DEC

Internal Revenue Service

Return of Private Foundation

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

OMB No 1545-0052

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 2018 or tax year beginning and ending Employer identification number Name of foundation 33-1030746 MEDCARE FOUNDATION, INC. Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) 301-498-2500 13631 BALTIMORE AVENUE City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here LAUREL MD 20707 G Check all that apply Initial return of a former public charity Initial return 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the Address change Name change 85% test, check here and attach computation H Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at J · Accounting method X Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 383,355 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Rart Analysis of Revenue and Expenses (The total of (c) Adjusted net (b) Net investment for charitable amounts in columns (b), (c), and (d) may not necessarily equal income income purposes the amounts in column (a) (see instructions)) books (cash basis only) **第23个为第四次的** 的的特別的學家。大名前 1 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ X if the foundation is **not** required to attach Sch B 2 Interest on savings and temporary cash investments 3 Dividends and interest from securities er aleman 5a Gross rents Net rental income or (loss) ibite oraștică de Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a 2014年6年4月21日 Capital gain net income (from Part IV, line 2) 7 表的對於學性學的 為中國體驗。用:這 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances **建**设计划第一战码 **说,可能是心态的意** b Less Cost of goods sold Gross profit or (loss) (allach schedule) VED C 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 0 13 Operating and Administrative Expenses Other employee salaries and wages 14 Pension plans, employee benefits DEN 15 16a Legal fees (attach schedule) STMT 1 240 Accounting fees (attach schedule) Other professional fees (attach schedule) С 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (att sch) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 240 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 -240 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF**

7.5	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
	ganoi	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
٦	1	Cash – non-interest-bearing	383,355	383,355	383,355
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	Policy Control of the		
		Less allowance for doubtful accounts			
-	4	Pledges receivable ▶	37.20.20.20.20.20.20.20.20.20.20.20.20.20.		
		Less allowance for doubtful accounts ▶			,
	5	Grants receivable	,		
	6	Receivables due from officers, directors, trustees, and other	, .		
٠		disqualified persons (attach schedule) (see			
		instructions)	,		
	7	Other notes and loans receivable (att schedule)	45.4	336779779	7133776
		Less allowance for doubtful accounts ▶ 0			,
s	8	Inventories for sale or use		•	
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule)			
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			V/81/2016
		Less accumulated depreciation (attach sch.)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶		300	
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶			
	16	Total assets (to be completed by all filers – see the			
ı		instructions. Also, see page 1, item I)	383,355	383,355	383,355
٦	17	Accounts payable and accrued expenses			建 解中枢扩张 23
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
≔	22	Other liabilities (describe ► SEE STATEMENT 2	1,660	1,900	
	23	Total liabilities (add lines 17 through 22)	1,660	1,900	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26, and lines 30 and 31.			
	24	Unrestricted		,	
lai	25	Temporarily restricted			
ä	26	Permanently restricted			
P		Foundations that do not follow SFAS 117, check here			
ī		and complete lines 27 through 31.		ļ ,	
Net Assets or Fund Balance	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
\ss	29	Retained earnings, accumulated income, endowment, or other funds	. 381,695	381,455	
et /	30	Total net assets or fund balances (see instructions)	381,695	381,455	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	383,355	383,355	
	Part I			7	
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30 (mu	ist agree with		
	end-	of-year figure reported on prior year's return)		1	381,695
2	Ente	amount from Part I, line 27a		2	-240
3	Othe	r increases not included in line 2 (itemize) ▶		3_	
		ines 1, 2, and 3		4	381,455
		eases not included in line 2 (itemize)		5	201 15-
_6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		381,455

Part IV Capital Gains a	and Losses for Tax on Investme	ent Income				
	e the kind(s) of property sold (for example, real estate, warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date acqu (mo , day,)		(d) Date sold (mo , day, yr)
1a N/A						
b						
С						
d						
<u>e</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale	(((h) Gain e) plus (f)	or (foss) minus (g))
_a						
b						
С						
d						
Complete only for coasts above	as some solumn (h) and owned by the fo	undation on 12/21/60	<u> </u>			
Complete only for assets snowin	ng gain in column (h) and owned by the fo	1		1		(h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			less than -0-) or om col (h))
<u>a</u>				ļ		
b						
_ c						
d						
е		<u> </u>				
2 Capital gain net income or (net o	capital loss) If gain, also enter in If (loss), enter -0- in	.		2	<u> </u>	
	oss) as defined in sections 1222(5) and (6 3, column (c) See instructions If (loss), er	_				
Part I, line 8				3		
	Inder Section 4940(e) for Reduc			ome		
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on net investr	nent income)			
If section 4940(d)(2) applies, leave t	his part blank					N/A
Was the foundation liable for the sec	ction 4942 tax on the distributable amoun	t of any year in the ba	ase period?			☐ Yes ☐ No
	ify under section 4940(e) Do not complete					
	each column for each year, see the instru		g any entries			
(a)	(b)		(c)		_	(d)
Base period years Calendar year (or tax year beginning)	Advicted avaliture distributions	s Net value	e of noncharitable-use asse	ets		ribution ratio fivided by col. (c))
2017						
2016						
2015						
2014					,	<u></u>
2013						
2 Total of line 1, column (d)				2		
_	e 5-year base period – divide the total on I					
the number of years the foundat	tion has been in existence if less than 5 ye	ears		3		
4 Enter the net value of noncharite	able-use assets for 2018 from Part X, line	5		4		
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		
8 Enter qualifying distributions from				8		
If line 8 is equal to or greater that Part VI instructions	an line 7, check the box in Part VI, line 1b	, and complete that p	art using a 1% tax ra	te See the		

2	2	_1	_	2	\sim	7	л	c	

Page	4

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions					.gc •
_	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1	44,775	TO SEE	280KZ		
ıα	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	Y			TO MARK	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	AND AND ADDRESS OF THE PARTY OF	, <u>Sa_kidi</u> ni_is_		dational
D	here and enter 1% of Part I, line 27b	4 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	34	Marke.		1444 1444
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		5.0			
·	Part I, line 12, col (b)	***********	STREET, STREET	(32000000000000000000000000000000000000	i din sa din	استنفسا
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2				0
3	Add lines 1 and 2	. 3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0
6	Credits/Payments	A		J. C. 16	· 100	\$27.00
а	2018 estimated tax payments and 2017 overpayment credited to 2018	3 A (2)				
b	Exempt foreign organizations – tax withheld at source 6b					
c	Tax paid with application for extension of time to file (Form 8868) 6c	3.36%				
ď	Backup withholding erroneously withheld 6d	360				
7	Total credits and payments Add lines 6a through 6d	7	A STATE OF THE PARTY OF THE PAR	and designated and designated the latest terminal termina		ationii in
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2019 estimated tax. ▶ Refunded ▶	11	i			
	rtVII-A Statements Regarding Activities		•	1		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-			Yes	No
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition		,	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				自然	
	published or distributed by the foundation in connection with the activities			3 3		
С	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				, 1 A	
	on foundation managers \$				1967	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3 (Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		/-	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	, Terrestore	X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			197 (48)		
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		N/A			267 2074
_	conflict with the state law remain in the governing instrument?		N/A	7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part	^ V		******	2258	·
8a	Enter the states to which the foundation reports or with which it is registered. See instructions MD					
L						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			8b	X	
O	(or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					85.1
9	4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Part XIV. If "Yes,"			الاستثنيد		أستحنث
	complete Part XIV			9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			10		X

Pa	Statements Regarding Activities (continued)					
		_			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				_	
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement. See instructions			12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	
	Website address ► N/A					
14	The books are in care of MUHAMMAD YUSUF	phone no 🕨	301-4	98-	250	0
	13631 BALTIMORE AVENUE			,		
	Located at ▶ LAUREL . MD	ZIP+4 ▶	20707	7		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here					▶ □
	and enter the amount of tax-exempt interest received or accrued during the year	▶	15			_
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	_			Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
•	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			, <u>***</u>	- 1827	\$300 m
	the foreign country			14.3	Para A	
₿Pa	Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year, did the foundation (either directly or indirectly)			35,00		数学
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			55.8
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			No.	5.1	
	disqualified person?	Yes	X No	MAX.		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	477		3:3
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_	_		1032	
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_				
	foundation agreed to make a grant to or to employ the official for a period after			1		
	termination of government service, if terminating within 90 days)	Yes	X No	20.00		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons		المنتقلة المنتقلة	<u> </u>	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here		▶ 🗌	4.36.00		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			111111111111111111111111111111111111111	<u> Ame</u>	E
•	were not corrected before the first day of the tax year beginning in 2018?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	_	_	3.3	1.000	
	6e; Part XIII) for tax year(s) beginning before 2018?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	•				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			Water Company		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		/-	35.2. 15.4	100	
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b	450 25 And	() 7(m 4
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				23	NO.
,	at any time during the year?	Yes	X No		rii.	
b	If "Yes," did it have excess business holdings in 2018 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				125	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		/-	<u> </u>	22	
	foundation had excess business holdings in 2018)		N/A	3b_		-
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	57		4a	25.6. 36.5	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			334.5	2000 PM	لتنتقأ
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20)18?	_	4b	<u> </u>	<u> </u>
			1	Form 9 9	JU-PI	(2018)

<u>Forn</u>	n 990-PF (2018) MEDCARE FOU	NDATION, INC.	33-1	.030/46		P	age t
P	art VII-B Statements Regard	ding Activities for Which f	Form 4720 May Be R	equired (cont	inued)		
5a	During the year did the foundation pay	or incur any amount to		_	_	Yes Yes	No
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (se	ection 4945(e))?		res 🗓 No		14.3
	(2) Influence the outcome of any specif	iic public election (see section 495	5), or to carry on,				
	directly or indirectly, any voter regis	tration drive?		'	res 🔀 No		f', ^,
	(3) Provide a grant to an individual for	travel, study, or other similar purpo	oses?	[] ·	res 🛚 X No		, , ,
	(4) Provide a grant to an organization of	other than a charitable, etc., organ	zation described in		<u></u>		
	section 4945(d)(4)(A)? See instruct			□,	res 🗓 No		
	(5) Provide for any purpose other than	•	rary, or educational				2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	purposes, or for the prevention of c	•			res 🗓 No	建设接 线	1 YV
b	If any answer is "Yes" to 5a(1)–(5), did			scribed in	37 /3	المنت المنت	
	Regulations section 53 4945 or in a cur		•		N/A	5b	ļ
	Organizations relying on a current notic				▶ 📙		K 3.
С	If the answer is "Yes" to question 5a(4),	·	tion from the tax	37/3	. 🗀		5.7
	because it maintained expenditure resp			N/A 🗌	res 📙 No		
	If "Yes," attach the statement required b		•				312 8
6a	, , ,	eive any funds, directly or indirectly	y, to pay premiums		, ,		e
	on a personal benefit contract?				res X No	غستنا المناهب	X
b	Did the foundation, during the year, pay	premiums, directly or indirectly, o	n a personai benetit contra	Ct /	•	6b	Service A
_	If "Yes" to 6b, file Form 8870	formed above a market and analysis and		\Box	res X No		
7a	, , , , ,			_	res X No N/A	78-74- 2004 ·	
ь	If "Yes," did the foundation receive any	· ·		on /	N/A	7b 小瀬 (シャ)	
8	Is the foundation subject to the section	, .	ian \$1,000,000 in		Yes X No		F /,
₩D.	remuneration or excess parachute payr	Officers, Directors, Trusted	es Foundation Mana	<u></u>		, , <u> </u>	1 2 7
	and Contractors	filecis, Directors, Trustee	co, i ouridation mand	agers, riiginiy	i did Employ	,,	
1	List all officers, directors, trustees, an	d foundation managers and the	ir compensation. See ins	structions.			
					(d) Contributions to		
	(a) Name and	d address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit	(e) Expense a other allowa	
			devoted to position	enter -0-)	plans and deferred compensation	Other allowa	inces
M	UHAMMAD YUSUF	LAUREL	PRESIDENT				
13	3631 BALTIMORE AVENUE	MD 20707	0.00	c	0		C
-	,						
	•		,				
					<u> </u>		
2	Compensation of five highest-paid e	mployees (other than those inc	luded on line 1 - see inst	tructions). If nor	ie, enter		
	"NONE."			 -			
			(b) Title, and average		(d) Contributions to employee benefit	(e) Expense a	ccount
	(a) Name and address of each employed	e paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other allows	
			40100010 pooliio	<u> </u>	compensation		
N	ONE						
	· · · · · · · · · · · · · · · · · · ·					 	
				-			
, 						 	
					 	 	
						 	
Tota	al number of other employees paid over \$	50.000	l	<u> </u>	1		- 0
100	ar mamber of other employees haid over a	00 ₁ 000				1	_

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Part VIII Information About Officers, Directors, Trustees, I and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services. Se	e instructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
		<u>-</u> .
otal number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inforganizations and other beneficiaries served, conferences convened, research papers produced, etc.	formation such as the number of	Expenses
1 N/A		
2	·-	
•		
3		
4		
Part IX-B Summary of Program-Related Investments (see	unstructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1		Amount
1 N/A		Anoun
2		
All other program-related investments See instructions		
3		

Form **990-PF** (2018)

Total Add lines 1 through 3

Forn	1990-PF (2018) MEDCARE FOUNDATION, INC. 33-1030746		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fou	indations,
	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	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation))	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	found	dations
	and certain foreign organizations, check here ▶ ☐ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	·
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018 (This does not include the tax from Part VI)]	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	-

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Enter 1% of Part I, line 27b See instructions

Adjusted qualifying distributions Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2018)

5

0

0

6

	990-PF (2018) MEDCARE FOUNDATION		33-10307	746	Page 9
Pa	irt XIII Undistributed Income (see inst		· _ · _ · _	 	
	D. I. Ashle assessed for 2040 from Bod VI	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI,	ESCHARIZATE ET	C Property Control Control	2011	, 2010
•	line 7 Undistributed income, if any, as of the end of 2018				
2 a				3 CO SEC. 10 CO SEC. 1	
a b	Total for prior years 20 , 20 , 20 , 20	A STATE OF THE STA	12. THE 22 HAP CALEND MAKE CONTROL OF THE		
3	Excess distributions carryover, if any, to 2018				
а					and the second
b	From 2014				
c	From 2015				
ď					
	From 2017				
	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII,		1 3 7 5 6 6 6 6		
	line 4 ▶ \$				
а	Applied to 2017, but not more than line 2a				
b	Applied to undistributed income of prior years		% 2		
	(Election required – see instructions)				25
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
· d	Applied to 2018 distributable amount				`
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018	,			**************************************
	(If an amount appears in column (d), the same				
1	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
	•	No Calabara Production No. Calabara			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b	100 A			46
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)		4	4 1 1 1	
	tax has been previously assessed	Washington Co.	** 	A CONTRACT	
٠ d	Subtract line 6c from line 6b Taxable				
	amount – see instructions	**************************************	ia seeri ili combine	A COMPANY DESIGNATION OF A CONTROL OF A CONT	43.43
е	Undistributed income for 2017 Subtract line				48.0
	4a from line 2a Taxable amount – see		To Section 1	Į.	100
f	Instructions Undistributed income for 2018 Subtract lines	The state of the s			Section 5. Action 1.
'	4d and 5 from line 1. This amount must be				
,	distributed in 2019				i o
7	Amounts treated as distributions out of corpus		C. Marine Commission		
•	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 2013 not		The state of the s	77.	
-	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.		等的是一种的		
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				18.0
а	Excess from 2014				
b	Excess from 2015				
С	Excess from 2016				
d	Excess from 2017				
_	Evenes from 2018		gal Carlo		

MEDC Form	R 1990-PF (2018) MEDCARE FOUN	DATION, INC	C .	33-1030	746	Page 1 (
-	art XIV Private Operating Fou			rt VII-A, question 9	9)	
1a						
	foundation, and the ruling is effective for	2018, enter the date o	of the ruling	•		
b	Check box to indicate whether the founda	ition is a private opera	ating foundation descri	bed in section 4	1942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for			}		
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities	•				
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
-	alternative test relied upon					
а	"Assets" alternative test – enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3	-				
-	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test – enter				<u> </u>	1
-	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					ļ
	(2) Support from general public					
	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					
Pa	art XV Supplementary Inform	nation (Complet	e this part only it	the foundation I	nad \$5,000 or mor	e in assets at
k	any time during the y				• •	
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who	=	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only				-	
	N/A	•			,	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	on (or an equally large	portion of the	
	ownership of a partnership or other entity					
	N/A		ŭ			
2	Information Regarding Contribution, (Grant, Gift, Loan, Sc	holarship, etc., Prog	rams:		
	<u> </u>		-	ble organizations and o	does not accept	
	unsolicited requests for funds. If the foun					
	complete items 2a, b, c, and d See instru			•		
	The name, address, and telephone numb		f the person to whom	applications should be	addressed	
	N/A		·			
	•					
b	The form in which applications should be	submitted and inform	ation and materials th	ey should include		
	N/A					
С	Any submission deadlines					
	N/A					
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kinds of institution	ns, or other	
	factors					
	N/A					

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

* 5 4 20 4 2		•4•				ago :=
	Analysis of Income-Producing Acti	Ι΄		I = : :		
Enter gross amo	unts unless otherwise indicated	Unrelate	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)
1 Program ser	vice revenue					
a						
b						
c						
d						
e						
f			<u> </u>			
g Fees an	d contracts from government agencies			ļ		
2 Membership	dues and assessments					
3 Interest on s	avings and temporary cash investments		_			
4 Dividends a	nd interest from securities					
5 Net rental in	come or (loss) from real estate	, ,	4		*	,
	anced property					
	t-financed property					
	come or (loss) from personal property					
7 Other invest						
	s) from sales of assets other than inventory					
	or (loss) from special events					
	or (loss) from sales of inventory					
	ue a					
	-					
				<u> </u>		
u						
		1			1	
42 Cubbadal Ad	d columns (h) (d) and (n)	•	0		0	
	d columns (b), (d), and (e)	·	0		<u> </u>	(
13 Total. Add I	ne 12, columns (b), (d), and (e)		0	`.	0 13 _	(
13 Total. Add I (See worksheet	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	complishm		l	13 _	(
13 Total. Add I (See worksheet Part XVI-B	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Ac		ent of Exempt P	urpose	13 _	(
13 Total. Add I (See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income in	s reported in co	ent of Exempt Polumn (e) of Part XVI-A	urpose	13	(
13 Total. Add I (See worksheet ! Part XVI-B Line No. ▼	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Ac	s reported in co	ent of Exempt Polumn (e) of Part XVI-A	urpose	13	(
13 Total. Add I (See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income in	s reported in co	ent of Exempt Polumn (e) of Part XVI-A	urpose	13	(
13 Total. Add I (See worksheet ! Part XVI-B Line No. ▼	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income in	s reported in co	ent of Exempt Polumn (e) of Part XVI-A	urpose	13	(
13 Total. Add I (See worksheet ! Part XVI-B Line No. ▼	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income in	s reported in co	ent of Exempt Polumn (e) of Part XVI-A	urpose	13	(
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13 Total. Add I (See worksheet ! Part XVI-B Line No. ▼	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income in	s reported in co	ent of Exempt Polumn (e) of Part XVI-A	urpose	13	(
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Form 990-PF (20	018) MEDCARE F	FOUNDAT	ION, INC.		33-103074	6	P	age 13
Part XVII					ns and Relationships	With Noncharit	able Exem	pt
	Organizations		-					
1 Did the org		Yes	s No					
in section		-	1 1					
organizatio								
a Transfers								
(1) Cash			1a(1)	X				
(2) Other	assets		1a(2)	X				
b Other trans								
(1) Sales	of assets to a noncharita		1b(1)	X				
(2) Purcha	ases of assets from a no		1b(2)	X				
	l of facilities, equipment,		1b(3)	X				
` '	oursement arrangements		1b(4)	X				
• •	or loan guarantees						1b(5)	X
• •	mance of services or me						1b(6)	X
_	facilities, equipment, ma	-					1c	<u> </u>
	•	-	_		nn (b) should always show the			
					he foundation received less the			
	<u> </u>	1 -		•	the goods, other assets, or se			
(a) Line no	(b) Amount involved	(c) Name	e of noncharitable exemp	ot organization	(a) Description of transfe	ers, transactions, and sharii	ng arrangements	
N/A								
								
		<u> </u>			· · · · · · · · · · · · · · · · · · ·			
		<u> </u>			· · ·			
	 	<u> </u>		-				
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					1			
On the form	-1-1		46			· · · · · · · · · · · · · · · · · · ·		
	idation directly or indirec	•			exempt organizations		Yes	Y No
	in section 501(c) (other		50 ((c)(5)) or in sec	Stion 5277			res [22 140
b if Yes, co	omplete the following sch	nedule	(h) Tupo of o	(h) Type of prognization		(c) Description of relationship		
N/A	(a) Name of organization		(b) Type of organization		(6) 50	escription of relationship	_	
N/A			-		-		_	
			<u> </u>		. —			
					_			
Under n	negatives of negury 1 declare that	at I have examini	ed this return, including a	accompanying sched	lules and statements, and to the best	of my knowledge and belie	f. it is true.	
					hich preparer has any knowledge		discuss this return	$\overline{}$
C:							parer shown below?	
Sign	.					See instruct	ions X Yes	No No
Here	W.m			ما ا	la la N			
	anature of officer or thustee				-/* 7	ESIDENT		
				1			. 1	
Print/	Type preparer's name			Preparer's signer	fre IhQ	Da		ck X if
Paid		203		1,,,,,,,,	HEYTER TO	10	-10-2019 self-	-employed
Preparer HARY	VEY SCHEVITZ, C		TITME COR	HARVEY SC	HEVITZ, CPA	PTIN I	20001570	14
Use Only C. DECERDIOLD CID COME 200							20001570 2-17094	
Firm's				200 3-7300		- 4	10-653-	
	BALTI	IMORE,	MD 21208	<u> </u>		Phone no 4	Form 990-F	
							Form 33U-1	- IT (2018)

MEDCR MEDCARE FOUNDATION, INC. 33-1030746 FYE: 12/31/2018

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	s	0
Adjusted Net	\$	0
Net Investment	\$	0
Total	240	240
	ఈ	w.
Description	INDIRECT ACCOUNTING FEES	TOTAL

MEDCR MEDCARE FOUNDATION, INC.
Federal Statements

.33-1030746

FYE: 12/31/2018

Statement 2 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	Beginning of Year		End of Year		
LOAN FROM OFFICER	. \$	1,660	\$	1,900	
TOTAL	\$	1,660	\$	1,900	