDENT				
	WINDSONG COURT	MD 21208	0.10	۰ ا	0		0
	CHARD FRINER	PIKESVILLE	VICE-PRES.				
16	HURDLE FORD COURT	MD 21209	0.10	0	o		0
I.	LORRAINE FRINER	PIKESVILLE	TREASURER				
13	WINDSONG COURT	MD 21208	0.10	o	0		0
LO	UIS F. FRIEDMAN	TOWSON	SECRETARY				
40	9 WASHINGTON AVENUE, #900	MD 21204	0.40	0	0		0
2	Compensation of five highest-paid emplo "NONE."	yees (other than those included	on line 1 – see ins	tructions). If non	e, enter		
			(b) Title, and average		(d) Contributions to		
	(a) Name and address of each employee paid in	nore than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense account, allowances
			devoted to position		compensation	-	
NO	NE						
			1				
			1				
			<del> </del>				
			<u> </u>	L			
otai	number of other employees paid over \$50,00	U				L	0

Form 990-PF (2017) THE FRINER FAMILY FOUNDAT	ION, INC.	52-2206896	Page <b>7</b>
Part VIII Information About Officers, Directors, Tru	ustees, Foundatio	on Managers, Highly Paid E	
and Contractors (continued)	<del> </del>		
3 Five highest-paid independent contractors for professional se			
(a) Name and address of each person paid more than \$50,0	300	(b) Type of service	(c) Compensation
NONE			
Total number of althous seconds over \$50,000 for restorational popular			
Total number of others receiving over \$50,000 for professional services		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant organizations and other beneficiaries served, conferences convened, research papers produce		s the number of	Expenses
1 N/A			
		<del></del> .	
2			
3	<del> </del>		<u> </u>
j			
4			
Right Had Control of Control			
Rant X B Summary of Program-Related Investme		ns)	1
Describe the two largest program-related investments made by the foundation during the tax yet 1 N/A	ear on lines 1 and 2		Amount
N/A		•	
2			
All other program-related investments. See instructions			
3			
Total. Add lines 1 through 3		<b>—</b>	
rotain riod inico i tinough o			<u> </u>

Form 990-PF (2017)

	int XIII Undistributed Income (see instruc	tions)			
40 200		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7		<b>学</b> 以247622000		2,811
2	Undistributed income, if any, as of the end of 2017			THE RESERVE	
а	Enter amount for 2016 only		TO THE PARTY OF	SCI JAN MINER AND THE THE SCI	
b	Total for prior years 20 , 20 , 20		Le a protes a protes and oppose to the		
3	Excess distributions carryover, if any, to 2017				
а	From 2012				
b	From 2013 23	956			
С	From 2014				
d					
е	From 2016				
f	Total of lines 3a through e	23,956	177-615-077-1980-1886		
4	Qualifying distributions for 2017 from Part XII,				
	line 4 <b>\</b> \$				
	Applied to 2016, but not more than line 2a				
D	Applied to undistributed income of prior years (Election required – see instructions)				
_	Treated as distributions out of corpus (Election	SECRETARIAN SALAMAN SALAMAN SALAMAN SA	VANAGE AND AND AND AND AND AND AND AND AND AND		
·	required – see instructions)				
ч	Applied to 2017 distributable amount				DARGONIC DARNER CO. MAIN STREET, ALCOHOLOGY
	Remaining amount distributed out of corpus	Conditional properties and an action of the second	500000000000000000000000000000000000000	Z-10 Z-10 Z-10 Z-10 Z-10 Z-10 Z-10 Z-10	
5	Excess distributions carryover applied to 2017	2,811			2,811
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	indicated below.				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	21,145			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2016 Subtract line				1
	4a from line 2a Taxable amount – see				
	Instructions Undistributed income for 2017 Subtract lines		24.00 (1.00		CERTAINS AND VINCONS AND AND AND
•	4d and 5 from line 1. This amount must be				
	distributed in 2018				o
7 .	Amounts treated as distributions out of corpus	with a national material water (8 x 90 - 6 into			
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	21,145	<b>建筑和3000</b> 000000000000000000000000000000000	<b>《八字》《</b>	
10	Analysis of line 9				
а	Excess from 2013	145			
b	Excess from 2014				
С	Excess from 2015				
đ	Excess from 2016				
е	Excess from 2017	12.0 2 5 (4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	いた。またをも たんごう		<b>公司,他们是这个人的</b>

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year N/A Total ▶ 3a b Approved for future payment N/A ▶ 3b Total

Part XVI-	A . Analysis of Income-Producing A	ctivities				
Enter gross an	nounts unless otherwise indicated	Unrelati	ed business income	Exclude	d by section 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt
		Business code	Amount	Exclusion code	Amount	function income (See instructions)
•	ervice revenue	-				
a		-				<del></del>
		-				
		_				<u>-</u>
		_		+		
f		-		+		
-	and contracts from government agencies	-				
•	up dues and assessments	-				
	savings and temporary cash investments			14	2	
	and interest from securities		-	14	816	
	income or (loss) from real estate	F &	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		Representation of the	
	nanced property	- 0 K FI 60		347 321	202 2 2 3	
	bt-financed property					
	income or (loss) from personal property					
	stment income					
	ss) from sales of assets other than inventory					
	e or (loss) from special events					
	it or (loss) from sales of inventory					
	nue a					
b						
c					***	
е						
12 Subtotal A	add columns (b), (d), and (e)		(	() () ()	818	0
13 Total Add	line 12, columns (b), (d), and (e)				13	818
	et in line 13 instructions to verify calculations )					
Part XVI-	Relationship of Activities to the	Accomplishm	ent of Exempt P	urpose	s	
Line No.	Explain below how each activity for which incom					
<u>▼</u>	accomplishment of the foundation's exempt pur	poses (other than	by providing funds for	such pur	poses) (See instruction	is)
N/A	<del> </del>					
			<u> </u>			
				<del>.</del> .	<del></del>	
			····	<del></del>		
		· · · · · · · · · · · · · · · · · · ·				
	-	<del>-</del>		<u> </u>		<del></del>
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						· · ·
<del>-</del>	<u> </u>					
	<del></del>					
	<del> </del>					
					<u> </u>	

	0-PF (2017)			TTI FOOND			-2206896			Pag	ge 13
Part		ormation Reg empt Organiz		ansfers To an	nd Transactio	ns and Rela	ationships Wi	ith Nonch	aritable		
1 Di		ation directly or ind		e in any of the foll	lowing with any of	her organizatio	n described		27.2	Yes	No
		) (other than section			-	_			(2, 4)		7
	ganizations?		,	-					-  -		,
		he reporting found	lation to a no	ncharitable exemp	ot organization of				300 000	,57,	
(1	) Cash								1a(1)		X
(2	) Other asset	s							1a(2)		X
b Ot	her transactio	ons								` <u>`</u> ,,	لائت
(1	) Sales of ass	sets to a noncharita	able exempt	organization					1b(1)		Х
(2	) Purchases o	of assets from a no	ncharitable	exempt organization	on				1b(2)		X
(3)	Rental of fa	cilities, equipment,	or other ass	sets					1b(3)	<b> </b>	X
		nent arrangements	5						1b(4)	<b></b>	X
		an guarantees							1b(5)	$\vdash$	X
		e of services or me	-	•					1b(6)	<del></del>	X
	-	ties, equipment, ma	•	•					1c		X
		any of the above is		=			-				
	=	ds, other assets, o	_		-						
		nsaction or sharing (b) Amount involved	1	e of noncharitable exem			scription of transfers, tra		haring arrangeme	nis	
N/A		(1)	(-,			(4) 50		arisactions, and s	Training circungcinic		
(				<del></del>				· · · ·			
					*****						
					-						
		•									
								<u></u>			
					-						
		·									
				<u> </u>							
									<del></del>		
	<del></del>	•									
2a ls	the foundation	n directly or indirect	l tly affiliated i	with or related to	one or more tay-	vemot organiz	ations				
		tion 501(c) (other t	-			xempt organize	3110113		☐ Ye	. X	No
		te the following sch								٠ ==	
		me of organization		(b) Type of o	organization		(c) Descrip	tion of relationshi	ip		
N/.	A							·			
			·								
						***************************************					
				<u></u>							
		of perjury, I declare that inplete Declaration of pr						knowledge and b	elief, it is true,		
			,				,		IRS discuss this re		l
Sign				,				See inst	preparer shown bel	_	- No
Here			44	rudinar	1 /-	117/18	۸				
	<u></u>	vaue.	8 7	manier	<del></del>	111118		ETARY	<del> </del>		
	T	of officer or trustee	<u> </u>		Date		Title				
	Print/Type pri	eparer's name			Preparer's signature	11			Date	Check	ıf
Paid	LOUIS	POTERMAN			Tree.	HIM	Levan		10/11/5	self-emp	oloyed
Prepare	LOUIS F	ED TED	MAN £	FRIEDMAN	LLP	- 1/100		OTIE	P00282	410	
Use Onl	Firm s name Firm s addres			TON AVENU		900		PTIN Firm s EIN ▶	52-081		
	addres		N, MD	21204	,		ł	Phone no	410-49		
	<u> </u>										

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Name of the organization

Employer identification number

THE FRINER	FAMILY FOUNDATION, INC.	52-2206896
Organization type (chec	k one)	
Filers of.	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	undation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundar	ation
	501(c)(3) taxable private foundation	
· · ·	n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and	d a Special Rule See
General Rule		
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contribut	itions totaling \$5,000
	y or property) from any one contributor. Complete Parts I and II. See instruction	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /s sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 nd that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1.0	or 990-EZ), Part II, line of the greater of <b>(1)</b>
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that register, total contributions of more than \$1,000 exclusively for religious, choonal purposes, or for the prevention of cruelty to children or animals. Comple	naritable, scientific,
contributor, during contributions total during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that replace the year, contributions exclusively for religious, charitable, etc., purposes, but ed more than \$1,000. If this box is checked, enter here the total contributions or an exclusively religious, charitable, etc., purpose. Don't complete any of the oblies to this organization because it received nonexclusively religious, charitation more during the year.	ut no such s that were received parts unless the
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file Simust answer "No" on Part IV, line 2, of its Form 990, or check the box on line	e H of its Form 990-EZ or on its

Name of organization

THE FRINER FAMILY FOUNDATION, INC.

Employer identification number 52-2206896

Contributors (see instructions) Use duplicate copies of Part I if additional space is needed ∘ Part≀l*~*∵ (a) No. Name, address, and ZIP + 4 Type of contribution **Total contributions** 1 BARRY & I. LORRAINE FRINER Person 13 WINDSONG COURT Payroll 3,000 Noncash PIKESVILLE MD 21208 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 BARRY & I. LORRAINE FRINER Person 13 WINDSONG COURT Payroll 5,481 \$ Noncash PIKESVILLE MD 21208 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

PAGE 1 OF 1

age 3

Name of organization
THE FRINER FAMILY FOUNDATION, INC.

Employer identification number 52-2206896

Part II	Noncash Property (see instructions) Use duplicate	copies o	of Part II if additional spa	ce is needed
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) See instructions.)	(d) Date received
2	SECURITIES-SEE ATTACHED STMT #1			
		\$	7,740	12/26/17
(a) No. from Part I	(b) Description of noncash property given	1	(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	ı	(c) FMV (or estimate) See instructions.)	(d) Date received
		\$		
a) No from Part I	(b)  Description of noncash property given		(c) MV (or estimate) See instructions.)	(d) Date received
		\$		
a) No from Part I	(b) Description of noncash property given		(c) MV (or estimate) See instructions.)	(d) Date received
		\$		

THE FRINER FAMILY FOUNDATION, INC. 52-2206896 FOR THE YEAR ENDED JULY 31, 2018 2017 FORM 990-PF

SUPPORTING SCHEDULE				
PAGE 1, PART I, LINE 1 - CONTRIBUTIONS				COL (a) BOOK VALUE
SCHEDULE B, ITEM #1: BARRY FRINER & I. LORRAINE FRINER - CASH				3,000.00
SCHEDULE B, ITEM #2: BARRY FRINER & I. LORRAINE - SECURITIES				
SHARES/PAR DESCRIPTION VALUE	DATE OF TRANSFER	FAIR MARKET VALUE	BOOK VALUE	
50.000 MOTORS LIQ. CO. GUC TRUST 314.266 DIAMOND HILL LONG-SHORT FUND	12/26/17 12/26/17	477.75 7,262.69	0.00 5,480.70	
TOTAL SCHEDULE B, ITEM #2		7,740.44	-	5,480.70
TOTAL PAGE 1, PART I, LINE 1				8,480.70
PAGE 1, PART I, LINE 16a - LEGAL FEES	•		COL (a)	COL (p)
FRIEDMAN & FRIEDMAN, LLP - LEGAL FEES			2,000.00	2,000.00
TOTAL LEGAL FEES	`		2,000.00	2,000.00
PAGE 1, PART I, LINE 18 - TAXES			COL (a)	COL (p)
U.S. TREASURY - 2016 FORM 990-PF (FYE 7/31	/17)		11.00	0.00

11.00 0.00

TOTAL TAXES

## Friner Family Foundation, Inc., E.I.N.: 52-2206896 For the Year Ended 07/31/2018 Form 990-PF, Page 2, Part II - Corporate Stock/Mutual Funds

# of Shares	<u>Description</u>	Book Value	Fair Market Value
•	Bank of America Corporation Motors Liquidation Company GUC Trust	12,474.11 0 00	52,496 00 493 00
	·	12,474.11	52,989.00
Mutual Funds 314 266	Diamond Hill Long-Short Fund, CI C	5,480.70	7,316.11
		17,954.81	60,305.11