Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491319028729

2018

## OMB No 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

**Return of Private Foundation** 

Open to Public Inspection

or	cale	ndar year 2018, or tax year beginning 07-01-2	018 , a	nd ending 06-30	-2019				
		indation INDATION INC		A Employer io	lentification numbe	r			
FK	IEL FOO	MDATION INC		52-6045458					
		street (or P O box number if mail is not delivered to street address	) Room/suite	<b>B</b> Telephone no	ımber (see ınstructio	ns)			
	O BOX :			· ·	(410) 827-8811				
		, state or province, country, and ZIP or foreign postal code VN, MD 21658		<b>C</b> If exemption	application is pendin	g, check here			
G Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	<b>D 1.</b> Foreign of	ganızatıons, check he	ere , $\square$			
		☐ Final return ☐ Amended return	1		rganizations meeting				
		Address change Name change		test, che	ck here and attach co	mputation 🕨 🔲			
1 Ch	neck ty	pe of organization Section 501(c)(3) exempt private	foundation		undation status was t on 507(b)(1)(A), chec				
	Section	4947(a)(1) nonexempt charitable trust	le private foundation						
of '	year (f	xet value of all assets at end rom Part II, col (c),  ▶\$ 821,335    Accounting method     Other (specify)     (Part I, column (d) mus	Cash Accru		ation is in a 60-mont on 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach							
		schedule)	80,000						
	2	Check ► ✓ If the foundation is <b>not</b> required to attach							
	3	Sch B	31	. 31					
	4	Dividends and interest from securities	41,439						
	5a	Gross rents	127.00	12,100					
	ь	Net rental income or (loss)							
rie.	6a	Net gain or (loss) from sale of assets not on line 10							
Revenue	b	Gross sales price for all assets on line 6a							
ă	7	Capital gain net income (from Part IV, line 2)		(					
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances	_						
	b	Less Cost of goods sold	<u></u>						
	C								
	11	Other income (attach schedule)	121 470	44.476					
	12	Total. Add lines 1 through 11	121,470						
	13	Compensation of officers, directors, trustees, etc	0	0		0			
	14	Other employee salaries and wages							
ses	15 16a	Pension plans, employee benefits							
<u>=</u>	_	,	<b>00-1</b> 2 270	) (		0			
and Administrative Expenses	b	Accounting fees (attach schedule)	2,270	,		ļ			
Š	_ c	Other professional fees (attach schedule)							
เอน	17	Interest	<b>277</b>	,		0			
<u>~</u>	18	Taxes (attach schedule) (see instructions)	277			-			
≣	19	Depreciation (attach schedule) and depletion							
₽G	20	Occupancy							
ב ב	21	Travel, conferences, and meetings							
ਰ	22	Printing and publications	88 <b>45</b> 35			0			
Operating	23		35	,		ļ			
era	24	Total operating and administrative expenses.	3.670			0			
<u>ā</u>	25	Add lines 13 through 23	2,670						
_	25	Contributions, gifts, grants paid	91,131	1		91,131			
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	93,801			91,131			
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements	27,669						
	ь	Net investment income (If negative, enter -0-)		41,470					
	С	Adjusted net income (If negative, enter -0-)							
	D =		1			000 PF (2010)			

821,335

821.335

821,335

821,335

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3

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754,437

27,669

39,229

821,335

821,335 Form **990-PF** (2018)

0

754,437

754,437

754,437

821,335

- 1				
	4	Pledges receivable		
		Less allowance for doubtful accounts ▶		
	5	Grants receivable		
	6	Receivables due from officers, directors, trustees, and other		
		disqualified persons (attach schedule) (see instructions)		
	7	Other notes and loans receivable (attach schedule) <b>&gt;</b>		
		Less allowance for doubtful accounts ▶		
2	8	Inventories for sale or use		
Assets	9	Prepaid expenses and deferred charges		
&	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 ▶		
		Less accumulated depreciation (attach schedule) ▶		
	12	Investments—mortgage loans		

## 

13

14

15 16

17 18

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23

24

25

26

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29

30

31

Part III

2

3

Liabilities

Fund Balances

ō

Net Assets

Grants payable

Other liabilities (describe ▶\_

Unrestricted . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a . .

Decreases not included in line 2 (itemize) ▶

Temporarily restricted . . . Permanently restricted . . .

Deferred revenue . . . . . . . . . . . . . . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Paid-in or capital surplus, or land, bldg, and equipment fund

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that do not follow SFAS 117, check here 🕨 🗹

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

instructions

Form 990-PF (2018)					Page <b>3</b>
Part IV Capital Gains	and Losses for Tax on Invest	ment Income			
	pe the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a					
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss) minus (g)
a					
b					
С					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	I)
(i) F M V as of 12/31/69	(j)	Excess	(k)  Excess of col (i)  over col (1), if any  (h)  Gains (Col (h) gain min  col (k), but not less than  Losses (from col (h))		
a			(3)///	,	
b					
c					
d					
 e					
	1	If gain, also enter in F	Part I, line 7		
2 Capital gain net income	e or (net capital loss)	If (loss), enter -0- in l	Part İ, lıne 7	}	
3 Net short-term capital	gain or (loss) as defined in sections	1222(5) and (6)			
If gain, also enter in Pa in Part I, line 8	art I, line 8, column (c) (see instructi	ons) If (loss), enter -0	)- · · · · ·	}	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	: Investment I	ncome	
For optional use by domestic [	private foundations subject to the sec	ction 4940(a) tax on ne	et investment inco	ome )	
f section 4940(d)(2) applies, l	eave this part blank				
	ne section 4942 tax on the distributa ot qualify under section 4940(e) Do			od? \( \sum_{Ye}	es 🔽 No
· · · · · · · · · · · · · · · · · · ·	mount in each column for each year,			ies	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	<b>(d)</b> Distribution rati (col (b) divided by c	
2017	32,247		764,251		0 042194
2016	33,189		744,912		0 044554
2015	18,762		750,206		0 025009
2014	21,377		754,275		0 028341
2012	21 504		760 205		0.030305

0 028385 2 Total of line 1, column (d) 2 0 168483 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the 3 0 033697 number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 4 756,946 5 **5** Multiply line 4 by line 3 25,507 415 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 25,922 8 Enter qualifying distributions from Part XII, line 4 8 91,131 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

_	<del></del>	<u> </u>										
	t VII-B			Activities for Which	Form 4720 May Be	Required (c	ontinue	ed)				
5a	_	e year did the foundation p	,	•							Yes	No
		on propaganda, or otherw					☐ Yes	<b>✓</b>	No			
		nce the outcome of any sp			• • • • • • • • • • • • • • • • • • • •							
	on, dı	rectly or indirectly, any vo	ter re	egistration drive?		• • [	Yes	✓	No			
	(3) Provid	de a grant to an individual	for t	ravel, study, or other simi	lar purposes?		Yes	$\overline{\mathbf{V}}$	No			
		de a grant to an organizati										
	ın sec	tıon 4945(d)(4)(A)? See ır	ıstru	ctions		• • [	Yes	<b>✓</b>	No			
	(5) Provid	de for any purpose other t	nan r	eligious, charitable, scien	tific, literary, or	_						
	educa	tional purposes, or for the	prev	ention of cruelty to childr	en or anımals?	[	Yes	<b>✓</b>	No			
b	If any ans	wer is "Yes" to $5a(1)-(5)$ ,	dıd a	<b>ny</b> of the transactions fa	ıl to qualıfy under the ex	ceptions descri	oed in	_				
	Regulation	ns section 53 4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions				5b		
	Organizat	ions relying on a current n	otice	regarding disaster assist	ance check here		. ▶					
C	If the ans	wer is "Yes" to question 5a	a(4),	does the foundation claim	exemption from the							
	tax becau	se it maintained expenditu	ire re	sponsibility for the grant?		[	Yes	П	No			
	If "Yes," a	ttach the statement requi	red b	y Regulations section 53 -	4945-5(d)	-						
6a	Did the fo	undation, during the year,	rece	ive any funds, directly or	indirectly, to pay premiu	ıms on						
	a persona	l benefit contract?				. [	7 v	<b>✓</b>	NI.			
Ь	Did the fo	undation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract? <sup>L</sup>	res		NO	6b		No
	If "Yes" to	6b, file Form 8870										
7a	At any tim	ne during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trar	nsaction? [	7 v		No			
ь	If yes, did	the foundation receive ar	y pro	ceeds or have any net in	come attributable to the	transaction? .	ᆜ Yes · ·	. <u>.</u>	NO	7b		
8	Is the fou	ndation subject to the sect	ion 4	960 tax on payment(s) o	f more than \$1,000,000	ın remuneratio	n or					
	excess pa	rachute payment during th	ne ye	ar <sup>?</sup>			٦.,	<b>✓</b>				
		Information About (				L				VAAC	<u> </u>	
Pai	t VIII	and Contractors	,,,,,	ers, Directors, Trust	ees, roundation rid	mayers, my	iiiy Fa	IU LI	пріо	yccs,		
	liatalia				d 46 -iu	C i						
1	LIST All OI	ficers, directors, truste		<b>b)</b> Title, and average	(c) Compensation (If	(d) Contri			Т			
	(a) Na	ame and address	١ ١	hours per week	not paid, enter	employee ben				Expen		
				devoted to position	-0-)	deferred coi	npensat	ion	_ <u>'</u>	ther al	iowanic	.es
	R FRIEL JR		PRES 0 00	/TREAS	0			(				0
	ROVE CREEK REVILLE, MD		0 00									
	R FRIEL III	21017	DIRE	CTOR	0				+			0
	OSPECT BAY	DRIVE W	0 30	CTOIC	U			,	Ί			U
	ONVILLE, MD											
ROBE	RT U FRIEL			CTOR	0			(	)			0
	FIRST AVENU		0 30									
	NSTOWN, MD		0500	ETIBU								
	THY M ZELLE	:K	2 00	ETARY	0			(	7			0
PO BO QUEE	NSTOWN, MD	21658										
2	Compens	ation of five highest-pa	id en	nployees (other than th	ose included on line 1	_see instruc	ions).	If no	ne, e	nter "	NONE.	"
				(b) Title, and average		(d) Contri	outions	to				
(a)		address of each employee	paid	hours per week	(c) Compensation	employe				Expens		
	m	ore than \$50,000		devoted to position		plans and comper		a	O	her all	owance	25
NON	=					Compe	3411011					
	=											
								-+				
								+				
								$\longrightarrow$				
Tota	I number o	f other employees paid ov	er \$5	0,000								0
									For	-m 991	LDF /	2018)

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"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		0
List the foundation's four largest direct charitable activities during the tax year. Include releving anity and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form <b>990-PF</b> (2018)

Pal	organizations check here $ ightharpoonup$ and do not complete this part )					
1	Minimum investment return from Part X, line 6		 		1	37,847
2a	Tax on investment income for 2018 from Part VI, line 5	2a		415		
ь	Income tax for 2018 (This does not include the tax from Part VI )	2b				
С	Add lines 2a and 2b		 		2c	415
3	Distributable amount before adjustments Subtract line 2c from line 1		 		3	37,432
4	Recoveries of amounts treated as qualifying distributions		 		4	0

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

1a

1b

2

3a 3h

4

5

91,131

91.131

90.716

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415

Part XII

1

2

3

4

5

b

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Page 9

37,432

7,325

30,107

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	_	_	•	_	١,	_	_	_
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i			,	L	ц.			
ı								

c From 2015. . .

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Par

Undistributed Income (see instructions)

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . . .

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . 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. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . .

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

same amount must be shown in column (a) )

2016, 2015, 2014 **b** Total for prior years

Excess distributions carryover, if any, to 2018

a From 2013. . . . . **b** From 2014. . . . . d From 2016. . . . . . e From 2017. . . . .

f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$

a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years

5 Excess distributions carryover applied to 2018

(Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . . **d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

(a)

Corpus

0

0

8

(b)

Years prior to 2017

45,870

(c)

2017

37,936

37,936



nter gros	s amounts unless otherwise indicated	Unrelated b	ısıness ıncome	Excluded by section	(e) Related or exempt	
_	m service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
	and contracts from government agencies					
_	ership dues and assessments					
3 Intere invest	st on savings and temporary cash			14	31	
4 Divide	nds and interest from securities			14	41,439	
	ntal income or (loss) from real estate				•	
	-financed property.					
	debt-financed property					
	ntal income or (loss) from personal property					
	investment income					
	r (loss) from sales of assets other than					
ınvent	'					
	come or (loss) from special events					
O Gross	profit or (loss) from sales of inventory					
L Other	revenue <b>a</b>					
`						
d		1				
d e						
е			0		41.470	(
e <b>2</b> Subto	tal Add columns (b), (d), and (e).		0		41,470 <b>3</b>	
e 2 Subto 3 Total. (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rorksheet in line 13 instructions to verify calcu	lations )		1	41,470 <b>3</b>	
e 2 Subto 3 Total. (See w Part XV	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  1-B Relationship of Activities to the  Explain below how each activity for which	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
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e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
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e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470
e 2 Subto 3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	3ited importantly to	41,470

. (==									
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable								
	Exempt Organizations								

Part	YATI	Exempt Organia	zations									
1 Did (c)	the org (other t	anization directly or in han section 501(c)(3)	dırectly enga organızatıon	ge in any of the s) or in section	following with 527, relating to	any o	other organization	n described in secti s?	ion 501		Yes	No
a Trai	nsfers f	rom the reporting foun	dation to a n	oncharitable ex	empt organizati	on of	f					
(1)	Cash.								.	1a(1)		No
٠,		assets				•			.	1a(2)		No
		sactions										
		of assets to a nonchari	•	-						1b(1)		No
		ases of assets from a n l of facilities, equipmer								1b(2) 1b(3)		No No
		oursement arrangemen	•						- H	1b(4)		No
		or loan guarantees.								1b(5)		No
		nance of services or m							- F	1b(6)		No
٠,		facılıtıes, equipment, n	•	_					.	1c		No
of t	he good	er to any of the above ls, other assets, or ser- saction or sharing arra	vices given b	y the reporting	foundation If the	ne fo	undation receive	d less than fair mai	rket value			
				•	•			·				
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization		(d) Description of	transfers, transactions	, and shari	ng arra	ngemen	ts
-												
		dation directly or indire	•	•	•			_	·	No		
		mplete the following so		1301(0)(3)) 011	III section 527				es <u>L</u>	1110		
<b>D</b> 11	163, 60	(a) Name of organization		(1	<b>b)</b> Type of organiz	atıon	1	(c) Description	n of relation	nship		
		., .		Ò	, ,,					·		
	of my	r penalties of perjury, howledge and belief	, it is true, co									
Sign Here	*	n preparer has any kno	wledge		2019-11-14		*****		May the	e IRS di	scuss th	nis
пеге	<b>  ▶</b> −	ignature of officer or t	rustee		Date		— <b>)</b> ——————————————————————————————————		below	_	rer shov <b>V</b> Yes l	
		Print/Type preparer's	name	Preparer's Sign	nature		Date		PTIN			
Paid		JOHN D IRELAND (	CPA				2019-11-14	Check if self- employed ▶ ☐	F	20010 <i>6</i>	877	
Prep Use (		Firm's name ► ACC	OUNTING ST	RATEGIES GRO	UP LLC				Fırm's EI	N <b>▶</b> 26	-36546	552
	•	Firm's address ▶ PC	BOX 369									
		PR	ESTON, MD	21655					Phone no	(410	) 673-1	1384

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total
contributions received by the foundation before the close of any tax year (but only if they have contributed more
than \$5,000).
1AMEC D EDIEL 1D

th I DAMES K LKIEL JK

ROBERT U FRIEL

JAMES R FRIEL III

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

a Paid during the year				
AMERICAN CANCER SOCIETY 405 WILLIAMS COURT SUITE 120 BALTIMORE, MD 21220	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	7,000

BALTIMORE, MD 21220		CHARITY		
AMERICAN LUNG ASSOCIATION 211 EAST LOMBARD STREET BALTIMORE, MD 21202	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	5,000

211 EAST LOMBARD STREET BALTIMORE, MD 21202	NONE	PUBLIC CHARITY	OPERATING FONDS	3,000
ANNUAL CATHOLIC APPEAL PO BOX 2030 WILMINGTON DE 19899	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,000

BALTIMORE, MD 21202		CHARITY		
ANNUAL CATHOLIC APPEAL PO BOX 2030 WILMINGTON, DE 19899	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CATHOLIC BISHOP OF NORTHERN NONE OTHER OPERATING FUNDS 100 ALASKA **PUBLIC** 

1312 PEGGER ROAD FAIRBANKS, AK 99709		CHARITY		
CATHOLIC RELIEF SERVICES - CRS PO BOX 17090 BALTIMORE, MD 21298	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	38
CHESTER RIVER HEALTH FOUNDATION 100 BROWN STREET CHESTERTOWN MD 21620	NONE	OTHER PUBLIC	OPERATING FUNDS	1,000

BALTIMORE, MD 21298		CHARITY		
CHESTER RIVER HEALTH FOUNDATION 100 BROWN STREET CHESTERTOWN, MD 21620	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,000

91,131

BALTIMORE, MD 21298		CHARITY		
CHESTER RIVER HEALTH FOUNDATION 100 BROWN STREET CHESTERTOWN.MD 21620	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,0

ı	CHESTER RIVER HEALTH FOUNDATION	NONE	OTHER	OPERATING FUNDS	1,0
ı	100 BROWN STREET		PUBLIC		·
ı	CHESTERTOWN, MD 21620		CHARITY		

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Total .

a Paid during the year				
CHILDREN'S HUNGER RELIEF FUND PO BOX 96012	NONE	OTHER PUBLIC	OPERATING FUNDS	:
WASHINGTON DC 20090		CHARITY		

ASHINGTON, DC 20090		CHARITY		
HRISTIAN APPALACIAN PROJECT D BOX 55911 XINGTON.KY 40555	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	

CHRISTIAN APPALACIAN PROJECT PO BOX 55911 LEXINGTON, KY 40555	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	
COMPASS REGIONAL HOSPICE	NONE	OTHER PUBLIC	OPERATING FUNDS	5,0

CHRISTIAN APPALACIAN PROJECT PO BOX 55911 LEXINGTON, KY 40555	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	3
COMPASS REGIONAL HOSPICE	NONE	OTHER	OPERATING FUNDS	5,00

PO BOX 55911 LEXINGTON, KY 40555		PUBLIC CHARITY		
COMPASS REGIONAL HOSPICE 255 COMET DRIVE	NONE	OTHER PUBLIC	OPERATING FUNDS	5,000

30

255 COMET DRIVE CENTREVILLE, MD 21617	NONE	PUBLIC CHARITY	OPERATING FUNDS	5,000
				<del> </del>

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIENDS OF WYE MILL INCPO BOX 277 NONE OTHER OPERATING FUNDS 500 WYE MILLS, MD 21679 **PUBLIC** CHADITY

		CHARITT		
HELPING UP MISSIONPO BOX 17372 BALTIMORE, MD 21297	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	242
INTERNATIONAL CATHOLIC MIRATION COMMISSION PO BOX 2004 MILFORD, NH 03055	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
Total			▶ 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

	or substantial continuator			
a Paid during the year				
LIFE OUTREACH INTERNATIONAL PO BOX 982000 FORT WORTH, TX 76182	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	36
MARIANIST MISSION	NONE	OTHER	OPERATING FUNDS	150

MARIANIST MISSION 4435 EAST PATTERSON ROAD DAYTON, OH 45481	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	
MERCY SHIPSPO BOX 1930	NONE	OTHER	OPERATING FUNDS	

MARIANIST MISSION 4435 EAST PATTERSON ROAD DAYTON, OH 45481	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	
MERCY SHIPSPO BOX 1930	NONE	OTHER	OPERATING FUNDS	

4435 EAST PATTERSON ROAD DAYTON, OH 45481		PUBLIC CHARITY		
MERCY SHIPSPO BOX 1930 GARDEL VALLEY, TX 75771	NONE	OTHER PUBLIC	OPERATING FUNDS	2.

DAYTON, OH 45481		CHARITY		
MERCY SHIPSPO BOX 1930 GARDEL VALLEY, TX 75771	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25

GARDEL VALLEY, TX 75771	NONE	PUBLIC CHARITY	OPERATING FUNDS	25

GARDEL VALLEY, TX 75771 PUBLIC CHARITY	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AM FED OF POLICE & CONCERNED NONE OTHER OPERATING FUNDS 50 **CITIZENS PUBLIC** 

6350 HORIZON DRIVE TITUSVILLE, FL 32780		CHARITY		
OBLATES OF ST FRANCIS DE SALES PO BOX 43 CHILDS, MD 21916	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	350
OUR MOTHER OF SORROWS CHURCH	NONE	OTHER	OPERATING FUNDS	25,832

Total			▶ 3a	91,131
OUR MOTHER OF SORROWS CHURCH 303 CHESTERFIELD AVENUE CENTREVILLE, MD 21617	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25,832
PO BOX 43 CHILDS, MD 21916		PUBLIC CHARITY		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

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

	or substantial contributor			
a Paid during the year				
RADCLIFFE CREEK SCHOOL	NONE	OTHER	OPERATING FUNDS	6,000

201 TALBOT BOULEVARD CHESTERTOWN, MD 21620		PUBLIC CHARITY		
ST MARTIN'S MINISTRIESPO BOX 996 RIDGELY, MD 21660	NONE	OTHER PUBLIC	OPERATING FUNDS	6,000

	ļ			
ST MARTIN'S MINISTRIESPO BOX 996 RIDGELY, MD 21660	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	6,000
ST PHILLIPS & JAMES	NONE	OTHER	OPERATING FUNDS	250

RIDGELI, ND 21000		CHARITY		
ST PHILLIPS & JAMES 2801 N CHARLES STREET BALTIMORE, MD 21218	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	250

ST PHILLIPS & JAMES 2801 N CHARLES STREET BALTIMORE, MD 21218	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	
Total			▶ 3a	91,131

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

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

or substantial contributor

Total.

a Paid during the year				
AID FOR STARVING CHILDREN	NONE	OTHER PUBLIC	OPERATING FUNDS	30

HAGERSTOWN, MD 217419809		CHARITY		
ALZHEIMER'S ASSOCIATION 8180 GREENSBORO DRIVE SUITE 400	NONE	OTHER PUBLIC	OPERATING FUNDS	50

ALZHEIMER'S ASSOCIATION 8180 GREENSBORO DRIVE SUITE 400 MCLEAN, VA 22102	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	5
AMERICAN DIABETES ASSOCIATION	NONE	OTHER	OPERATING FUNDS	25

MCLEAN, VA 22102		CHARITY		
AMERICAN DIABETES ASSOCIATION 2451 CRYSTAL DRIVE SUITE 900 ARLINGTON, VA 22202	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	250

···				1
AMERICAN DIABETES ASSOCIATION 2451 CRYSTAL DRIVE SUITE 900 ARLINGTON, VA 22202	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	250

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ANNE ARUNDEL MEDICAL CENTER NONE OTHER OPERATING FUNDS 450 **FOUNDATION PUBLIC** 2001 MEDICAL PARKWAY BELCHER CHARITY PAVILION SUITE 604

ANNAPOLIS, MD 21401				
BOSOM BUDDIES CHARITIES INC PO BOX 112 STEVENSVILLE, MD 21666	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,000
BREAD FOR THE WORLDPO BOX 96416 WASHINGTON, DC 200906416	NONE	OTHER PUBLIC	OPERATING FUNDS	40

▶ 3a

91,131

PO BOX 112 STEVENSVILLE, MD 21666		PUBLIC CHARITY		- <b>,</b> -
BREAD FOR THE WORLDPO BOX 96416 WASHINGTON, DC 200906416	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	•

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
BUCKNER INTERNATIONAL	NONE	OTHER	OPERATING FUNDS	50

DALLAS, TX 752019902		CHARITY		
CAL FARLEY'S BOYS RANCH PO BOX 98156 WASHINGTON DC 200908156	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	70

CAL FARLEY'S BOYS RANCH PO BOX 98156 WASHINGTON, DC 200908156	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	70
CAPUCHIN PROVINCE OF ST CONRAD PO BOX 40575	NONE	OTHER PUBLIC	OPERATING FUNDS	150

WASHINGTON, DC 200908156		CHARITY		
CAPUCHIN PROVINCE OF ST CONRAD PO BOX 40575 DENVER, CO 80211	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	150

CAPUCHIN PROVINCE OF ST CONRAD PO BOX 40575 DENVER, CO 80211	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	150
Total			▶ 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
CCTC10855 CENTRAL AVENUE RIDGELY, MD 21660	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	125

RIDGELT, MD 21000		CHARITY		
CENTRAL UNION MISSION PO BOX 96763 WASHINGTON, DC 200906763	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

PO BOX 96763 WASHINGTON, DC 200906763	NONE	PUBLIC CHARITY	OPERATING FUNDS	100
CHESTERWYE CENTERPO BOX 96 GRASONVILLE, MD 21638	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

PO BOX 96763 WASHINGTON, DC 200906763	PUBLIC CHARITY		
CHESTERWYE CENTERPO BOX 96 GRASONVILLE, MD 21638	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
Total	 	▶ 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHRIST HOUSE NONE OTHER OPERATING FUNDS 175 1717 COLUMBIA ROAD NW **PUBLIC** WASHINGTON, DC 200092803 CHARITY

COALITION TO SALUTE AMERICA'S HEROES PO BOX 96440 WASHINGTON, DC 200906440	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25
FEEDING AMERICAPO BOX 96749 WASHINGTON DC 200777746	NONE	OTHER PUBLIC	OPERATING FUNDS	42

91,131

PO BOX 96440 WASHINGTON, DC 200906440		CHARITY		
FEEDING AMERICAPO BOX 96749 WASHINGTON, DC 200777746	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FOOD FOR THE POOR INC NONE OTHER OPERATING FUNDS 125

6401 LYONS ROAD COCONUT CREEK, FL 330979004		PUBLIC CHARITY		
FRANCISCAN MISSION ASSOCIATES PO BOX 598 MOUNT VERNON, NY 105519988	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25
FRANCISCAN MONASTERY OF THE HOLY LAND	NONE	OTHER PUBLIC	OPERATING FUNDS	25

PO BOX 598 MOUNT VERNON, NY 105519988		PUBLIC CHARITY		
FRANCISCAN MONASTERY OF THE HOLY LAND PO BOX 96271 WASHINGTON, DC 200777796	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25
Total			▶ 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FREEDOM FROM HUNGER	NONE	OTHER	OPERATING FUNDS	25

DAVIS, CA 956179982		CHARITY		
GOOD OLE BOY FOUNDATION INC 36111 PEAR TREE ROAD MILLSBORO, DE 19966	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

GOOD OLE BOY FOUNDATION INC 36111 PEAR TREE ROAD MILLSBORO, DE 19966	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
GOODWILL VOLUNTEER FIRE COMPANY 212 BROADWAY	NONE	OTHER PUBLIC	OPERATING FUNDS	100

36111 PEAR TREE ROAD MILLSBORO, DE 19966		PUBLIC CHARITY		100
GOODWILL VOLUNTEER FIRE COMPANY 212 BROADWAY CENTREVILLE, MD 21617	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

Total			▶ 3a	91,131
GOODWILL VOLUNTEER FIRE COMPANY 212 BROADWAY CENTREVILLE, MD 21617	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
MILLSBORO, DE 19966		CHARITY		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

GRASONVILLE VOLUNTEER FIRE DEPARTMENT PO BOX 457 GRASONVILLE, MD 21638	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
a Paid during the year				

PO BOX 457 GRASONVILLE, MD 21638		CHARITY		
KENT ISLAND VOLUNTEER FIRE COMPANY PO BOX 27 STEVENSVILLE, MD 21666	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
KENT ISLAND VOLUNTEER FIRE DEPARTMENT	NONE	OTHER PUBLIC	OPERATING FUNDS	500

KENT ISLAND VOLUNTEER FIRE COMPANY PO BOX 27 STEVENSVILLE, MD 21666	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
KENT ISLAND VOLUNTEER FIRE DEPARTMENT 1610 MAIN STREET CHESTER, MD 21619	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	500

STEVENSVILLE, MD 21666		CHARITY		
KENT ISLAND VOLUNTEER FIRE DEPARTMENT 1610 MAIN STREET CHESTER, MD 21619	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	500
Total			▶ 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
KING BAND BOOSTERS	NONE	OTHER	ODERATING FUNDS	100

900 LOVE POINT ROAD STEVENSVILLE, MD 21666	IVONE	PUBLIC CHARITY	OF ENATING FONDS	100
LEE HEALTH FOUNDATIONPO BOX 2218	NONE	OTHER	OPERATING FUNDS	100

STEVENSVILLE, MD 21000		CHARITI		
LEE HEALTH FOUNDATIONPO BOX 2218 FORT MYERS, FL 339029984	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
MACULAR DEGENERATION RESEARCH	NONE	OTHER PUBLIC	OPERATING FUNDS	25

FORT MYERS, FL 339029984		PUBLIC CHARITY		
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25

		CHARITI		
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25
Total				91 131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MAKE-A-WISH NEW JERSEY NONE OTHER OPERATING FUNDS 500

1384 PERRINEVILLE ROAD MONROE TOWNSHIP, NJ 08831		PUBLIC CHARITY		
MARYLAND FOOD BANKPO BOX 17379 BALTIMORE, MD 212971379	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,000
MEMORIAL SLOAN KETTERING CANCER CTR	NONE	OTHER PUBLIC	OPERATING FUNDS	75

BALTIMORE, MD 212971379	HONE	PUBLIC CHARITY	of Elvithe Fores	1,00
MEMORIAL SLOAN KETTERING CANCER CTR PO BOX 5028 HAGERSTOWN MD 217415028	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	7

		CHARITY		
MEMORIAL SLOAN KETTERING CANCER CTR PO BOX 5028 HAGERSTOWN, MD 217415028	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	75
Total			<b>&gt;</b> 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MOUNT SAINT JOSEPH HIGH SCHOOL NONE OTHER OPERATING FUNDS 7,000 4403 FREDERICK AVENUE **PUBLIC** CHARTTY

BALTIMORE, MD 212294199		CHARITY		
NATIONAL CHILD SAFETY COUNCIL 505 RAILROAD AVENUE CENTREVILLE, MD 21617	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	110
NATIONAL PARKS CONSERVATION ASSOCIATION PO BOX 97202 WASHINGTON, DC 200777435	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25

Total			▶ 3a	91,131
NATIONAL PARKS CONSERVATION ASSOCIATION PO BOX 97202 WASHINGTON, DC 200777435	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	25
CENTREVILLE, MD 21617		CHARITY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
NATIONAL JEWISH HEALTH PO BOX 5895	NONE	OTHER PUBLIC	OPERATING FUNDS	50

DENVER, CO 802179171		CHARITY		
OBLATE MISSIONSPO BOX 659439 SAN ANTONIO, TX 782659769	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	50

SAN ANTONIO, TX 782659769	NONE	PUBLIC CHARITY	OPERATING FUNDS	50
PARTNERS IN HEALTHPO BOX 996 FREDERICK, MD 217059942	NONE	OTHER PUBLIC	OPERATING FUNDS	50

3AN ANTONIO, 1X 702033703		CHARITY		
PARTNERS IN HEALTHPO BOX 996 FREDERICK, MD 217059942	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	50

91,131

CHARITY	PARTNERS IN HEALTHPO BOX 996 FREDERICK, MD 217059942	NONE	PUBLIC	OPERATING FUNDS	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
PATTY POLLATOS FOUNDATION 11102 EAGLETRACE DRIVE NEW MARKET, MD 21774	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	50

NEW MARKET, MD 21774		CHARITY		
QUEENSTOWN VOL FIRE CO INC PO BOX 118 QUEENSTOWN, MD 21658	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
OLIEENSTOWN VOLETBE COMPANYEMS	NONE	OTHER	ODEDATING FUNDS	100

PO BOX 118 QUEENSTOWN, MD 21658	NONE	PUBLIC CHARITY	or civiling roups	100
QUEENSTOWN VOL FIRE COMPANYEMS PO BOX 217 QUEENSTOWN, MD 21658	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

Total			▶ 3a	91,131
QUEENSTOWN VOL FIRE COMPANYEMS PO BOX 217 QUEENSTOWN, MD 21658	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	10
QUEENSTOWN, MD 21658		CHARITY		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
ROSARY SHRINE OF ST JUDE 141 E 65TH STREET	NONE	OTHER PUBLIC	OPERATING FUNDS	50
NEW YORK NY 100656699		CHARITY		

NEW YORK, NY 100656699		CHARITY		
SISTERS OF ST FRANCIS OF ASSISI 3221 S LAKE DRIVE ST FRANCIS, WI 532353799	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	82

3221 S LAKE DRIVE ST FRANCIS, WI 532353799	NONE	PUBLIC CHARITY	OPERATING FUNDS	82
ST DENNIS CHURCHPO BOX 249 GALENA, MD 21635	NONE	OTHER PUBLIC	OPERATING FUNDS	100

3221 S LAKE DRIVE ST FRANCIS, WI 532353799		PUBLIC CHARITY		
ST DENNIS CHURCHPO BOX 249 GALENA, MD 21635	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

ST DENNIS CHURCHPO BOX 249 GALENA, MD 21635	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
Total			▶ 3a	91,131

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

Recipient S - Grants and Contributions Paid During the Year or Approved for Future Payment

Foundation status of recipient status of recipient or substantial contributor

Foundation status of recipient recipient status of recipient or substantial contributor

1 '				
ST JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 59 MEMPHIS, TN 38101	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	2,200
THE GUNSTON SCHOOLPO BOX 200 CENTREVILLE, MD 21617	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	2,000

THE HUMANE SOCIETY OF THE US PO BOX 96930 WASHINGTON, DC 2007777229  NONE OTHER PUBLIC CHARITY OPERATING FUNDS	THE GUNSTON SCHOOLPO BOX 200 CENTREVILLE, MD 21617	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	2,000
	PO BOX 96930	NONE	PUBLIC	OPERATING FUNDS	66

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

Name and address (home or business)

BALTIMORE, MD 212988361

Total .

recipient

250

91,131

a Paid during the year				
TUCKAHOE HABITAT FOR HUMANITY PO BOX 392 DENTON, MD 216290392	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
UM MEMORIAL HOSPITAL FOUNDATION PO BOX 1846 FASTON MD 21601	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,000

CHARITY

DENTON, MD 216290392		CHARITY		
UM MEMORIAL HOSPITAL FOUNDATION PO BOX 1846 EASTON, MD 21601	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,
UM SCHOOL OF MEDICINE	NONE	OTHER PUBLIC	OPERATING FUNDS	

UM MEMORIAL HOSPITAL FOUNDATION PO BOX 1846 EASTON, MD 21601	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	1,0
UM SCHOOL OF MEDICINE	NONE	OTHER	OPERATING FUNDS	2

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UMMS FOUNDATION-CANCER NONE OTHER OPERATING FUNDS 3,000 RESEARCH **PUBLIC** 110 S PACA STREET 9TH FLOOR CHARITY BALTIMORE MD 21201

DALTIMORE, MD 21201				
UMMS FOUNDATION-ONCOLOGY DEPT 22 S GREENE STREET BALTIMORE, MD 212011595	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	7,000
UNICEF USAPO BOX 96964 WASHINGTON, DC 200777399	NONE	OTHER PUBLIC	OPERATING FUNDS	50

1	22 S GREENE STREET BALTIMORE, MD 212011595	PUBLIC CHARITY		
	UNICEF USAPO BOX 96964 WASHINGTON, DC 200777399	OTHER PUBLIC CHARITY	OPERATING FUNDS	50
	Total	 	▶ 3a	91,131

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
VETERANS OF FOREIGN WARS	NONE	OTHER PUBLIC	OPERATING FUNDS	50

TOPEKA, KS 666088942		CHARITY		
VILLANOVA UNIVERSITY 800 E LANCASTER AVENUE VILLANOVA, PA 190859971	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	3,000

800 E LANCASTER AVENUE VILLANOVA, PA 190859971	NONE	PUBLIC CHARITY	or Element 1905	3,000
XAVERIAN BROTHERS 4409 FREDERICK AVENUE BALTIMORE, MD 21229	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100

VILLANOVA, TA 130033371		CHARTT		
XAVERIAN BROTHERS 4409 FREDERICK AVENUE BALTIMORE, MD 21229	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	100
Total			▶ 3a	91,131

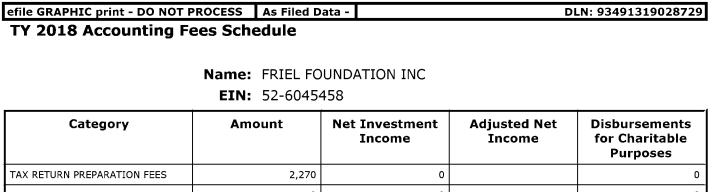
Recipient If recipient is an individual, show any relationship to any foundation manager Name and address (home or business)

Recipient If recipient is an individual, show any relationship to any foundation manager recipient Purpose of grant or contribution

Purpose of grant or contribution

	or substantial contributor			
a Paid during the year				
ZAMIR CHORALE OF BOSTON	NONE	OTHER PUBLIC	OPERATING FUNDS	200

ZAMIR CHORALE OF BOSTON 1320 CENTRE ST SUITE 306 NEWTON, MA 02459	NONE	OTHER PUBLIC CHARITY	OPERATING FUNDS	
Total			▶ 3a	91,131



efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491319028729 TY 2018 Applied to Prior Year Election Name: FRIEL FOUNDATION INC **EIN:** 52-6045458 **Election:** THE FOUNDATION IS ELECTING TO APPLY CURRENT YEAR EXCESS OUALIFYING DISTRIBUTIONS TO PRIOR YEARS AS A PART OF THE CORRECTIVE ACTION RELATED TO FORM 4720.

As Filed Data -		DLN:	93491319028729	
dule				
FRIEL FOUNDA	TION INC			
<b>:</b> 52-6045458				
Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
•	FRIEL FOUNDA 52-6045458  Revenue and Expenses per	FRIEL FOUNDATION INC 52-6045458  Revenue and Expenses per Net Investment Income	FRIEL FOUNDATION INC 52-6045458  Revenue and Expenses per Income Adjusted Net Income	

BANK SERVICE CHARGES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319028729
TY 2018 Other Increases Sche	edule	
Name:	FRIEL FOUNDATION INC	
EIN:	52-6045458	
De	escription	Amount
UNREALIZED GAIN ON SECURITIES		39,229

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491319028729
TY 2018 Taxes Schedule				
Name: FRIEL FOUNDATION INC				
<b>EIN:</b> 52-6045458				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	277	0		0