EXTENDED TO NOVEMBER 16, 20 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

Go to your use gov/Form900PE for perfections and the latest information.

Depa	urtmen	it of the Treasury venue Service		5							it may be ma the latest info		191	2	Open to Public	Inspection
		idar year 2019	or tax year			ov		2019		, and e		DEC 3	1. 2	019	T Open to 1 dance	mspeasier.
		f foundation			<del>-</del> -:	<u>~ · · · · · · · · · · · · · · · · · · ·</u>	-,			, <b>,</b>	<b>u</b>	A Employ			number	
<b>√</b> E	IC	HARD AN	D SAR	RA FOI	JIO F	OUN	IDAT	ION.	INC			84-	3313!	527		
_		and street (or PO t									Room/suite	B Telepho				
_6	20	0 GLEN	FALLS	RD									-949		76	
Cit	y or t	own, state or pr	ovince, cou	intry, and Z	IP or foreig	gn pos	stal code	?	-			C If exempt	on applicati	on is pe	nding, check here	
_F	EΙ	STERSTO	WN, M	ID 21	L136											
G	Check	all that apply	X	Initial retui	rn			Initial return	of a fo	rmer public o	harity	D 1. Fore	gn organiz	ations,	check here	
				Final retur	n			Amended re	turn			2 50000			tion the SEO( test	
_				Address c				Name chang				check	here and att	ach cor	iting the 85% test, nputation	
H_1		type of organiz			-نے: ۱	<u> </u>		ate foundat			94				us was terminate	ed
<u> </u>		ction 4947(a)(1		•	1			able private				1			A), check here	
		arket value of all		end of year	J Acco	_ `	j metno er (spec		Jasn	Accr	uai				0-month termina	ation
	•\$	Part II, col. (c), li		2,510.	(Part I. ci			ist be on ca	sh basi	s.)		unders	ection 507	(ני)(יו)(	B), check here	
	art I	☐ (The total of amo	evenue an	d Expenses	S nd (d) may n		(a) f	Revenue and	i	(b) Net in	vestment		djusted net	:	(d) Disbursel	
_	1 .	necessarily equa	al the amoun	ts in column (	(a) )		<del></del>	nses per bo		inco	)IIIe		ncome		(cash basis	
_	1	Contributions,				,  -		430,2	19.	· · · · · · · · · · · · · · · · · · ·		N	I/A			
Í	2	Interest on saving	s and tempo	n is not required prary	to attach Sch B	'  -			3.		3.	<b> </b>			CM A MENATRA	7m 1
1	3	cash investments Dividends and		m constitu	•	-		2,3			$\frac{3.}{2,340.}$				<u>STATEMEI</u> STATEMEI	
		Gross rents	111161621110	iii securille	3			4,3	± U •		2,340.		<del></del>		SIMIEMEI	N 1 4
	1 .	Net rental income	or (loss)						-							
41	١ ـ	Net gain or (loss)	· · · · —	assets not on	line 10			2,7	86.						···	
Revenue	b	Gross sales price assets on line 6a	for all		2,576	<u>.</u> [				·		Ín	ismai ii			
eve	7	Capital gain net in		Part IV, line 2	)						2,786.	Re	chived	118	LU WISTONIO	
α	8	Net short-term	capital gail	n									Area	317	,	
	9	Income modific														
	10a	and allowances	- Gluins	<del></del>		-							<u> NOV</u>	16	2020	
	1	Less Cost of goo	•													
	1	Gross profit or	(IOSS)			-							. Ogd	100	1 170	
	11 12	Other income Total Add line	e 1 through	h 11		-		435,3	1 2		5,129.		<u>, Oğı</u>	<u>aen,</u>	<u>nī                                     </u>	<del></del>
	13	Compensation of			s etc	_		<del>1</del> 33,3,	0.		<u> </u>					0.
	14	Other employed			3, 610								<del> </del>		<u>-</u>	<u>.</u>
	15	Pension plans,		•							****					
ses	16a	Legal fees														
ne d	b	Accounting fee	S													
SĀ	C	Other profession	nal fees													
ڇڙع	17	Interest		~-		$\vdash$			-							
တန္တီ	18	Taxes			MT 3			<b>'</b>	78.	-	78.	<u> </u>				0.
قِّنر ت	19	Depreciation ar	na depletio	n		-			$\rightarrow$							
₹  -	20 21	Occupancy Travel, confere	ncae and a	meetinan		$\vdash$			+							
ع راج	22	Printing and pu		needings		-			-							
ع و	23	Other expenses		ST	MT 4	 		٦.	17.	-	238.	-				79.
Operating and Administrative Expenses	24	Total operating				-		<u> </u>								·
per		expenses. Add	-					39	95.		316.					79.
30	25	Contributions,		-					0.							0.
Ō	26	Total expenses	s and disb	ursements.												
	<u> </u>	Add lines 24 ar	nd 25					3 9	95.		316.					<u>79.</u>
	27	Subtract line 26	6 from line	12:					_					ł		
		Excess of revenue	· ·			  -		434,99	3.		4 012				<u>.                                    </u>	
	l	Net investmen				-					4,813.		7 / 7			
	l C	Adjusted net in	ICUINE (If ne	gative, enter	-U-)				- 1			ı IN	/ <u>A</u>	- 1		

Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End o	i of year		
Pari	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing					
2	Savings and temporary cash investments		12,740.	12,740.		
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					
7	Other notes and loans receivable					
	Less; allowance for doubtful accounts					
<u>ه</u> ا و	Inventories for sale or use					
Assets	Prepaid expenses and deferred charges					
10 🏲	a Investments - U.S. and state government obligations					
	b Investments - corporate stock	,				
,	Investments - corporate bonds					
11	Investments - land, buildings, and equipment basis					
	Less accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other STMT 6	0.	422,213.	429,770.		
14	Land, buildings, and equipment; basis					
ĺ	Less accumulated depreciation					
15	Other assets (describe )					
16	Total assets (to be completed by all filers - see the					
	instructions. Also, see page 1, item I)	0.	434,953.	442,510.		
17			<del></del>			
18	Grants payable					
တ္က 19	Deferred revenue					
Figurities 20 21 21 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons		-			
<u>e</u> 21	Mortgages and other notes payable					
그   22	Other liabilities (describe )					
23	Total liabilities (add lines 17 through 22)	0.	0.			
	Foundations that follow FASB ASC 958, check here					
es es	and complete lines 24, 25, 29, and 30.					
2 24	Net assets without donor restrictions					
rund Balar	Net assets with donor restrictions					
ğ	Foundations that do not follow FASB ASC 958, check here	ļ				
<b>?</b>	and complete lines 26 through 30.					
	Capital stock, trust principal, or current funds	0.	0.			
왕   27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Assets or 28 28	Retained earnings, accumulated income, endowment, or other funds	0.	434,953.			
29	Total net assets or fund balances	0.	434,953.	STATEMENT 5		
<b>Z</b>						
30	Total liabilities and net assets/fund balances	0.	434,953.			
Part	III Analysis of Changes in Net Assets or Fund B	alances				
Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	29				
	st agree with end-of-year figure reported on prior year's return)		1	0.		
	r amount from Part I, line 27a		2	434,953.		
	er increases not included in line 2 (itemize)		3	0.		
	lines 1, 2, and 3		4	434,953.		
	reases not included in line 2 (itemize)		5	0.		
	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29	6	434,953.		

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		D SARA FO			<u>, :</u>	INC		8	<u>4-331</u>	3527	Page 3	
Part IV Capital Gains a					(b) H	low ac	quired	(c) Date a	coured	(d) Dat	e sold	
2-story brick wai	ehouse; or cor	nmon stock, 200 sh	s. MLC Co.)		D . B	- Purc - Dona	cquired hase ation	` (mo., da	ay, yr.)	(mó., d	ay, yr.)	
12 INVESTMENT SECU	JRITIES							11/0	5/19	11/1	3/19	
<u>b</u>					ļ							
<u>c</u>					<del>                                     </del>							
<u>d</u>		· · · · · · · · · · · · · · · · · · ·			<del> </del>					_		
<u>e</u>	(f) Donro	ciation allowed	/a\ Co.	st or other basis	<del>                                     </del>	<del></del>		(b) Ga	un or (loss			
(e) Gross sales price		illowable)		expense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))						
a 282,576.				279,79	0.					2	<u>,786.</u>	
b												
С			ļ									
<u>d</u>												
_e	<del> </del>		<u> </u>					<del></del>				
Complete only for assets showing		- ' '					(	I) Gains (Ci	ol. (h) gain ot less thai	minus		
(i) FMV as of 12/31/69	usted basis 12/31/69		cess of col. (i) col (j), if any			CO	Losses (	(from col (	h))			
a										2	,786.	
b												
C										·		
d												
e												
2 Capital gain net income or (net cap	utal loce)	If gain, also ente			}	2				2	,786.	
. •	,	If (loss), enter -0		. 7	7		<u> </u>				, , , , , , ,	
3 Net short-term capital gain or (loss		sections 1222(5) a	nd (6).		٦							
If gain, also enter in Part I, line 8, or If (loss), enter -0- in Part I, line 8	olumn (c)				<b> </b>	3			N/A			
Part V Qualification U	nder Secti	on 4940(e) for	r Reduced	Tax on Net	Inv	estn	nent In	come			<del></del>	
(For optional use by domestic private	foundations si	ibject to the section	4940(a) tax or	net investment in	come	:.)	•			N/A		
•			. ,			•				·		
If section 4940(d)(2) applies, leave th	is part blank.											
Was the foundation liable for the secti	on 4942 tax or	the distributable ar	nount of any y	ear in the base per	riod?					Yes	No	
If "Yes," the foundation doesn't qualify												
1 Enter the appropriate amount in e	ach column fo	each year; see the	instructions be	fore making any e	ntries							
(a) Base period years		(b)	.4	Naturalisa af an	(c)			(d) Distribution ratio				
Calendar year (or tax year beginnin	g in) A	ljusted qualifying dis	stributions	Net value of no	ncharitable-use assets			, (	col. (b) div	ided by col.	(c))	
2018	_											
2017												
2016		<del>-</del>			_							
2015												
2014				<u> </u>				<del>                                     </del>	<del>.</del>	·		
2 Total of line 1, column (d)								2				
3 Average distribution ratio for the 5	-vear hace ner	nd - dwada the total	on line 2 hy 5	0 or by the numb	er of v	/ears		-				
the foundation has been in existen			on mic z by o.	o, or by the name	U, U, y	, cui s		3				
and realization ride bear in expecting		. you.o										
4 Enter the net value of noncharitable	e-use assets fo	or 2019 from Part X,	line 5					4				
5 Multiply line 4 by line 3								5				
6 Enter 1% of net investment incom	e (1% of Part I	, line 27b)						6		<del></del>		
7 Add lines 5 and 6								7		<del></del> .		
8 Enter qualifying distributions from	Part XII, line 4							8		_		
If line 8 is equal to or greater than See the Part VI instructions.			e 1b, and comp	olete that part usin	g a 19	% tax	rate.					
923521 12-17-19				··				<del></del>	F	orm <b>990-</b>	<b>PF</b> (2019)	

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	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - s	ee instru	ctio	ns)	_
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and enter 1%	1			96.	<u>.</u>
	of Part I, line 27b					
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	<del></del>		0.	
3	Add lines 1 and 2	3			96.	<u>.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			96.	<u>_</u>
6	Credits/Payments.					
â	a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.					
t	Exempt foreign organizations - tax withheld at source 6b 0.					
	Tax paid with application for extension of time to file (Form 8868)  6c 96.					
C	1 Backup withholding erroneously withheld 6d 0.					
7	Total credits and payments. Add lines 6a through 6d	7			<u>96.</u>	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8			0.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.	_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		-		_
	Enter the amount of line 10 to be: Credited to 2020 estimated tax	11				_
	art VII-A Statements Regarding Activities			V7		-
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		Yes	No	_
	any political campaign?		1a		X	
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	tion	1b		X	-
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				i	
	distributed by the foundation in connection with the activities.				٦,	
	Did the foundation file Form 1120-POL for this year?		1c		X	-
C	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
_	(1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 •					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х	
_	If "Yes," attach a detailed description of the activities.				Λ	-
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	•				
٠	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•	3		Х	
4.9	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X	-
	olf "Yes," has it filed a tax return on <b>Form 990-</b> T for this year?	N/A			••	•
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	, -	5		Х	•
-	If "Yes," attach the statement required by General Instruction T					-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?		6	Х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	Х		•
						•
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					
	MD					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation		8b	Х		_
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				1
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		9		X	$\sigma$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	IMT 7	10	X		

Pa	art VII-A   Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ►N/A			
14	The books are in care of ► RICHARD FOLIO Telephone no. ►410-94	9 – 4	176	
	Located at ▶6200 GLEN FALLS RD, REISTERSTOWN, MD ZIP+4 ▶21	136		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		- 1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		ŀ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	- 1	J	
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b	.	
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	l		
	6d and 6e) for tax year(s) beginning before 2019?	Ì		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
L	during the year?  Yes X No	- 1		
D	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	Ì	1	
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	_		
4^	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A  Did the foundation invest during the year any amount in a manner that would inconsider the pharteble purposes?	3b		37
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
U	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	_		v
	· · · · · · · · · · · · · · · · · · ·	4b	DE/	X 2010)

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	_	
	<del>                                     </del>	
	-	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services	<u> </u>	<b>•</b>
Part IX-A Summary of Direct Charitable Activities	······································	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	cal information such as the	_
number of organizations and other beneficiaries served, conferences convened, research papers produ	iced, etc.	Expenses
N/A		
		_
		_
	<del>-</del>	
3		_
		-
		-
	· · · · · · · · · · · · · · · · · · ·	7
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
N/A		
		_
		_
All other program-related investments. See instructions		
		-
	<del></del>	-
		7
		7
		7
Total, Add lines 1 through 3	<b></b>	0

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	364,001.
	Average of monthly cash balances	1b	364,001. 11,701.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	375,702.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	_2	0.
3	Subtract line 2 from line 1d	3	375,702.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,636.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	370,066.
6	Minimum Investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,092.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here ▶ ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	3,092.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	96.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,996.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,996.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,996.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	79.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	79.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	79.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies fo	or the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d</b> ) 2019
1 Distributable amount for 2019 from Part XI,				2 006
line 7			<del></del>	2,996.
2 Undistributed income, if any, as of the end of 2019			0	
a Enter amount for 2018 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
<b>b</b> From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line $4^{\cdot} \triangleright \$$ 79.				
a Applied to 2018, but not more than line 2a			0.	
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				79.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a) )  6 Enter the net total of each column as indicated below:				3,
a 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 instr		•	0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				2,917.
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)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
· · · · F				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
l l	<u> </u>			
IO Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019			<del> </del>	L

	AND SARA F			84-331	13527 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · · · · · · · ·			
foundation, and the ruling is effective for		•	n acetion	1042(1)(2) or 140(	10185
b Check box to indicate whether the foun		ig loundation described i		4942(j)(3) or 494	12(1)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(a) Tatal
income from Part I or the minimum	(a) 2019	(0) 2010	(6) 2017	(u) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of		,			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" afternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed					
c "Support" alternative test - enter.					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			l		
(4) Gross investment income					
Part XV   Supplementary Info			if the foundation	n had \$5,000 or mo	re in assets
1 Information Regarding Foundation		uctions.,	·		
a List any managers of the foundation wh	•	than 2% of the total cont	ributions received by th	a foundation before the close	e of any tay
year (but only if they have contributed i			ributions received by the	c touridation before the close	or arry tax
SEE STATEMENT 8	, ,				
b List any managers of the foundation wh	on own 10% or more of th	e stock of a corporation (	or an equally large port	ion of the ownership of a pai	
other entity) of which the foundation ha			(or all oqually large port	ion of the ownership of a par	thoromp or
NONE	-				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	ograms,		
Check here ► X if the foundation of				not accept unsolicited reque	ete for funde. If
the foundation makes gifts, grants, etc.					313 101 141143. 11
a The name, address, and telephone num			i	<del></del>	· · · · · · · · · · · · · · · · · · ·
a The hame, address, and tolephone han	ioor or ornan address or th	o person to whom applic	anono snoula do adaro.		
b The form in which applications should l	be submitted and informat	ion and materials they st	nould include.		
			· · · · · · · · · · · · · · · · · · ·		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	ıl areas, charitable fields,	kınds of institutions, or	other factors.	

Total

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

Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		by section 512, 513, or 514	(e)
4.8	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue;	code		code	711100111	
a b	· <del>    -</del>				<del></del>
	1				·
d					
e					
f	.			· · · · · · · · · · · · · · · · · · ·	
g Fees and contracts from government agencies					
2 Membership dues and assessments				_	
3 Interest on savings and temporary cash					
investments			14	3.	
4 Dividends and interest from securities			14	2,340.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			18	2 706	
than inventory  Net income or (loss) from special events			10	2,786.	<del></del>
O Gross profit or (loss) from sales of inventory	<del>                                     </del>	<del> </del>		<u></u>	
11 Other revenue.					
a					
b					
C					
d					
e		<u>-</u>			
2 Subtotal. Add columns (b), (d), and (e)			0.	5,129.	0 .
13 Total Add line 12, columns (b), (d), and (e)				13	5,129
(See worksheet in line 13 instructions to verify calculations.)					······································
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt F	urposes	

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).	

	0-PF (2				IO FOUNDATIO			313527		ige 13
Part	XVII			nsfers to a	and Transactions	and Relation	ships With Non	charitable		
4 0	441	Exempt Organ					notion FO1(a)	- 1	Yes	No
					ng with any other organizat g to political organizations		ection 50 I(c)		163	140
-		from the reporting found				•				
	) Cash	•	ation to a noncharia	abic exempt of	gamzanon oi.			1a(1)		x
-	) Other							1a(2)	-	X
•	•	sactions:								
		of assets to a noncharita	ible exempt organiza	ation				1b(1)		X
	•	nases of assets from a no						1b(2)		Х
(3	) Renta	al of facilities, equipment,	or other assets	-				1b(3)		Х
(4	) Reim	bursement arrangements	i					1b(4)		X
(5	) Loan:	s or loan guarantees						1b(5)		X
(6	) Perfo	rmance of services or me	mbership or fundra	using solicitation	ons			1b(6)		Х
c St	narıng o	f facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees			1c		X
		•		=	edule. Column ( <b>b)</b> should a	=	-		ets,	
					ed less than fair market va	lue in any transact	ion or sharing arrangen	nent, show in		
		i) the value of the goods,				(4)				
(a) Line	no	(b) Amount involved	(c) Name o		e exempt organization	(0) Descript	tion of transfers, transaction	s, and sharing an	rangeme	ints
				N/A						-
•							<del></del>			
				<del></del> .						
		<del></del>								
		<del></del>								
		<del> </del>	<u> </u>							
		•	•	•	or more tax-exempt organ	nizations described		[] <sub>V</sub>	77	٦
		501(c) (other than section complete the following scheme:		ection 5277				Yes	لم	J No
<u> </u>	res, co	(a) Name of org			(b) Type of organization		(c) Description of rela	ationship		
		N/A			(b) type of organization		(6) 2000			
	·	11/21								
	•					-				
	I				ng accompanying schedules an in taxpayer) is based on all infor			May the IRS	liscuss t	this
Sign	1 🔥	oler, It is true, correct, and con	npiete Decization of p	reparer (other tha	n taxpayer) is based on all infor	mation of which prepa	arer nas any knowledge	return with th shown below	e prepar	er
Here		Curc			11/11/20		IDENT	_ X Yes		No
	Sign	ature of officer or trustee		15	Date	Title	Tokasi Tara	DTIN.		
		Print/Type preparer's na	ime	Preparer's s	ignature of thelat con	Date	1 - 1	PTIN		
Paid				1.1.1	ignatura de Seld con	11/06/04	self- employed	D00105	201	
Prep		HOWARD G.		I TO GOLD	M Doyle	11/06/20	Firm's EIN ► 37	P00106		
	J. UI	Firm's name ► SCH	ъггъъ во;	I LI Ci			rimstin > 3/	-T7002	<b>3</b> U	

Phone no. 618-654-9895

Use Only

Firm's address ▶ P.O. BOX 374

HIGHLAND, IL 62249

# Schedule B

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

Name of the organization

### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545 0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

	R]	ICHA	RD AND	SARA	FOLIO	FOUND	ATION,	INC		84-3313527	
Organiza	tion type (check o	one)									
Filers of:		Secti	on:								
Form 990	or 990-EZ		501(c)(	) (enter nu	mber) organiz	zation					
			4947(a)(1)	nonexempt	charitable tru	ust <b>not</b> trea	ated as a pr	vate founda	ition		
			527 politic	al organızatı	on						
Form 990-PF		X 501(c)(3) exempt private foundation									
		4947(a)(1) nonexempt charitable trust treated as a private foundation									
			501(c)(3) ta	axable priva	te foundation	1					
Note: Onl	Rule	:)(7), (8),	or (10) orga	anization car	n check boxe	es for both				le See instructions	
	•	•		-			-		-	\$5,000 or more (in money or s total contributions	
Special R	lules										
s	sections 509(a)(1)	and 17 or, durir	0(b)(1)(A)(vi ng the year,	), that check total contrib	ked Schedule outions of the	A (Form 9	90 or 990-E	Z), Part II, Iır	ne 13, 16a,	test of the regulations under or 16b, and that received from nt on (i) Form 990, Part VIII, line 1	h,
<b>y</b>	•	utions o	of more than	\$1,000 exc	lusively for re	eligious, ch				any one contributor, during the ational purposes, or for the	
) 	year, contributions s checked, enter l	s <i>exclus</i> here the implete	sively for reli e total conti any of the p	gious, charif ributions that parts unless	table, etc , pu t were receiv the <b>General</b>	urposes, b red during Rule appl	ut no such on the year for the year for the term of term of term of the term of term of term of term of term of te	contributions an exclusive	s totaled m ely religious	any one contributor, during the ore than \$1,000. If this box, charitable, etc, received nonexclusively.	
but it <b>mu</b> s		n Part IV	/, line 2, of i	ts Form 990	, or check the	e box on li	ne H of its F	orm 990-EZ		orm 990, 990·EZ, or 990·PF), orm 990·PF, Part I, line 2, to	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

### RICHARD AND SARA FOLIO FOUNDATION, INC

84-3313527

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD FOLIO 6200 GLEN FALLS RD REISTERSTOWN, MD 21136	\$ 430,219.	Person Payroll Noncash X (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 Payroli 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
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

### RICHARD AND SARA FOLIO FOUNDATION, INC

84-3313527

		art II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES		
		\$ 430,219.	12/10/19
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		**************************************	-
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		* s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of organization Employer identification number RICHARD AND SARA FOLIO FOUNDATION, INC 84-3313527 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1	
SOURCE	REVE	(A) REVENUE PER BOOKS		(B) VESTMENT COME	(C) ADJUSTED NET INCOME			
MERRILL LYNCH			3.					
TOTAL TO PART I, LI		3.		3.				
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT	2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE			(C) T- ADJUSTE ME NET INCC	ADJUSTED	
MERRILL LYNCH	2,340	•	0.	2,340.	2,34	0.		
TO PART I, LINE 4 2,340.			0.	2,340.	2,34	0.		
FORM 990-PF		TAX	ES			STATEMENT	3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I		(C) ADJUSTED NET INCOM			
FOREIGN TAXES WITHH	78.	. 78.				0.		
TO FORM 990-PF, PG	1, LN 18	78.		78.			0.	
FORM 990-PF	OTHER E	XPENSES	3		STATEMENT	4		
DESCRIPTION		(A) EXPENSES PER BOOKS	NET IN		(C) ADJUSTED NET INCOM			
FEES	_	317.		238.		7	79.	
TO FORM 990-PF, PG 1, LN 23		317.		238.	<del> </del>		79.	

FORM 990-PF	OTHE	R FUNDS		STATEMENT	5
DESCRIPTION			(A) BEGINNING OF YEAR	(B) END OF YEAR	
ENDOWMENT FUND			0.	434,95	3.
TOTAL TO FORM 990-PF,	0.	434,95	3.		
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	6
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
INVESTMENT ACCOUNT AT	MERRILL LYNCH	FMV	422,213.	429,77	0.
TOTAL TO FORM 990-PF,	PART II, LINE 1	.3	422,213.	429,77	0 • —
FORM 990-PF	STATEMENT	7			
NAME OF CONTRIBUTOR	А	DDRESS			
RICHARD & SARA FOLIO	6 R				
FORM 990-PF	PART XV LIST OF FOUND	- LINE 1A	ERS	STATEMENT	8

NAME OF MANAGER

RICHARD FOLIO SARA MACEK