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2019

OMB No. 1545-0052

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

Form 990-PF

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.

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , ar	nd en	ding 12-31-	2019	
		indation AND EMILY SINGER FAMILY			A Employer id	entification numbe	r
	UNDAT:				26-3875584		
		street (or P.O. box number if mail is not delivered to street address) VET RIDE DRIVE	Room/suite		B Telephone nu	mber (see instruction	ns)
					(443) 463-5623	3	
		i, state or province, country, and ZIP or foreign postal code LLS, MD 21117			C If exemption	application is pendin	g, check here
 G Cł	neck al	I that apply:	former public charity		D 1. Foreign or	ganizations, check he	ere
		☐ Final return ☐ Amended return	, , , , , , , , , , , , , , , , , , , ,		2. Foreign or	ganizations meeting	the 85%
		Address change Name change			·	k here and attach co	· -
		tpe of organization: $lacksquare$ Section 501(c)(3) exempt private to	foundation			ındation status was t n 507(b)(1)(A), chec	
<u></u> :	Section		e private foundation				
		inama Dawt II and (n)	☑ Cash ☐ Accru	ıal		ation is in a 60-month n 507(b)(1)(B), chec	
		Torn Part II, col. (c), ▶\$ 2,985,251 Other (specify) (Part I, column (d) must	be on cash basis.)				
Do	et T	Analysis of Revenue and Expenses (The total	, 			<u> </u>	(4) Dielement
ΓŒ	rt I	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) N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach	50,000				(eddir basis emiy)
	2	schedule) Check ▶ ☐ if the foundation is not required to attach	50,000				
	_	Sch. B					
	3	Interest on savings and temporary cash investments	72.000		72.000		
	4 5a	Dividends and interest from securities	72,880	1	72,880		
	b	Net rental income or (loss)					
пe	6a	Net gain or (loss) from sale of assets not on line 10	23,110				
Revenue	b	Gross sales price for all assets on line 6a 520,465					
ă	7	Capital gain net income (from Part IV, line 2)			23,110		
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	145,990		95,990		
	13	Compensation of officers, directors, trustees, etc.	27,000		0		27,000
w	14 15	Other employee salaries and wages					
ıse	16a	Legal fees (attach schedule)					
ber .	ь	Accounting fees (attach schedule)	4,088	3	4,088		0
Operating and Administrative Expenses	С	Other professional fees (attach schedule)					
ıtive	17	Interest					
stra	18	Taxes (attach schedule) (see instructions)	2,820		1,622		0
nini	19	Depreciation (attach schedule) and depletion					
Adn	20	Occupancy					
nd n	21 22	Travel, conferences, and meetings					
ig a	23	Other expenses (attach schedule)	9 28,110		28,110		0
atin	24	Total operating and administrative expenses.	<u> </u>		•		
ber		Add lines 13 through 23	62,018	3	33,820		27,000
0	25	Contributions, gifts, grants paid	130,015	5			130,015
	26	Total expenses and disbursements. Add lines 24 and 25	192,033	3	33,820		157,015
	27	Subtract line 26 from line 12:	, ==		,		, ==
	a	Excess of revenue over expenses and disbursements	-46,043	3			
	b	Net investment income (if negative, enter -0-)	.5,515		62,170		
	С	Adjusted net income (if negative, enter -0-)					
For	Paper	work Reduction Act Notice, see instructions.		С	at. No. 11289>	(For	m 990-PF (2019)

Beginning of year

3,000

3,000

2,429,589

Page 2

247,437

2,985,251

End of year

242,955

3,000

3,000

2,383,546

2,426,589

2,380,546

2,380,546 Form 990-PF (2019)

-46,043

1

2

3

4

5

6

	3	Accounts receivable				
		Less: allowance for doubtful accounts ▶				
	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)				
		Less: allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)	251,732	چ ا	213,844	216,383
	h	Investments—corporate stock (attach schedule)	1.824.437	99:1	1.781.728	2.376.412

Investments—corporate bonds (attach schedule) 243,858 C Investments—land, buildings, and equipment: basis ▶ 11 Less: accumulated depreciation (attach schedule) 12 Investments-mortgage loans . . 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (describe 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 2,429,589 2,383,546

Attached schedules and amounts in the description column

Form 990-PF (2019)

Balance Sheets

Part II

17

18

19

20

21

22

23

30

Part III

2

3

Liabilities

Grants payable

Other liabilities (describe -_

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Accounts payable and accrued expenses .

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

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

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

Fund Balances Foundations that follow FASB ASC 958, check here ▶ and complete lines 24, 25, 29 and 30. 2,426,589 24 Net assets without donor restrictions . 2,380,546 25 Net assets with donor restrictions . Foundations that do not follow FASB ASC 958, check here ▶ □ and complete lines 26 through 30. ŏ 26 Assets 27 Paid-in or capital surplus, or land, bldg., and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds Net 29 Total net assets or fund balances (see instructions) 2,426,589 2 380 546

Page **3**

	e the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		(b) How acquir P—Purchas D—Donatio	e /.	(c) Pate acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a WELLS FARGO 7600 - ST	COVERED		P			
b WELLS FARGO 7600 - LT			P			
c WELLS FARGO 7600 - LT	NON COVERED		Р			
d CAPITAL GAINS DIVIDEN	NDS		Р			
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) r other basis pense of sale		Gain d	h) or (loss) on minus (g)
2	(0) allowable)	pius ex	•	,946	(e) plus (i	1,030
	70,171			,793		22,378
	8,792			,616		-824
				,616		
d	526			_		526
e						
Complete only for assets	s showing gain in column (h) and ow (j)	ned by the foundatio	n on 12/31/69 (k)			(I) h) gain minus
(i) F.M.V. as of 12/31/69	Adjusted basis		ss of col. (i) ol. (j), if any	(ol. (k), but not	less than -0-) or om col.(h))
а						1,030
b						22,378
С						-824
						526
d						
e 2 Capital gain net income		If gain, also enter in If (loss), enter -0- in		} 2		23,110
2 Capital gain net income 3 Net short-term capital	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	If (loss), enter -0- ir 1222(5) and (6):	Part İ, line 7	} 2		23,110
e 2 Capital gain net income 3 Net short-term capital of gain, also enter in Pain Part I, line 8 Part V Qualification I	gain or (loss) as defined in sections and I, line 8, column (c) (see instructi	If (loss), enter -0- in 1222(5) and (6): lons). If (loss), enter	Part I, line 7	} 3		23,110
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I (For optional use by domestic part part part part part part part part	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction of the column of th	If (loss), enter -0- in 1222(5) and (6): lons). If (loss), enter	Part I, line 7	} 3		23,110
e 2 Capital gain net income 3 Net short-term capital of the short in Part I, line 8 Part V Qualification I (For optional use by domestic part is section 4940(d)(2) applies, leading to the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the foundation liable for the section in Part I (applies) was the s	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction of the column of th	If (loss), enter -0- in 1222(5) and (6): lons). If (loss), enter	Part I, line 7 -0	} 3	ie	23,110 es 🛂 No
e 2 Capital gain net income 3 Net short-term capital of the short of	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction). Under Section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distributa	If (loss), enter -0- in 1222(5) and (6): lons). If (loss), enter	Part I, line 7 -0	} 3 t Income.) eriod?	ie	
e 2 Capital gain net income 3 Net short-term capital of the short of	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 1, line 8, column (c) for Responsive for the section 4940(e) for Responsive for the section 4942 tax on the distributant of qualify under section 4940(e). Do nount in each column for each year; (b) Adjusted qualifying distributions	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investment in the base pert. re making any enable-use assets	t Incomencome.) eriod? ntries.	ie	es V No
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I For optional use by domestic p if section 4940(d)(2) applies, la Was the foundation liable for th if "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investmen net investment i ar in the base pert. re making any e	t Incomencome.) eriod? ntries.	(d) Distribution rat	es 🗹 No
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I For optional use by domestic p if section 4940(d)(2) applies, la Was the foundation liable for th if "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in)	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction of the section 4940(e) for Resorrivate foundations subject to the section 4942 tax on the distributant qualify under section 4940(e). Do nount in each column for each year; (b) Adjusted qualifying distributions 123,785 132,381	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investment in the base pert. re making any et 2,665,513 2,583,421	t Incomencome.) eriod? ntries.	(d) Distribution rat	es V No
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I (For optional use by domestic p If section 4940(d)(2) applies, la Was the foundation liable for th If "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction of the section 4940(e) for Resorrivate foundations subject to the section 4942 tax on the distributant qualify under section 4940(e). Do nount in each column for each year; (b) Adjusted qualifying distributions	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investment in the base pert. re making any et 2,665,513 2,583,421 2,360,759	t Incomencome.) eriod? ntries.	(d) Distribution rat	es No io io.ol. (c)) 0.046439
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I (For optional use by domestic p If section 4940(d)(2) applies, lo Was the foundation liable for the If "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018 2017	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction of the section 4940(e) for Resorrivate foundations subject to the section 4942 tax on the distributant qualify under section 4940(e). Do nount in each column for each year; (b) Adjusted qualifying distributions 123,785 132,381	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investment in the base part. re making any et able-use assets 2,665,513 2,583,421 2,360,759 2,430,717	t Incomencome.) eriod? ntries.	(d) Distribution rat	es No io io io(ol. (c)) 0.046439 0.051243
e 2 Capital gain net income 3 Net short-term capital of If gain, also enter in Pain Part I, line 8 Part V Qualification If For optional use by domestic part of Section 4940(d)(2) applies, left for the foundation liable for the foundation does not foundation does not for the foundation does not foundation d	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 2, line 8, colu	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investment in the base pert. re making any et 2,665,513 2,583,421 2,360,759	t Incomencome.) eriod? ntries.	(d) Distribution rat	es No io (c)) 0.046439 0.051243 0.053638
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I (For optional use by domestic p if section 4940(d)(2) applies, la Was the foundation liable for the if "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018 2017 2016 2015	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 2, line 8, colu	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	et Investment in the base pert. re making any et 2,665,513 2,583,421 2,360,759 2,430,717 2,532,353	t Incomencome.) eriod? ntries.	(d) Distribution rat	es No io (c)) 0.046439 0.051243 0.053638 0.046964
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification I For optional use by domestic p if section 4940(d)(2) applies, lo Was the foundation liable for th if "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018 2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution rationumber of years the foundation representation of the policy of th	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction 1, line 8, column (c) (see instruction 2,	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	ar in the base pert. re making any e able-use assets 2,665,513 2,583,421 2,360,759 2,430,717 2,532,353 5.0, or by the	t Incommon necome.) eriod? ntries.	(d) Distribution rat	es No io (c)) 0.046439 0.051243 0.053638 0.046964 0.048986 0.247270 0.049454
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification II For optional use by domestic p if section 4940(d)(2) applies, lo Was the foundation liable for the if "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018 2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution ration number of years the foundation retion of the part of	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction I, line 8, column (c) (see instruction II, line 8, column (c) (see instruction III, line 8, column (c) (see instruction	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	ar in the base pert. re making any e able-use assets 2,665,513 2,583,421 2,360,759 2,430,717 2,532,353 5.0, or by the	t Incomence (cc	(d) Distribution rat	es No io (c)) 0.046439 0.051243 0.053638 0.046964 0.048986 0.247270 0.049454 2,748,137
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification II (For optional use by domestic p If section 4940(d)(2) applies, la Was the foundation liable for the If "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018 2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution ratio number of years the four 4 Enter the net value of not 5 Multiply line 4 by line 3	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction I, line 8, column (c) (see instruction II, line 8, column (c) (see instruction III, line 8, column (c) (see instruction	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter	ar in the base pert. re making any e able-use assets 2,665,513 2,583,421 2,360,759 2,430,717 2,532,353 5.0, or by the	ariod? ntries. (cc	(d) Distribution rat	es No io (c)) 0.046439 0.051243 0.053638 0.046964 0.048986 0.247270 0.049454 2,748,137 135,906
e 2 Capital gain net income 3 Net short-term capital of If gain, also enter in Pain Part I, line 8 Part V Qualification II (For optional use by domestic part of If section 4940(d)(2) applies, left was the foundation liable for the If "Yes," the foundation does not income I Enter the appropriate and (a) Base period years Calendar year (or tax year beginning in) 2018 2017 2016 2019 3 Average distribution ration number of years the four the net value of not survey the Inter the net value of not survey the Inter 1% of net investments of the Inv	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction II, line 8, column (c) (see instruction III) (see i	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter -0- ions). If (loss), enter -0- ions) and the ction 4940(a) tax on the total on line 2 by than 5 years -0- ions -0-	ar in the base pert. re making any e able-use assets 2,665,513 2,583,421 2,360,759 2,430,717 2,532,353 5.0, or by the	at Incomence (cc	(d) Distribution rat	es No 10 10 10 10 10 10 10 10 10 1
e 2 Capital gain net income 3 Net short-term capital a If gain, also enter in Pa in Part I, line 8 Part V Qualification II (For optional use by domestic p if section 4940(d)(2) applies, In (Was the foundation liable for the if "Yes," the foundation does not 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in) 2018 2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution ratio number of years the four 4 Enter the net value of not 5 Multiply line 4 by line 3 6 Enter 1% of net investm 7 Add lines 5 and 6	gain or (loss) as defined in sections and I, line 8, column (c) (see instruction I, line 8, column (c) (see instruction II, line 8, column (c) (see instruction III, line 8, column (c) (see instruction	If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter -0- in 1222(5) and (6): ions). If (loss), enter -0- ions). If (loss), enter -0- ions) is educed Tax on Net ction 4940(a) tax on ble amount of any yenot complete this pasee instructions before the value of noncharit -0- ions in 122 by than 5 years -0- io	ar in the base pert. re making any e able-use assets 2,665,513 2,583,421 2,360,759 2,430,717 2,532,353 5.0, or by the	ariod? ntries. (cc	(d) Distribution rat	es No io (c)) 0.046439 0.051243 0.053638 0.046964 0.048986 0.247270 0.049454 2,748,137 135,906

	990-F1 (2019)		- 4-20.14	-			P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes 5	⊘ No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🔲 Yes	✓ No			
	(3) Provide a grant to an individual (for travel, study, or other sim	ilar purposes?	☐ Yes S	☑ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v •	⊘ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · Yes	✓ No			
	educational purposes, or for the		* * * * * * * * * * * * * * * * * * * *	— —	,			
b	If any answer is "Yes" to $5a(1)-(5)$,	•		centions described in	⊻ No			
_	Regulations section 53.4945 or in a c	•				5b		
	Organizations relying on a current no			_	_,			
_	If the answer is "Yes" to question 5a			[_			
C	•	• • •	•		_			
	tax because it maintained expenditure	, ,		''	_ No			
	If "Yes," attach the statement requir	· -						
ia	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?			· 🗌 Yes	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be		[6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction?	✓ No			
b	If "Yes", did the foundation receive a	iny proceeds or have any net	income attributable to the	ne transaction?	<u>- </u>	7b		
3	Is the foundation subject to the secti	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or	Γ			
	excess parachute payment during th				.			
					✓ No L			
Pai	and Contractors	fficers, Directors, Trust	lees, roundation Ma	magers, migniy Paid	Employ	ees,		
_								
1	List all officers, directors, trustee				1			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a			se acc	
	(-,	devoted to position	-0-)	deferred compensation		her al	lowand	es
ee A	Additional Data Table							
								,,
2	Compensation of five highest-pai	d employees (other than ti	nose included on line :		none, en	ter "	NONE.	
- \ I	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(a) F	vnanc	se acco	unt
u ,	more than \$50,000	nours per week	(c) Compensation	plans and deferred			owance	
	. ,	devoted to position		compensation				
ONE								
ota	I number of other employees paid ove	r \$50,000	<u></u> .					
					Forr	n 99 0	D-PF (2019

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Part VIII Information About Officers, Directors, and Contractors (continued)	Trustees, Foundation Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professi	ional services (see instructions). If none, enter "No	ONE".
(a) Name and address of each person paid more than \$50,00	00 (b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional se	ervices	0
Part IX-A Summary of Direct Charitable Activities	s	
List the foundation's four largest direct charitable activities during the tax yea organizations and other beneficiaries served, conferences convened, research		Expenses
1 NONE		0
2		_
3		
4		
Part IX-B Summary of Program-Related Investment	ents (see instructions)	
Describe the two largest program-related investments made by the found	dation during the tax year on lines 1 and 2.	Amount
1 NONE		0
2		
		-
All other program-related investments. See instructions.		
3 分 Total. Add lines 1 through 3		0
Total. Add lines I tillough 5		
		Form 990-PF (2019)

4

5

6

7

1a

1b

2

3a 3b

4

5

136.785

136.785

157,015

157.015

156.393

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622

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

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

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

4 5

6

1

2

3

4

5

b

Part XII

P	art XIII Undistributed Income (see instruc	ctions)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				136,785
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			118,137	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
е	From 2018	_			
	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: \$ 157,015				
	Applied to 2018, but not more than line 2a			118,137	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				38,878
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				_
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable amount				_
	—see instructions		0		

e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must

be distributed in 2020 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 2014 not applied on line 5 or line $\hat{7}$ (see instructions). . .

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.

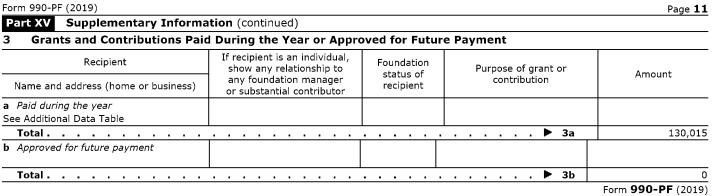
10 Analysis of line 9: a Excess from 2015. **b** Excess from 2016. . c Excess from 2017. . d Excess from 2018. . e Excess from 2019. .

Page 9

97,907

Form **990-PF** (2019)

- - **b** The form in which applications should be submitted and information and materials they should include:
 - c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



Enter gros	s amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exempt
1 Program	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
	_					
	and contracts from government agencies					
_	ership dues and assessments					
investr						
	nds and interest from securities			14	72,880	
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.					
8 Gain o	r (loss) from sales of assets other than					
invent	•			18	23,110	
	come or (loss) from special events: profit or (loss) from sales of inventory					
l1 Other	revenue: a					
е						
L2 Subtot	tal. Add columns (b), (d), and (e)		0		95,990	(
A T-4-1	A d d 15 - 4.3 1 1 / - \					05.000
(See w	tal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)			3	95,990
(See w	orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the	lations.) le Accomplisi	nment of Exem	pt Purposes		95,990
(See w	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet in line 13 instructions to verify calcu Relationship of Activities to the Explain below how each activity for which	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	rorksheet 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 explain the accomplishment of the foundation.	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990
(See w Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the	lations.) le Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	95,990

Form 990-PF (2019)		Pa	ge 13
Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No

` '		•		_ ` /			
(4) Rein	mbursement arrangemen	ts		1b(4)	No		
(5) Loans or loan guarantees							
(6) Performance of services or membership or fundraising solicitations.							
c Sharing o	of facilities, equipment, n	nailing lists, other assets, or paid employees.		1c	No		
of the go	ods, other assets, or ser		olumn (b) should always show the fair market e foundation received less than fair market value ge goods, other assets, or services received.				
(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ıring arrangemei	nts		
							
	•	ectly affiliated with, or related to, one or mon r than section 501(c)(3)) or in section 527? .	<u> </u>	✓ No			

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

Paid	1
Prep	
Use	_

b If "Yes," complete the following schedule. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this 2020-11-09 return Here with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P00040061 employed ▶ 🔲 HENRY A GRANDIZIO er GRANDIZIO WILKINS LITTLE & MATTHEWS Firm's EIN ▶52-2334868 ıly 954 RIDGEBROOK ROAD SUITE 200 Firm's address ▶ Phone no. (410) 494-0885

SPARKS, MD 21152

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans

			and deferred compensation	
PAUL N SINGER	DIRECTOR CO-	0	0	0
10019 REISTERSTOWN RD SUITE 201 OWINGS MILLS, MD 21117	FOUNDER 1.00			
		_	_	_

PAUL N SINGER	DIRECTOR CO-	0	0	0
10019 REISTERSTOWN RD SUITE 201 OWINGS MILLS, MD 21117	FOUNDER 1.00			
EMILY S SINGER	CO-FOUNDER	0	0	0
10019 REISTERSTOWN RD SUITE 201	7 1.00			

OWINGS MILLS, MD 21117				
EMILY S SINGER	CO-FOUNDER	0	0	0
10019 REISTERSTOWN RD SUITE 201 OWINGS MILLS, MD 21117	1.00			
LAURA SINGER WALTERS	AMBASSADOR-	12,000	0	0

10019 REISTERSTOWN RD SUITE 201 OWINGS MILLS, MD 21117	1.00			
LAURA SINGER WALTERS	AMBASSADOR-	12,000	0	0
437 MORRIS DRIVE CHERRY HILL, NJ 08003	TRUSTEE 1.00			

437 MORRIS DRIVE CHERRY HILL, NJ 08003	1.00			
BRIAN SINGER	ADMINISTRATOR-	15,000	0	0
2009 FARM POND COURT REISTERSTOWN, MD 21136	TRUSTEE 1.00			
JOY SINGER	TRUSTEE	0	0	0

2009 FARM POND COURT REISTERSTOWN, MD 21136	TRUSTEE 1.00			
JOY SINGER	TRUSTEE	0	0	0
2009 FARM POND COURT	1.00			

REISTERSTOWN, MD 21136				
JOY SINGER	TRUSTEE	0	0	0
2009 FARM POND COURT REISTERSTOWN, MD 21136	1.00			

2009 FARM POND COURT REISTERSTOWN, MD 21136	TRUSTEE	0	0	
RICHARD WALTERS	TRUSTEE	0	0	

1.00

12 SOUTHWOOD DRIVE CHERRY HILL, NJ 08003

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 AID TO VICTIMS OF DOMESTIC ABUSE -INONE PC TO SUPPORT THE 2,600

AVDA PO BOX 6161 DELRAY BEACH, FL 33482			ORGANIZATION'S PROGRAMS.	
ALZHEIMER'S ASSOCIATION 1850 YORK ROAD SUITE D TIMONIUM, MD 21093	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,500
	1	l		

ALZHEIMER'S ASSOCIATION 1850 YORK ROAD SUITE D TIMONIUM, MD 21093	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,500
ANTI-DEFAMATION LEAGUE 1100 CONNECTICUT AVE NW 1020 WASHINGTON, DC 20036	NONE		TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000

Total .

130,015

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

R & O PATEROAD MUSEUM	NONE	DC.	TO SUPPORT THE	200
a Paid during the year				
Name and address (home or business)	or substantial contributor	recipient		

901 WEST PRATT STREET BALTIMORE, MD 21223	NONE	PC	ORGANIZATION'S PROGRAMS.	200
BALTIMORE CHILD ABUSE CENTER	NONE	PC	TO SUPPORT THE	3,000

BALTIMORE, MD 21223			ORGANIZATION 3 PROGRAMS.	
BALTIMORE CHILD ABUSE CENTER 2300 N CHARLES STREET 400 BALTIMORE, MD 21208	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	3,000
CHESAPEAKE BAY FOUNDATION	NONE	PC	TO SUPPORT THE	4,000

2300 N CHARLES STREET 400 BALTIMORE, MD 21208	NONE	PC	ORGANIZATION'S PROGRAMS.	3,000
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVE ANNAPOLIS, MD 21403	NONE	PC	TO SUPPORT THE PRESERVATION OF THE BAY	4,000

BALTIMORE, MD 21208			ONG/WIZZ/WIGHTS TROCKWINS.	
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVE ANNAPOLIS, MD 21403	NONE	PC	TO SUPPORT THE PRESERVATION OF THE BAY	4,000
Total			▶ 3a	130.015

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NONE PC 250 CHESTNUT RIDGE FIRE DEPT TO SUPPORT THE 12020 CREENCRRING AVE ODCANIZATIONIC DDOCDAMC

OWINGS MILLS, MD 21117			ORGANIZATION 3 FROGRAMS.	
CHILD FUND 2821 EMERYWOOD PARKWAY RICHMOND, VA 23294	NONE	PC	TO SUPPORT THE FOUNDATION'S MISSION IN HELPING CHILDREN IN NEED.	2,000
CURE SMA925 BUSSE RD	NONE	PC	TO SUPPORT THE	500

2821 EMERYWOOD PARKWAY RICHMOND, VA 23294	NONE	PC	FOUNDATION'S MISSION IN HELPING CHILDREN IN NEED.	2,00
CURE SMA925 BUSSE RD	NONE	PC	TO SUPPORT THE	50

RICHMOND, VA 23294			HELPING CHILDREN IN NEED.	
CURE SMA925 BUSSE RD	NONE	PC	TO SUPPORT THE	50

CURE SMA925 BUSSE RD NONE PC TO SUPPORT THE ORGANIZATION'S PROGRAMS.	50

Total .

D	NONE	PC	TO SUPPORT THE	
60007			ORGANIZATION'S PROGRAMS.	

130,015

■ 3a

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 CYSTIC FIBROSIS FOUNDATION NONE PC TO SUPPORT THE 256 4550 MONTGOMERY AVE SUITE 1100N ORGANIZATION'S PROGRAMS. RETHESDA MD 20814

DETTIESDA, MD 20014				
DAYS END FARM HORSE RESCUE 1372 WOODBINE ROAD WOODBINE, MD 21797	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000
DELAWARE VALLEY GOLDEN RETREIVER RESCUE 60 VERA CRUZ RD REINHOLDS, PA 17569	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,401

Total . .

130,015

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

a Paid during the year

DONORSCHOOSE134 W 37TH ST NEW YORK, NY 10018

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

Purpose of grant or contribution

recipient

TO SUPPORT THE ORGANIZATION'S PROGRAMS.

NEW YORK, NY 10018	NONE	PC	ORGANIZATION'S PROGRAMS.	928
DREXEL UNIVERSITY 3141 CHESTNUT ST PHILADELPHIA, PA 19104	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	7,000
EQUINE ASSISTED THERAPIES OF SOUTH FLORIDA TRADEWINDS PARK NORTH 3600 WEST SAMPLE ROAD	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000

130,015

COCONUT CREEK, FL 33073

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, Purpose of grant or Foundation 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 FFED THE CHILDRENPO BOX 9 NONE PC 250 TO SUPPORT ORGANIZATION OKLAHOMA CITY, OK 73101 MISSION

TO SUPPORT THE

TO SUPPORT THE

ORGANIZATION'S PROGRAMS.

ORGANIZATION'S PROGRAMS.

■ 3a

1,100

50

130,015

NONE

NONE

FOR ALL ANIMALS

4520 WARDS CHAPEL RD

OWINGS MILLS, MD 21117
GARRISON FOREST SCHOOL

OWINGS MILLS, MD 21117

300 GARRISON FOREST ROAD

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 HUMANE SOCIETY OF WICOMICO NONE PC TO SUPPORT THE 1,000

COUNTY 5130 CITATION DRIVE SALISBURY, MD 21804			ORGANIZATION'S PROGRAMS.	
IRVINE NATURE CENTER 11201 GARRISON FOREST RD	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	5,000

IRVINE NATURE CENTER 11201 GARRISON FOREST RD OWINGS MILLS, MD 21117	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	5,0
IVY WOODS FELINE SANCTUARY PO BOX 88	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS	2

ı	IRVINE NATURE CENTER 11201 GARRISON FOREST RD OWINGS MILLS, MD 21117	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	5,0
	IVY WOODS FELINE SANCTUARY PO BOX 88	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS	2

11201 GARRISON FOREST RD DWINGS MILLS, MD 21117			ORGANIZATION'S PROGRAMS.	
VY WOODS FELINE SANCTUARY PO BOX 88	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS	2

OWINGS MILES, MD 21117				<u> </u>
IVY WOODS FELINE SANCTUARY PO BOX 88 WESTMINISTER, MD 21157	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS	250
WESTMINISTER, MD 21157				

За

130,015

INONE	I PC	TO SUPPORT THE	
		ORGANIZATION'S PROGRAMS	
	NONE	NONE PC	1

Total .

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

Total .

a Paid during the year				
JEWISH FEDERATION OF PALM BEACH 4501 COMMUNITY DRIVE	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	10,150

WEST PALM BEACH, FL 33417				
JEWISH MUSEUM OF MARYLAND 15 LLOYD STREET BALTIMORE, MD 21202	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	

JEWISH MUSEUM OF MARYLAND 15 LLOYD STREET BALTIMORE, MD 21202	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000
JEWISH NATIONAL FUND 2 RESERVOIR CIRCLE SUITE 203	NONE	PC	TO SUPPORT THE ORGANIZATION'S ACTIVITIES	17,500

BALTIMORE, MD 21202			OKGANIZATION S PROGRAMS.	
JEWISH NATIONAL FUND 2 RESERVOIR CIRCLE SUITE 203 BALTIMORE, MD 21208	NONE	PC	TO SUPPORT THE ORGANIZATION'S ACTIVITIES	17,500

130,015

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 JOHNS HOPKINS DEPARTMENT OF NONE PC TO SUPPORT THE 1,000 **PSYCHIATRY** ORGANIZATION'S PROGRAMS. 550 NORTH BROADWAY

BALTIMORE, MD 21205				
JOHNS HOPKINS HEART AND VASCULAR INSTITUTE 600 N WOLFE STREET BALTIMORE, MD 21205	NONE	PC	TO SUUPPORT THE ORGANIZATION'S PROGRAMS.	

JOHNS HOPKINS HEART AND VASCULAR INSTITUTE 600 N WOLFE STREET BALTIMORE, MD 21205	NONE	PC	TO SUUPPORT THE ORGANIZATION'S PROGRAMS.	1,000
KENNEDY KREIGER INSTITUTE	NONE	PC	TO SUPPORT THE	3,200

VASCULAR INSTITUTE 600 N WOLFE STREET BALTIMORE, MD 21205			ORGANIZATION'S PROGRAMS.	
KENNEDY KREIGER INSTITUTE 707 NORTH BROADWAY	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	3,2

600 N WOLFE STREET BALTIMORE, MD 21205				
KENNEDY KREIGER INSTITUTE 707 NORTH BROADWAY	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	3,200

BALTIMORE, MD 21203				İ
KENNEDY KREIGER INSTITUTE 707 NORTH BROADWAY	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	3,

Total .

707 NORTH BROADWAY BALTIMORE, MD 21205	NONE	rc	ORGANIZATION'S PROGRAMS.	3,200

130,015

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

	or substantial contributor			
a Paid during the year				
KRISTEN RITA STROUSE FOUNDATION 10709 POT SPRING ROAD	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000

COCKEYSVILLE, MD 21030				
LEUKEMIA AND LYMPHOMA SOCIETY 100 PAINTERS MILL RD SUITE 400 OWINGS MILLS, MD 21117	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	150
MARYLAND HISTORICAL SOCIETY	NONE	PC	TO SUPPORT THE	2,000

Total			▶ 3a	130,015
MARYLAND HISTORICAL SOCIETY 201 W MONUMENT ST BALTIMORE, MD 21201	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,000
100 PAINTERS MILL RD SUITE 400 OWINGS MILLS, MD 21117	NONE	PC	ORGANIZATION'S PROGRAMS.	150

Recipient If recipient is an individual, Purpose of grant or Foundation 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

a raid daring the year				
MARYLAND SCIENCE CENTER 601 LIGHT STREET BALTIMORE, MD 21230	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500
MARYLAND SPCASSOO FALLS BOAD	NONE	DC.	TO SUPPORT THE PROTECTION	1 500

BALTIMORE, MD 21230				
MARYLAND SPCA3300 FALLS ROAD BALTIMORE, MD 21211	NONE	PC	TO SUPPORT THE PROTECTION OF ANIMALS.	1,500
MAZZONI CENTER1348 BAINBRIDGE ST	NONE	PC	TO SUPPORT THE	1,000

BALTIMORE, MD 21211	NONE		OF ANIMALS.	1,300
MAZZONI CENTER1348 BAINBRIDGE ST PHILADELPHIA, PA 19147	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000

Total .

130.015

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

	or substantial contributor			
a Paid during the year				
MCDONOGH SCHOOL 8600 MCDONOGH RD	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500

8600 MCDONOGH RD OWINGS MILLS, MD 21117		ORGANIZATION'S PROGRAMS.	
MOORE COLLEGE OF ART & DESIGN 1916 RACE ST	NONE	 TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500

MOORE COLLEGE OF ART & DESIGN 1916 RACE ST PHILADELPHIA, PA 19103	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500
NATIONAL AQUARIUM OF BALTIMORE 501 E PRATT STREET	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500

1916 RACE ST PHILADELPHIA, PA 19103			ORGANIZATION'S PROGRAMS.	
NATIONAL AQUARIUM OF BALTIMORE 501 E PRATT STREET BALTIMORE, MD 21202	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500

71112 (3 22 1111) (7 17 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
NATIONAL AQUARIUM OF BALTIMORE 501 E PRATT STREET BALTIMORE, MD 21202	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500
Total			▶ 3a	130,015

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 NATIONAL PARK FOUNDATION INC. NONE PC TO SUPPORT THE 1,000 1110 VERMONT AVE NW STE 200 ORGANIZATION'S PROGRAMS. WASHINGTON, DC 20005

I .				
OCEAN CITY VOLUNTEER FIRE COMPANY INC 1409 PHILADELPHIA AVENUE OCEAN CITY, MD 21842	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	250
PEGGY ADAMS ANIMAL RESCUE LEAGUE	NONE	PC	TO SUPPORT THE	250

COMPANY INC 1409 PHILADELPHIA AVENUE OCEAN CITY, MD 21842			ORGANIZATION'S PROGRAMS.	
PEGGY ADAMS ANIMAL RESCUE LEAGUE	NONE	PC	TO SUPPORT THE	2

OCEAN CITY, MD 21842				
PEGGY ADAMS ANIMAL RESCUE LEAGUE 3200 N MILITARY TRL 3100 WEST PALM REACH EL 33409	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	250

130,015

OCLAN CITT, ND 21042				
PEGGY ADAMS ANIMAL RESCUE LEAGUE 3200 N MILITARY TRL 3100 WEST PALM BEACH, FL 33409	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	

PEGGY ADAMS ANIMAL RESCUE LEAGUE	NONE	PC	TO SUPPORT THE	
3200 N MILITARY TRL 3100			ORGANIZATION'S PROGRAMS.	
WEST PALM BEACH, FL 33409				1

PEGGY ADAMS ANIMAL RESCUE LEAGUE	NONE	PC PC	TO SUPPORT THE	
3200 N MILITARY TRL 3100			ORGANIZATION'S PROGRAMS.	
WEST PALM BEACH, FL 33409				

Total . .

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				
PHILADELPHIA MURAL ARTS PROGRAM 1729 MT VERNON ST PHILADELPHIA, PA 19130	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000

PHILADELPHIA MUSEUM OF ART 2600 BENJAMIN FRANKLIN PKWY PHILADELPHIA, PA 19130	NONE	 TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500
PHILADELPHIA, PA 19130			

PHILADELPHIA MUSEUM OF ART 2600 BENJAMIN FRANKLIN PKWY PHILADELPHIA, PA 19130	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500
PHILADELPHIA PHOTO ARTS CENTER 1400 N AMERICAN ST UNIT 103 PHILADELPHIA, PA 19122	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,000

2600 BENJAMIN FRANKLIN PKWY PHILADELPHIA, PA 19130	NONE		ORGANIZATION'S PROGRAMS.	2,300
PHILADELPHIA PHOTO ARTS CENTER 1400 N AMERICAN ST UNIT 103 PHILADELPHIA, PA 19122	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,000
Total	130,015			

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 DI ANNIED DADENTHOOD OF SOLITH NONE ا مر TO SHIPPORT THE 500

FLORIDA 2300 N FLORIDA MANGO RD WEST PALM BEACH, FL 33409	NONE	rc .	ORGANIZATION'S PROGRAMS.	300
PLAY FOR PINK 60 E 56TH ST 8TH FLOOR	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS	3,500

PLAY FOR PINK 60 E 56TH ST 8TH FLOOR NEW YORK, NY 10022	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS	3,500
RONALD MCDONALD HOUSE CHARITIES 3925 CHESTNUT ST 3110 PHILADELPHIA PA 19104	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	350

NEW YORK, NY 10022				
RONALD MCDONALD HOUSE CHARITIES 3925 CHESTNUT ST 3110 PHILADELPHIA, PA 19104	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	350
Total			▶ 3a	130,015

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

Recipient

Amount

Purpose of grant or contribution

Purpose of grant or contribution

recipient

Purpose of grant or contribution

recipient

Purpose of grant or contribution

Amount

Amount

a Paid during the year

ROSE OF SHARON EQUESTRIAN SCHOOL 5630 SHARON DRIVE GLEN ARM, MD 21057	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000
RUDE RANCH ANIMAL RESCUE 3200 IVY WAY	NONE	PC	TO SUPPORT THE PROTECTION OF ANIMALS	250

,				
RUDE RANCH ANIMAL RESCUE 3200 IVY WAY HARWOOD, MD 20776	NONE	PC	TO SUPPORT THE PROTECTION OF ANIMALS	250
SAMUEL READY SCHOLARSHIPS PO BOX 202 RIDGEWOOD, MD 21139	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	250
Total			▶ 3a	130,015

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

	or substantial contributor			
a Paid during the year				
SIGMA PI EDUCATIONAL FOUNDATION 106 NORTH CASTLE HEIGHTS AVE	NONE	PC	TO SUPPORT THE FOUNDATION EDUCATIONAL PROGRAM	500

LEBANON, TN 37087				
SOUTHERN POVERTY LAW CENTER 403 WASHINGTON AVE	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	
MONTCOMERY AL 36104		ı		1

SOUTHERN POVERTY LAW CENTER 403 WASHINGTON AVE MONTGOMERY, AL 36104	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,500
TEMPLE BETH EL	NONE	PC	TO SUPPORT THE	500

MONTGOMERY, AL 36104			ORGANIZATION'S PROGRAMS.	
TEMPLE BETH EL 8101 PARK HEIGHTS AVENUE BALTIMORE, MD 21208	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500

MONIGOMERY, AL 36104				
TEMPLE BETH EL 8101 PARK HEIGHTS AVENUE BALTIMORE, MD 21208	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500

8101 PARK HEIGHTS AVENUE		ORGANIZATION'S PROGRAMS.	1
BALTIMORE, MD 21208			

BALTIMORE, MD 21208		ORGANIZATION S PROGRAMS.	
Total	 	▶ 3a	130,015

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 TEMPLE OHER SHALOM NONE l pc TO SUPPORT THE 5 400 l

7310 PARK HEIGHTS AVENUE BALTIMORE, MD 21208	NONE		ORGANIZATION'S PROGRAMS.	3,100
THE ASSOCIATED JEWISH CHARITIES 101 W MT ROYAL AVENUE BALTIMORE, MD 21201	NONE	PC	TO SUPPORT THE EDUCATIONAL, RELIGIOUS AND SOCIAL SERVICES OF THE JEWISH	6,330

THE ASSOCIATED JEWISH CHARITIES 101 W MT ROYAL AVENUE BALTIMORE, MD 21201	NONE	PC	TO SUPPORT THE EDUCATIONAL, RELIGIOUS AND SOCIAL SERVICES OF THE JEWISH COMMUNITY.	6,330
THE FLORIDA HOLOCAUST MUSEUM 55 5TH ST S ST PETERSBURG, FL 33701	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500

Total			130,015	
THE FLORIDA HOLOCAUST MUSEUM 55 5TH ST S ST PETERSBURG, FL 33701	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500
BALTIMORE, MD 21201			COMMUNITY.	

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 -NIONE 4 000

THE SOUP KITCHEN OF BOYNTON BEACH 8645 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33472	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000
THE SLOW BURN THEATRE COMPANY 201 SW 5TH AVENUE FORT LAUDERDALE, FL 33312	NONE	PC	ORGANIZATION'S PROGRAMS.	1,000

BEACH 8645 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33472			ORGANIZATION'S PROGRAMS.	_,,,,,
UNITED FOR THE MENTALLY ILL OF PALM BEACH FL 600 N CONGRESS AVE DELRAY BEACH, FL 334453464	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	500

Total .

3a

130,015

UNITED STATES HOLOCAUST MEMORIAL 100 RAOUL WATENBERG PLACE SW WASHINGTON, DC 20024	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	8,000
WE CHARITY300 W ADAMS SUITE 1000 CHICAGO, IL 60606	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500
WEEKEND BACKPACKS FOR HOMELESS	NONE	PC	TO SUPPORT THE	6.400

WE CHARITY300 W ADAMS SUITE 1000 CHICAGO, IL 60606	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	2,500
WEEKEND BACKPACKS FOR HOMELESS KIDS PO BOX 21486 BALTIMORE, MD 21282	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	6,400
Total			130,015	

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				
WYPR-NPR NEWS STATION	NONE	PC	TO SUPPORT THE MISSION OF	2,000

2216 NORTH CHARLES STREET BALTIMORE, MD 21218	None		PUBLIC RADIO.	2,000
YELLOWSTONE FOREVER 222 E MAIN ST 301 ROZEMAN MT 59715	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000

ı	•				
	YELLOWSTONE FOREVER 222 E MAIN ST 301 BOZEMAN, MT 59715	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	1,000
	YORK COUNTY MEDICAL SOCIETY 1001 S GEORGE ST	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	250

BOZEMAN, MT 59715			ORGANIZATION 3 FROGRAMS.	
YORK COUNTY MEDICAL SOCIETY 1001 S GEORGE ST YORK, PA 17403	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	250
			•	

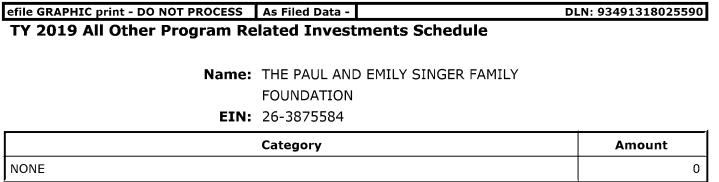
YORK COUNTY MEDICAL SOCIETY 1001 S GEORGE ST YORK, PA 17403	NONE	PC	TO SUPPORT THE ORGANIZATION'S PROGRAMS.	250
Total 3a			130.015	

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data	-	DI	N: 93491318025590	
TY 2019 Accounting Fees Schedule						
	Name:	THE PAUL A	ND EMILY SING	ER FAMILY		
	FOUNDATION					
EIN: 26-3875584						
Category	Amo	ount N	let Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

4,088

4,088

ACCOUNTING FEES



efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491318025590				
TY 2019 Investments Corporate Bonds Schedule						
-						
Name:	THE PAUL AND EMILY S	INGER FAMILY				
	FOUNDATION					

EIN: 26-3875584 Investments Corporate Bonds Schedule Name of Bond End of Year Book Value Market Value

242,955

247,437

CORPORATE BONDS

effie GRAPHIC print - DO NOT PROCESS	AS FIIED Data -	DLN: 93491318025590
TY 2019 Investments Corpora	ate Stock Schedule	
Name:	THE PAUL AND EMILY SINGER F	FAMILY
	FOUNDATION	

DIN. 0240121002EE00

2,376,412

1,781,728

offic CDADUTC print DO NOT DDOCESS

EQUITIES AND MUTUAL FUNDS

EIN: 26-3875584

Investments Corporation Stock Schedule

Name of Stock
End of Year Book
Value
Market Value

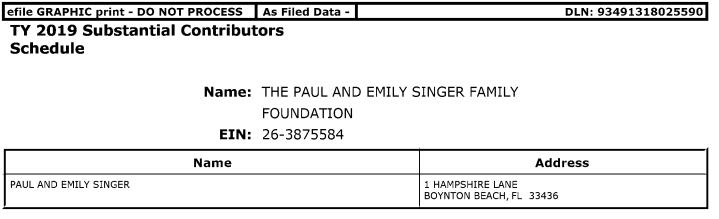
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491318025590			
TY 2019 Investments Government Obligations Schedule						
	_					
Name:	THE PAUL AND	EMILY SINGER FAMILY				
	FOUNDATION					
EIN:	26-3875584					
US Government Securities - End of Year Book Value:		213,844				
US Government Securities - End of Year Fair Market Value:		216,383				
State & Local Government Securities - End of Year Book Value:		0				
State & Local Government Securities - End of Year Fair Market Value:		0				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491318025590		
TY 2019 Other Expenses Schedule						
Name:	THE PAUL AND	EMILY SINGER FA	AMILY			
	FOUNDATION					
EIN:	: 26-3875584					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ADR FEES	23	23		0		

28,087

28,087

WELLS FARGO MANAGEMENT FEES



efile GRAPHIC print - DO NOT PROCESS A	s Filed Data	-	D	LN: 93491318025590		
TY 2019 Taxes Schedule						
Name: THE PAUL AND EMILY SINGER FAMILY FOUNDATION						
EIN: 26-3875584						
Category	Category Amount Net Investment Adjusted Net Disburseme for Charitate Purposes					
FOREIGN TAXES PAID ON INVESTMENT INCOME	1,622	1,622		0		
PRIOR YEAR EXCISE TAX PAID	1,198	0		0		

efile GRAPHIC print - D	O NOT PROCESS As Filed Data	-		DLN: 93491318025590		
Schedule B	Sched	dule of Contributors		OMB No. 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	artment of the Treasury ► Go to <u>www.irs.gov/Form990</u> for the latest information.			2019		
Name of the organization THE PAUL AND EMILY SIN FOUNDATION	GER FAMILY		Employer i 26-3875584	dentification number		
Organization type (che	ck one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number)) organization				
	4947(a)(1) nonexempt ch	naritable trust not treated as a pi	rivate foundation			
	☐ 527 political organization	☐ 527 political organization				
Form 990-PF	☑ 501(c)(3) exempt private	foundation				
	4947(a)(1) nonexempt ch	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable private foundation					
	tion filing Form 990, 990-EZ, or 990 property) from any one contributor.					
Special Rules						
under sections 50 received from an	on described in section 501(c)(3) fil 09(a)(1) and 170(b)(1)(A)(vi), that cl y one contributor, during the year, to e 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 cotal contributions of the greater of	or 990-EZ), Part II, line 13	, 16a, or 16b, and that		
during the year, t	on described in section 501(c)(7), (a otal contributions of more than \$1,0 he prevention of cruelty to children	000 <i>exclusively</i> for religious, cha	ritable, scientific, literary,			
during the year, of If this box is check purpose. Don't co	on described in section 501(c)(7), (a contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the ble, etc., contributions totaling \$5,000 kers.	s, charitable, etc., purposes, but ons that were received during the General Rule applies to this org	no such contributions tot year for an <i>exclusively</i> roganization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>		
990-EZ, or 990-PF), but	n that isn't covered by the General F it must answer "No" on Part IV, line art I, line 2, to certify that it doesn't r	e 2, of its Form 990; or check the	box on line H of its Form	rm 990, 1 990-EZ		
For Paperwork Reduction A for Form 990, 990-EZ, or 990	ct Notice, see the Instructions I-PF.	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2019)		

Name of organization THE PAUL AND EMILY SINGER FAMILY FOUNDATION		Employer identification number 26-3875584		
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if ad	dditional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	PAUL AND EMILY SINGER 1 HAMPSHIRE LANE	\$ 50,000	✓ Person☐ Payroll☐ Noncash	
	BOYNTON BEACH, FL 33436		(Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization AND EMILY SINGER FAMILY ON			Employer identification number 26-3875584
Part III	Exclusively religious, charitable, etc., contribut than \$1,000 for the year from any one contribut organizations completing Part III, enter the tota the year. (Enter this information once. See instr Use duplicate copies of Part III if additional space i	or. Complete coll of exclusively reductions.) ► \$	umns (a) throug	h (e) and the following line entry. For
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift		
				onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Trans		onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-				
	Transferee's name, address, and ZIP 4		Relation	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Trans		onship of transferor to transferee
			Sel	hedule B (Form 990, 990-EZ, or 990-PF) (2019)