Form **990-PF** Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Open to Public Inspection

ror	calen	dar year 2023 or tax year deginning		-	, and ending				
Nar	ne of	foundation		C		A Employer identification	number		
		HARD A. HENSON FOUNI				52-1642558			
Nun	nber a	nd street (or P.O. box number if mail is not delivered	l to street a	ddress)	Room/suite	B Telephone number			
_2	00	WEST MAIN STREET				410-742-7057			
_		own, state or province, country, and ZIP or SBURY, MD 21801	foreign p	ostal code		C If exemption application is pe	anding, check here		
				1.20-1					
Gi (песк	all that apply: Initial return			ormer public charity	D 1. Foreign organizations	, check here		
		Final return		Amended return		Foreign organizations med check here and attach cor	eting the 85% test,		
		Address change		Name change		check here and attach cor	mputation		
HC	_			empt private foundation		E If private foundation stat			
		ction 4947(a)(1) nonexempt charitable trus				under section 507(b)(1)	(A), check here L		
		arket value of all assets at end of year J		-	Accrual	F If the foundation is in a (
11)		Part II, col. (c), line 16)		ther (specify)		under section 507(b)(1)	(B), check here		
<u> </u>	\$	43,477,585. (Par	rt i, colun	nn (a), must de on cash dasi					
Pa	<u>irt I</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) m necessarily equal the amounts in column (a).)	nay not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received		62,003.					
	2	Check X if the foundation is not required to attac							
	3	Interest on savings and temporary cash investments		12,903.	12,903.		STATEMENT 1		
	4	Dividends and interest from securities		981,917.	981,917.		STATEMENT 2		
	5a	Gross rents							
		Net rental income or (loss)			*				
	6a	Net gain or (loss) from sale of assets not on line 10		1,438,268.					
ĭe	b	Gross sales price for all assets on line 6a 3,519,5	16.						
Revenue	7	Capital gain net income (from Part IV, line 2)			1,438,268.				
8	8	Net short-term capital gain							
	9								
	10a	Income modifications Gross sales less returns and allowances							
		Less: Cost of goods sold				• .			
		Gross profit or (loss)							
		Other income		107,122.	0.	72,461.	STATEMENT 3		
	12	Total. Add lines 1 through 11		2,602,213.	2,433,088.	72,461.			
	13	Compensation of officers, directors, trustees, etc.		63,648.	15,912.	0.	47,736.		
	14	Other employee salaries and wages							
	15	Pension plans, employee benefits		26,022.	6,506.	0.	19,516.		
es		Legal fees		·					
ens	b	Accounting fees STMT	14	14,831.	13,348.	0.	1,483.		
Expenses	c	Other professional fees STMT	1 5	84,224.	84,224.	0.	0.		
		Interest							
ative	18	Taxes STMI	1 6	15,534.	15,534.	0.	0.		
	19	Depreciation and depletion		45,402.	0.	45,402.			
Administ	20	Occupancy		62,425.	23,500.	25,674.	13,251.		
	21	Travel, conferences, and meetings		506.	0.	0.	506.		
and	22	Printing and publications							
	23	Other expenses STMT	17	8,971.	2,587.	1,385.	4,999.		
perating	24	Total operating and administrative							
ber		expenses. Add lines 13 through 23		321,563.	161,611.	72,461.	87,491.		
ō	25	Contributions, gifts, grants paid		2,143,120.			2,143,120.		
	26	Total expenses and disbursements.							
		Add lines 24 and 25		2,464,683.	161,611.	72,461.	2,230,611.		
	27	Subtract line 26 from line 12:				1			
	a	Excess of revenue over expenses and disbursemen	nts	137,530.					
	b	Net investment income (if negative, enter -0;-)			2,271,477.				
		Adjusted net income (if negative, enter -0-)				0.			

(Worksheet)

52-1642558

RICHARD A. HENSON FOUNDATION, INC. 52-16 Estimated Tax on Unrelated Business Taxable **Income for Tax-Exempt Organizations**

► Keep for your records. Do not send to the Internal Revenue Service.

(and on Investment Income for Private Foundations) FORM 990-PF

2024

1	Unrelated business taxable income expected in the tax y	ear				1	
2	Tax on the amount on line 1					2	
3							
3	Alternative minimum tax for trusts			•••••••		3	
4	Total. Add lines 2 and 3				······	4	
5	Estimated tax credits					5	
6	Subtract line 5 from line 4					6	
				•••••••••••••••••••••••••	***************************************		
7	Other taxes					7	
8	Total. Add lines 6 and 7		••••••••••			8	
9	Credit for federal tax paid on fuels					9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the	organiza	ation does not need to ma	ke			
	estimated tax payments			10a	60,000.		
b	Enter the tax shown on the 2023 return. Caution: If						
	zero or the tax year was for less than 12 months, skip the						
	and enter the amount from line 10a on line 10c						
C	2024 Estimated Tax. Enter the smaller of line 10a or line	e 10b.	If the organization is requi	red to skip line 10b, ente	r the amount		60.000
_	from line 10a on line 10c		(2)			10c	60,000.
			(a)	(b)	(c)		(d)
11	Installment due dates	11	05/15/24	06/17/24	09/16/2	4	12/16/24
40	Leadalles and Code Office 40s in		-				
12	Installments. Enter 25% of line 10c in columns (a) through (d)	12	15,000.	15,000.	15,0	ا مم	15,000.
	columns (a) un ough (u)	14	13,000.	13,000.	13,0	•••	13,000.
13	2023 Overpayment	13	3,146.				
14	Payment due (Subtract line 13 from line 12)	14	11,854.	15,000.	15,0	00.	15,000.
							Form 990-W

ESTIMATED	TAX	
OVERPAYMEN	T AP	PLIED
AMOUNT DUE		

60,000.

3,146. 56,854.

F	art		d schedules and amounts in the description	Beginning of year	End o	f year
느		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 invest	ments	163,560.	152,580.	152,580.
	3	Accounts receivable	1			
	1	Less: allowance for doubtful account	nts			
	4	Pledges receivable				
		Less: allowance for doubtful account	nts			
	5					
	6	Receivables due from officers, direc	ctors, trustees, and other			
		1				
	7	Other notes and loans receivable			······································	
	Ì	Less: allowance for doubtful accour	nts			the state of the state of
(A)	8					
Assets	9	Prepaid expenses and deferred char	rges			
AS	10a	Investments - U.S. and state govern	nment obligations			
		Investments - corporate stock		33,633,089.	33,692,781.	40,218,271.
					00,002,020	
		Investments - land, buildings, and equipment: basis				7400
	``	Less: accumulated depreciation				
	12					
						·
	14	Land huildings and equipment has	sis <u>1,138,355</u> .			
	' '	Less: accumulated depreciation	768,734.	342,362.	369,621.	369,621.
	15	Other assets (describe	STATEMENT 9)	1,592,772.	1,651,931.	2,737,113.
		Total assets (to be completed by al		2/332///20	170317331.	2,131,113.
	"	instructions. Also, see page 1, item	· · · · · · · · · · · · · · · · · · ·	35,731,783.	35,866,913.	43,477,585.
	17	Accounts payable and accrued expe		2,400.	33/333/313.	13/1///5031
				, , , , , , , , , , , , , , , , , , , ,		
"						
Liabilities			d other disqualified persons	***		
abil		Mortgages and other notes payable				
Ξ		Other liabilities (describe)			
	23	Total liabilities (add lines 17 throu		2,400.	0.	
		Foundations that follow FASB ASC	958, check here X			
ģ		and complete lines 24, 25, 29, and				
ĕ	24		s	34,136,611.	34,214,982. 1,651,931.	
Balances	25	Net assets with donor restrictions .	<u>.</u>	1,592,772.	1,651,931.	
73	l	Foundations that do not follow FAS	SB ASC 958, check here L			
臣		and complete lines 26 through 30.				
ò	26		rent funds		···	
ets	27	Paid-in or capital surplus, or land, b	· · · · · · · · · · · · · · · · · · ·			
Ass	28		ome, endowment, or other funds	25 500 202	25 066 042	
Net Assets or Fund	29	Total net assets or fund balances	·····	35,729,383.	35,866,913.	
_	1	Takal Pak Ulaharan dan dan dan dan Kuma	11.1.	25 721 702	25 066 012	
		Total liabilities and net assets/func		35,731,783.	35,866,913.	<u> </u>
P	art l	II Analysis of Changes	in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at begin	ning of year - Part II, column (a), line 2	9		
		agree with end-of-year figure repor			1	35,729,383.
	•					137,530.
3	Other	increases not included in line 2 (iter			3	0.
						35,866,913.
5	Decre	ases not included in line 2 (itemize)			5	0.
6	Total	net assets or fund balances at end o	f year (line 4 minus line 5) - Part II, col	umn (b), line 29		35,866,913.
						Form 990-PF (2023)

Pe	It VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c	ļ	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		. :	
	(1) On the foundation. \$ O . (2) On foundation managers. \$ O .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1 . 1		
	managers. \$ O.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			:
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			i .
	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
				. '
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	MD			٠,
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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			ĺ
	section 512(b)(13)? If "Yes," attach schedule. See instructions	.11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address RICHARDHENSONFOUNDATION.ORG			
14	The books are in care of STACEY MCMICHAEL Telephone no. 410-7		<u>057</u>	
	Located at 200 WEST MAIN STREET, SALISBURY, MD ZIP+4 2			
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 2023, did the foundation have an interest in or a signature or other authority over a bank,		Yes	_
	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			<u></u>
	F-1	orm 99 0)-PF	(2023)

had not been removed from jeopardy before the first day of the tax year beginning in 2023?

Pε	rt VI-B	Statements	Regarding	Activities for Which Form 4720 May Be Required				
	File Forn	1 4720 if any item	is checked in	n the "Yes" column, unless an exception applies.			Yes	No
1a		year, did the founda	l i	, , , , ,				7
	(1) Engad	e in the sale or exch	ange, or leasing	g of property with a disqualified person?		1a(1)		X
			l	therwise extend credit to (or accept it from)		1		
		ualified person?		,,,		1a(2)		x
			l 1	r accept them from) a disqualified person?		1a(3)		Х
			I	e the expenses of, a disqualified person?		1a(4)		х
	• •		[-	ulified person (or make any of either available				
		e benefit or use of a	, ,	, , , , , , , , , , , , , , , , , , ,		1a(5)		Х
	(6) Agree	to pay money or pro	perty to a gove	ernment official? (Exception. Check "No"				
				o or to employ the official for a period after				
		· ·		ninating within 90 days.)		1a(6)	·	Х
b	If any ansv	ver 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 cu	rrent notice reg	parding disaster assistance? See instructions	N/A	1b		
C	Organizati	ons relying on a curre	ent notice regar	ding disaster assistance, check here				
				y of the acts described in 1a, other than excepted acts, that were not corrected				
	before the	first day of the tax ye	ar beginning in	1 2023?		1d	·	X
2	Taxes on f	ailure to distribute in	come (section	4942) (does not apply for years the foundation was a private operating foundation				
	defined in	section 4942(j)(3) or	4942(j)(5)):					
а	At the end	of tax year 2023, did	the foundation	have any undistributed income (Part XII, lines				
	6d and 6e)	for tax year(s) begin	ning before 20	23?		2a		X
	If "Yes," lis	t the years		<u>, , , , , , , , , , , , , , , , , , , </u>				
b	Are there a	iny years listed in 2a	for which the f	oundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1	
	valuation o	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 prov	isions of section 494	2(a)(2) are beir	ng applied to any of the years listed in 2a, list the years here.				
		,		,				
3a	Did the fou	ındation hold more ti	nan a 2% direct	or indirect interest in any business enterprise at any time				
	during the	year?				3a		<u> </u>
b	If "Yes," di	d it have excess busi	ness holdings in	n 2023 as a result of (1) any purchase by the foundation or disqualified persons after				
			1	od (or longer period approved by the Commissioner under section 4943(c)(7)) to dispo	se			
				the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	/-			
				excess business holdings in 2023.)		3b		77
			1	amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the for	ındation make any in	vestment in a p	rior year (but after December 31, 1969) that could jeopardize its charitable purpose tha	at	1		

Part VI-B	Statements	Regarding	Activities for Which F	orm 4720 May Be R	equired _{(contin}	ued)			
5a During the	year, did the founda	ation pay or inc	ur any amount to:			127211		Yes	No
(1) Carry	on propaganda, or c	therwise attem	pt to influence legislation (section	n 4945(e))?		.,	5a(1)		X
(2) Influer	nce the outcome of a	any specific pu	plic election (see section 4955); o	or to carry on, directly or indire	ectly,				
any vo	ter registration driv	e?					5a(2)		X
(3) Provid	e a grant to an indiv	idual for travel	study, or other similar purposes	?		• • • • • • • • • • • • • • • • • • • •	5a(3)		X
(4) Provid	e a grant to an orga	nization other t	han a charitable, etc., organizatio	n described in section					İ
4945(d)(4)(A)? See instru	ictions					5a(4)		Х
(5) Provid	e for any purpose o	ther than religi	ous, charitable, scientific, literary,	or educational purposes, or f	or				
the pre	evention of cruelty to	o children or ar	imals?				5a(5)		X
b If any answ	er is "Yes" to 5a(1)-	(5), did any of	the transactions fail to qualify un	der the exceptions described i	in Regulations				
			ng disaster assistance? See instr				5b		
c Organizatio	ns relying on a curr	ent notice rega	rding disaster assistance, check l	here					İ
			the foundation claim exemption f						
expenditure	e responsibility for t	he grant?				N/A	5d		
If "Yes," atta	ach the statement re	quired by Reg	lations section 53.4945-5(d).						
6a Did the fou	ndation, during the	year, receive ar	y funds, directly or indirectly, to	pay premiums on					
•	benefit contract?						6a		X
		year, pay prem	iums, directly or indirectly, on a p	personal benefit contract?			6b	ļ	Х
	6b, file Form 8870.								<u> </u>
			lation a party to a prohibited tax s				7a_		X
-			ds or have any net income attribu			N/.A	7b		ļ
		1	tax on payment(s) of more than \$	61,000,000 in remuneration or					
	achute payment(s) o	during the year	? ! D!! T!	P1-41 Nd			8		X
Part VII	Paid Employ	About Oπ lees, and (icers, Directors, Trusto Contractors	ees, Foundation Mar	nagers, Hignly				
1 List all office		L	foundation managers and the	neir compensation.	·			***	
	,,			(b) Title, and average	(c) Compensation	(d) Contributions to	0.	(e) Exp	ense
	(a) N	ame and addre	ss	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plan and deferred compensation	^{is} a	(e) Exp ccount, allowa	other
				to poordon	Cittor 0)	Compensation	-	unona	1000
SEE STA	TEMENT 10)		1	0.	0	.		0.
							1		
							İ		
						4			
	•								
-									
2 Compensa	tion of five highe	st-paid emp	loyees (other than those inc	, , , , , , , , , , , , , , , , , , ,	enter "NONE."	(d) Contributions to	. 1	(a) Eve	onco
(a) Nan	ne and address of e	ach employee ;	paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plar and deferred		(e) Exp	other
		000				compensation	_	allowa	nces
	CMICHAEL		WEST MAIN	EXECUTIVE DIR	ł .			2 0	^^
STREET,	SALISBUR	Y, MD 2	1801	35.00	65,648.	0	•	3,0	00.
		<u> </u>	<u> </u>				+-		
-		<u> </u>	<u> </u> 	-			1		
		<u> </u>			-		+		
		1	<u>i</u>	1			1		
							-		
			1	†					
Total number of	f other employees p	aid over \$50.00	00	<u>I</u>					0
. Ottal manifoli Ul	caror simpleyees p	ovoi ψου, Ot	· · · · · · · · · · · · · · · · · · ·					- DE	(0000)

		Contractors (continued)	IINIONIE II	
		ors for professional services. If none, enter		1,,,
	address of each	person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE				
				
			 	
"				
<u> </u>				
Total number of others receiving of	over \$50,000 for	professional services	•	0
Part VIII-A Summary	of Direct Ch	aritable Activities		
		ctivities during the tax year. Include relevant stat		Гупарова
	r beneficiaries se	rved, conferences convened, research papers pro	oduced, etc.	Expenses
1 <u>N/A</u>				
	1			
2				
3				
<u> </u>	1			
4				
	1			
Part VIII-B Summary				
	-related investme	nts made by the foundation during the tax year o	n lines 1 and 2.	Amount
1 <u>N/A</u>				
	1		·	
				:
2				+ ' '
	1			
All other program-related investme	ents. See instruct	ions.		
3	citio. Coo motradi			
				· ·
				7 .
]
Total Add lines 1 through 3	1		•	0 -

For	rm 990-PF (2023) RICHARD A. HENSON FOUNDATION, INC.	52-	1642558 Page 8
P	Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	40,494,064.
	Average of monthly cash balances	1b	234,013.
	Fair market value of all other assets (see instructions)	1c	369,621.
	Total (add lines 1a, b, and c)	1d	41,097,698.
e	Reduction claimed for blockage or other factors reported on lines 1a and	-14	
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	41,097,698.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	616,465.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	40,481,233.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,024,062.
P	Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	2,024,062.
2a	Tax on investment income for 2023 from Part V, line 5 2a 31,574.		0.0
b	Income tax for 2023. (This does not include the tax from Part V.)		
C		2c	31,574.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,992,488.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,992,488.
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 XII, line 1	7	1,992,488.
P	Part XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	2,230,611.
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	·	4	2,230,611.

Part XII Undistributed Income	see instructions)			
	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				1,992,488.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only			269,663.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2023:				
a From 2018				
b From 2019				
c From 2020				
d From 2021				
e From 2022				
f Total of lines 3a through e	0.		'	; ·
4 Qualifying distributions for 2023 from				·
Part XI, line 4: \$ 2,230,611.	_			
a Applied to 2022, but not more than line 2a			269,663.	
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.			1 060 040
d Applied to 2023 distributable amount		•		1,960,948.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:			· .	·
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 2022. Subtract line			0.	
4a from line 2a. Taxable amount - see instr f Undistributed income for 2023. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2024				31,540.
7 Amounts treated as distributions out of	·			31,310.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election			F - F	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2018				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2024.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		·		
a Excess from 2019				
b Excess from 2020				
c Excess from 2021				
d Excess from 2022				
e Excess from 2023		***		

Form 990-PF (2023) RIC	HARD	A.	HENSON	FOUNDATION,	INC.	52-16	42558 Page 10
Part XIII Private Opera	ting Fo	oun	dations (see in	structions and Part VI-	A, question 9)	N/A	
1 a If the foundation has received							
foundation, and the ruling is ef	fective for	2023	3, enter the date of t	the ruling	L		
b Check box to indicate whether	the found	ation		ng foundation described in		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted	net		Tax year		Prior 3 years		
income from Part I or the mini	mum		(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
investment return from Part IX	for						
each year listed							
b 85% (0.85) of line 2a							
c Qualifying distributions from P	art XI,						
line 4, for each year listed							
d Amounts included in line 2c no	t						
used directly for active conduc	t of				•		
exempt activities							
e Qualifying distributions made of	lirectly						
for active conduct of exempt a	tivities.						•
Subtract line 2d from line 2c	ļ						
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)(E b "Endowment" alternative test -							1
2/3 of minimum investment ret	turn						
shown in Part IX, line 6, for ead listed							
c "Support" alternative test - ente			·				
(1) Total support other than g							
investment income (intere							
dividends, rents, payments							
securities loans (section 512(a)(5)), or royalties)							
(2) Support from general publ	! 1						
and 5 or more exempt							
organizations as provided section 4942(j)(3)(B)(iii)	in						
(3) Largest amount of suppor							
an exempt organization	1 1						
(4) Gross investment income	1 .						
Part XIV Supplementar	v Infor	ma	tion (Complet	te this part only if	the foundation h	ad \$5.000 or mor	e in assets
at any time du						, ,	
1 Information Regarding Fo	undation	ı Ma	nagers:				
a List any managers of the found	1			than 2% of the total contr	ibutions received by the f	oundation before the close	of any tax
year (but only if they have cont							- · · · · · · · · · · · · · · · · · · ·
NONE							
b List any managers of the found	ation who	own	10% or more of the	stock of a corporation (or an equally large portion	of the ownership of a par	tnership or
other entity) of which the found	ation has	a 10	% or greater interes	t.			
NONE							
2 Information Regarding Co	ntributio	on. G	rant. Gift. Loan.	Scholarship, etc., Pro	ograms:		
		-		• • • •	•	not accept unsolicited req	uests for funds. If
the foundation makes gifts, gra							40010 101 1411401 11
a The name, address, and telepho	one numb	er or	email address of th	e person to whom applica	ations should be addresse	ed:	
STACEY MCMICHAEL	J		42-7057				
200 WEST MAIN ST	REET,	S	ALISBURY,	MD 21803			
b The form in which applications	should be	e subi	mitted and informat	ion and materials they sh			
NO SPECIFIC FORM	, API	LI	CATION SI	HOULD INCLUE	E SUMMARY C	F SCOPE/ACTS	5
c Any submission deadlines:	-						
NONE		·					
d Any restrictions or limitations of	n awards	, sucl	as by geographica	l areas, charitable fields, l	kinds of institutions, or o	ther factors:	
NO							

323601 12-20-23

Form **990-PF** (2023)

Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient a Paid during the year BIG BROTHERS/BIG SISTERS РÇ OPERATING EXPENSES 1915 N SALISBURY BLVD SALISBURY, MD 21801 22,100. CHESAPEAKE HOUSING MISSION PC OPERATING EXPENSES 30754 FOXCHASE DR SALISBURY, MD 21801 25,000. COMMUNITY FOUNDATION OF THE EASTERN OPERATING EXPENSES SHORE 1324 BELMONT AVE SALISBURY, MD 21804 8,200. DELMARVA COUNCIL BOY SCOUTS OF ÞС SUSTAINING MEMBERSHIP AMERICA 1910 BADEN POWELL WAY DOVER, DE 19904 110,879. ELEVEN 21 INC, EPOCH DREAM CENTER 2C OPERATING EXPENSES 7545 LEVIN DASHIELL ROAD HEBRON, MD 21830 OPERATING EXPENSES 72,030. SEE CONTINUATION SHEET(S) Total 2,143,120. 3a b Approved for future payment NONE Total 0.

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		d by section 512, 513, or 514	(e)
g. 33 3 4.1.3 4.1.3 5	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e					
f		A.B.			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	12,903.	
4 Dividends and interest from securities			14	12,903. 981,917.	
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 than inventory			14	1,438,268.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue: a FACILITIES COST REIMB.					72,461
b EXCISE TAX REFUND		34,661.			
c					
d		*			•
e					
2 Subtotal. Add columns (b), (d), and (e)		34,661.		2,433,088.	
3 Total. Add line 12, columns (b), (d), and (e)				13	2,540,210
See worksheet in line 13 instructions to verify calculations.)					
Part XV-B Relationship of Activities to	the Accor	nnlishment of Fy	emnt P	urnoses	
Total of the state				u. p0000	

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Line No.		xplain below ne foundation												contribut	ed in	nportant	tly to 1	the acco	mplisl	ıment c	of		
11A	THE	E FOUNI	TAC	ION	PRO	DVII	DES	OFF	ICE	SP	ACE	TO	CO	HER	EΣ	EMP	T (ORGA	NIZ	ATI	ONS	5 A'	T
	A M	IAMINI	C	OST	WH	ICH	IS	BEL	WO	THE	CU:	RREN	1T	FAIF	?]	IARK	EΤ	VAL	UΕ	RAT	E F	OR	
	SIM	IILAR I	PRO	PER'	ΓY.																		
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	l																						

Form 990-PF (2023) RICHARD A. HENSON FOUNDATION, INC. 52-1642558

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

וט ד	ia the oi	rganization directly of	r ınaır	ecuy eng	age in any	of the following	ig with a	any otner organizatio	on described in sec	tion 501(c)		162	IAO
(0	ther tha	n section 501(c)(3)	organi	izations) (or in sectio	n 527, relatinç	g to poli	tical organizations?					
a Tr	ansfers	from the reporting for	ounda	ition to a	ı noncharital	ble exempt org	ganizatio	on of:					
			1		i		-				1a(1)		X
(2) Other	r assets		•••••							1a(2)		Х
		sactions:									14(2)		
			aritah	nle evemr	t organizat	ion					1b(1)		Х
()) Durch	hacae of accate from	2 000	ocharitahl	e evemnt o	ragnization							X
(2	.) Fulli N. Dont	nases ui asseis iluili al of fooilitica, cauinn	a non	or other e	e exempt o	ryanizanon .,			•••••	***************************************	1b(2)		
(3) Reilli	ai or facilities, equipir	ient, t	or other a	Sseis		• • • • • • • • • • • • • • • • • • • •				1b(3)		X
(4) Keim	ibursement arrangem	ients .								1b(4)		X
•	•	s or loan guarantees									1b(5)		X
											1b(6)		X
c Sł	naring o	f facilities, equipmen	t, mail	ling lists,	other asse	ts, or paid em	ployees				10		Х
										market value of the goods,	other ass	ets,	
										n or sharing arrangement, s			
		d) the value of the go								,			
a)Line	no.	(b) Amount involved	1	(c) Name of	noncharitable	exemp	t organization	(d) Descripti	on of transfers, transactions, and	sharing arra	ngemen	ts
		, ,				N/A			<u> </u>				
			i			-11/ 11							
	-												
	+		-		<u> </u>								
	+				 								
	_												
								•					
	_							*					
					<u> </u>								
					<u> </u>					*			
								<u> </u>					
2a Is	the four	ndation directly or inc	directl	ly affiliate	d with, or I	elated to, one	or mor	e tax-exempt organi:	zations described	•			
in	section	501(c) (other than s	ection	1 501(c)(3	3)) or in se	ction 527?				[Yes	X	No
		omplete the following											
		(a) Name o					(b) Ty	pe of organization		(c) Description of relations	hip		
		N/					\ 			(-)			
					1								
			<u> </u>				-						
			<u> </u>		1	-	 				·		
			<u> </u>		<u> </u>		 						
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~ :		er penalties of perjury, I de pelief, it is true, correct, a								r bas anulanaudadas Ma	y the IRS d	iscuss th	nis
Sign	1			•		,,		,			urn with the own below?	Preparei See inst	r tr.
Here	'I								TREASUR	ER	X Yes		No
	Sigr	nature of officer or tru	ıstee				- 1	Date	Title				
		Print/Type preparer	's nar	me		Preparer's si	ignature		Date	Check if PTIN			
		JOHN M. S	TEF	RN,						self- employed			
Paid		C.P.A.		- •						PΩ	00004	49n	
Prep			SS	چ ررب.	TPANTY	, P.A.			1	Firm's EIN 52-12			
Use		I am shame FA	ه د		-T 177.4 T	, 1 • 14 •				FILLISEN JA-IA	4700	,	
		Firm's address 1	Q A 1	1 (17.77	remer.	ייזדמת ע							
						Y DRIVI				144.53	- 4		
		<u>l</u> S	AL]	LSBUI	KY, M	D 21804	4			Phone no. (410)			
			1							F	orm 990	-PF (2023)

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient HABITAT FOR HUMANITY РC OPERATING EXPENSES 908 WEST ISABELLA STREET SALISBURY, MD 21801 1,000. HORIZONS DELMARVA РC OPERATING EXPENSES 225 N DIVISION ST UNIT 5 SALISBURY, MD 21801 10,500. JUNIOR ACHIEVEMENT OF THE EASTERN PC CAPITAL CAMPAIGN AND SHORE OPERATIONS 200 W MAIN STREET SALISBURY, MD 21801 446,667. PC MAIN STREET GYM OPERATING EXPENSES 145 EAST CARROLL STREET, UNIT 201 SALISBURY, MD 21801 10,000. MARYLAND FOLK FESTIVAL РC OPERATING EXPENSES 125 N DIVISION ST SALISBURY, MD 21801 25,000. RESOURCE RECOVERY CENTER 2C OPERATING EXPENSES 200 W MAIN STREET SALISBURY, MD 21801 1,000. ROTARY CLUB OF SALISBURY PC OPERATING EXPENSES 1715 RIVERSIDE DR SALISBURY, MD 21801 7,500. CAPITAL CONTRIBUTION SALISBURY CHRISTIAN SCHOOL ₽C 807 PARKER ROAD SALISBURY, MD 21804 50,000. SALISBURY SUNRISE ROTARY CLUB ÞС OPERATING EXPENSES PO BOX 4473 SALISBURY, MD 21803 1,000. PC SALISBURY URBAN MINISTRIES OPERATING EXPENSES 326 BARCLAY STREET SALISBURY, MD 21804 15,000. 1,904,911. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of recipient contribution any foundation manager Name and address (home or business) or substantial contributor SALVATION ARMY ÞС OPERATING EXPENSES 407 OAK ST SALISBURY, MD 21804 1,000. THE CHILD AND FAMILY FOUNDATION ÞС OPERATING EXPENSES 213 W MAIN ST SUITE 205 SALISBURY, MD 21801 7,225. UNITED WAY LOWER EASTERN SHORE PC IMAGINATION LIBRARY 803 N SALISBURY BLVD #2100 SALISBURY, MD 21801 45,200. VARIOUS РC OPERATING EXPENSES VARIOUS SALISBURY, MD 21804 13,676. VILLAGE OF HOPE РC OPERATING EXPENSES 1001 LAKE ST SALISBURY, MD 21801 7,810. WOR WIC COMMUNITY COLLEGE FOUNDATION PC CAPITAL CAMPAIGN 32000 CAMPUS DRIVE SALISBURY, MD 21804 401,000. YMCA OF THE CHESAPEAKE ЬC OPERATING EXPENSES PO BOX 3296 SALISBURY, MD 21802-3296 30,000. YOUNG LIFE PC OPERATING EXPENSES PO BOX 3822 SALISBURY, MD 21802 12,500. HAGERSTOWN AVIATION MUSEUM ÞС CAPITAL CAMPAIGN 18450 SHOWALTER ROAD BLDG 8 HAGERSTOWN MD 21742 433,333. SALISBURY UNIVERSITY FOUNDATION PC NEW PLANETARIUM 1308 CAMDEN AVE SALISBURY, MD 21801 200,000. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of recipient any foundation manager contribution Name and address (home or business) or substantial contributor LIFE CRISIS CENTER РC OPERATING EXPENSES 106 MILFORD STREET STE 104 SALISBURY, MD 21804 25,500. HAITIAN DEVELOPMENT CENTER OF PC OPERATING EXPENSES DELMARVA 212 W MAIN STREET 25,000. SALISBURY, MD 21801 LOWER SHORE AUTISM COMMUNITY ÞС OPERATING EXPENSES 505 E MAIN STREET SALISBURY, MD 21804 5,000. IM R A HENSON CRUT U/W FBO RICHARD NC PRINCIPAL CONTRIBUTION HENSON JR PO BOX 486 MAUGANSVILLE, MD 21767-0486 130,000. Total from continuation sheets

FORM 990-PF INTE	REST ON	SAVING	S AND .	rempor.	ARY (CASH I	NVESTMENTS	S	TATEMENT 1	
SOURCE		,		(A) EVENUE R BOOK			(B) INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
FIRST SHORE FEDER VANGUARD	AL			3 12,5	23. 80.		323. 12,580.		323. 12,580.	
TOTAL TO PART I,	LINE 3		***************************************	12,9	03.		12,903.		12,903.	
FORM 990-PF	DIV	IDENDS	AND IN	TEREST	FROM	ı secu	JRITIES	Sī	PATEMENT 2	
SOURCE	1	OSS OUNT	CAPI' GAII DIVIDI	1S	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	
BOY SCOUT ENDOWMENT FUND UNRESTRICTED INVESTMENTS US INTEREST		5,170. 5,819. 6,445.	305	0. ,517. 0.		55,170 -0,302 -6,445	2. 910,30	2.	65,170. 910,302. 6,445.	
TO PART I, LINE 4	1,28	37,434.			517. 98				981,917.	
FORM 990-PF			ОТНЕ	R INCO	ME			Sī	PATEMENT 3	
DESCRIPTION				RE	(A) VENUE BOOK		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME	
FACILITIES COST REXCISE TAX REFUND	1					461.	0		72,461. 0.	
TOTAL TO FORM 990	PF, PA	RT I, I	LINE 11		107,	122.	0	 - =	72,461.	
					,			-1		
FORM 990-PF			ACCOU	TING :	FEES			S'	PATEMENT 4	
DESCRIPTION		i	(A) EXPENSES PER BOOK			VEST-	(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES	
ACCOUNTING			14,83	31.	13	3,348.		0.	1,483.	
TO FORM 990-PF, P	G 1, LN	16В	14,83	31.	13	3,348.	,	0.	1,483.	
	1						- 			

TOTAL TO FORM 990 PF, PART II, LINE 10B

FORM 990-PF	OTHER PROFES	SIONAL FEES	S	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	84,224.	84,224.	0.	0.
TO FORM 990-PF, PG 1, LN 160	84,224.	84,224.	0.	0.
FORM 990-PF	TAX	ES	S	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	15,534.	15,534.	0.	0.
TO FORM 990-PF, PG 1, LN 18	15,534.	15,534.	0.	0.
FORM 990-PF	OTHER E	XPENSES	S.	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SUPPLIES MISCELLANEOUS TELEPHONE AND FAX	5,254. 1,932. 1,297.	1,005. 483. 972.	1,236. 149. 0.	3,013. 1,300. 325.
POSTAGE AND PRINTING	488.	127.	0.	361.
TO FORM 990-PF, PG 1, LN 23	8,971.	2,587.	1,385.	4,999.
FORM 990-PF	CORPORAT	E STOCK	S'.	PATEMENT 8
FORM 990-PF DESCRIPTION	CORPORAT			TATEMENT 8 LIR MARKET VALUE

40,218,271.

33,692,781.

-	<u> </u>		_					
FORM 990-PF			OTHER ASSETS		STAT	ЕМЕПТ 9		
DESCRIPTION			BEGINNING OF END OF YEAR YR BOOK VALUE BOOK VALUE					
BOY SCOUT ENDOWME	NT FUNI	}	1,592,772.	1,651,9	31. 2	,737,113		
TO FORM 990-PF, P	ART II,	LINE 15	1,592,772.	1,651,9	31. 2	,737,113.		
FORM 000 PE	DADE I							
FORM 990-PF			OF OFFICERS, DI FOUNDATION MANA		STAT	EMENT 10		
NAME AND ADDRESS			TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT		
STEPHEN R. FARROW 200 WEST MAIN STR SALISBURY, MD 218	EET		TRUSTEE 2.00	0.	0.	0.		
SUSANNE A. HOLLOW 200 WEST MAIN STR SALISBURY, MD 218	EET		TREASURER 2.00	0.	0.	0.		
JON P. SHERWELL 200 WEST MAIN STR SALISBURY, MD 218			SECRETARY 2.00	0.	0.	0.		
THOMAS H. EVANS 200 WEST MAIN STR SALISBURY, MD 218			CHAIRMAN 2.00	0.	0.	0.		
VICTOR H. LAWS, I 200 WEST MAIN STR SALISBURY, MD 218	EET		TRUSTEE 2.00	0.	0.	0.		
GREGORY J. OLINDE 200 WEST MAIN STR SALISBURY, MD 218	EET		VICE CHAIRMAN 2.00	0.	0.	. 0.		
TOTALS INCLUDED O	N 990-P	F, PAGE б,	PART VII	0.	0.	0.		

IRS E-file Signature Authorization OMB No. 1545-0047 for a Tax Exempt Entity For calendar year 2023, or fiscal year beginning Do not send to the IRS. Keep for your records. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8879TE for the latest information. Name of filer EIN or SSN RICHARD A. HENSON FOUNDATION, INC. 52-1642558 SUSANNE HOLLOWAY Name and title of officer or person subject to tax TREASURER Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12) _____ 1b 1a Form 990 check here b Total revenue, if any (Form 990-EZ, line 9) 2b Form 990-EZ check here ... 2a b Total tax (Form 1120-POL, line 22) 3a Form 1120-POL check here Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here ... Balance due (Form 8868, line 3c) 5b Form 8868 check here Form 990-T check here Total tax (Form 990-T, Part III, line 4) 6b 6a Form 4720 check here 7a b FMV of assets at end of tax year (Form 5227, Item D) 8b 8a Form 5227 check here Form 5330 check here b Tax due (Form 5330, Part II, line 19)9b 10a Form 8038-CP check here b Amount of credit payment requested (Form 8038-CP, Part III, line 22) Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the of entity) 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (FIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X lauthorize PKS & COMPANY, P.A. to enter my PIN 35762 Enter five numbers, but do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(les) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. or person subject to tax **Certification and Authentication** Part III ERO's EFIN/PIN. Enter your six-digit electronic filing identification 52439099996 number (EFIN) followed by your five-digit self-selected PIN.

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2023)



BUSINESS ENTITY ANNUAL REPORT (FORM 1)

2024

Form 1

DEPARTMENT OF ASSESSMENTS AND TAXATION

EMAIL ADDRESS OF PERSON COMPLETING THIS FORM

File online at https://BusinessExpress.Maryland.gov or send this fillable form and payment to: Maryland Department of Assessments and Taxation, P. O. BOX 17052, Baltimore, maryland 21297-1052 Date Received by Department Do not send this form via email nor fax. Do not send multiple businesses in the same envelope. Mailed forms must be typed using this fillable form.

Do not make any handwritten changes, corrections or additions to the data, or to the form after it is printed, except your original signature and date.

Initial Amended

Due April 15, 2024

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Type of Business	Check One	Prefix	Filing Fee	Type of Bu	siness	Check One	Prefix	Filing Fee		TIMELINE
Domestic Limited Liability Company		w	\$300	Foreign Limited Lia	bility Company		z	\$300	April 15, 2024	This Form Due
Domestic Limited Liability Partnership		Α	\$300	Foreign Limited Liab	ility Partnership		E	\$300	April 15, 2024	Extension Request Due
Domestic Stock Corporation		D	\$300	Foreign Stock C	orporation		F	\$300	June 17, 2024	This Form Due If Extended
Domestic Non Stock Corporation	х	D	\$0	Foreign Non Stock	Corporation		F	\$0		
Domestic Limited Partnership	Ì	м	\$300	Foreign Limited	Partnership		Р	\$300	JULY 1, 2024	County Tax Bills begin to be issued.
Domestic Statutory Trust		В	\$300	Foreign Statut	ory Trust		s	\$300		I
SDAT Certified Family Farm		A,D,M,W	\$100	Foreign Insurance	Corporation		F	\$300		re if the business received or to 12/31/23 from
Real Estate Investment Trust		D	\$300	Foreign Interstate	Corporation		F	\$0	MarylandS	
TRADE NAME Only Corporations must comp THOMAS H EVANS PRESIDENT'S NAME 200 WEST MAIN STREE PRESIDENT'S STREET ADDRESS SALISBURY, MD 21801 PRESIDENT'S CITY, STATE, Z	G VI T 2! VI S IP VI	REGOR' CE-PRES OO WE CE-PRES	200 SALI MAILIN Y J (IDENT'S ST MA IDENT'S URY, SIDEN	WEST MAIN STRISBURY MD 21 GADDRESS OF EI DLINDE B NAME AIN STREET S STREET ADDRESS MD 21801	JON P SECRETAR 200 WESECRETAR SALISBI	SHERV Y'S NAI ST MAY'S STE	Check VELL ME AIN S REET AL MD 2	TREE	SUSANNE TREASUREI C 200 WES TREASUREI SALISBU	e of mailing address. E. A. HOLLOWAY R'S NAME BT. MAIN STREET R'S STREET ADDRESS JRY, MD 21801 ER'S CITY, STATE, ZIP
Only Corporations must comp STEPHEN R FARROW	<u>v</u>]			WS III						
DIRECTOR #1 NAME	וט	RECTOF	(#2 NA	ME	DIRECTOR	(#3 NA	ME		DIRECTOR	#4 NAME
Only Complete if you are eithe 1. A domestic stock corpora 2. A Tax-exempt, domestic Note: This subscription does not app	tion with	corporati	on with	an operating budget ex	ceeding \$5,000,		rs are fa	mily men		d of directors membership: "Total number
The Addendum and Failure to complete	g totaling 1,000,0 al value obligate instruct and retu	j \$1,000,0 00 or mor of \$1,000, d to comp ons for su irn the Ad	i00 or m e in a si 000 or n lete and ibmitting dendum	ore in a single fiscal ye- rigle fiscal year; AND/O- nore: return to SDAT with thi the Addendum may be to SDAT may prohibit	ar; R s Annual Report e found a <u>thttps://</u> you from receivir	a Corpo dat.mary ig certair	orate Div land.gov n State I	r/Pages/s penefits.	datforms.aspx.	lired by COMAR 24.01.07.00
By signing this form below, you declare a Report, including those on any accompar Annual Report for the Entity listed. Furthe Personal Property Returns will be rejecte total of personal property in Maryland will the U.S. Department of the Treasury's Fire	nying form er, you are d and not h an origir	s, schedule attesting to considered nal cost of le	s, and/or the accu timely, a ess than \$	statements, have been exa racy and completeness of and may result in a late filing 20,000 on January 1, 2024	amined by you and, any accompanying penalty. If the follo I. Further, you are a	to the bes Personal wing page	st of your Property i es are blai	knowiedge etum(s). Ir ak or not in	and belief, this constitucomplete or inaccurate cluded, you are attesti	utes a true, correct, and complete e Annual Reports or ng to owning a sum
Check one: Option #1 X Corporate	Officer or	Principal of	f Entity O	R Option 2 Firm or	Individual, other th	an taxpay	er, prepa	ing this An	nual Repport/Persona	Property Tax return.
SUSANNE HOLLOWAY										· · · · · ·
PRINT NAME		IGNATUI	RE	· · · · · ·	DATE				HONE NUMBER	*·

200 WEST MAIN STRETET SALISBURY, MD 21803

MAILING ADDRESS OF PERSON COMPLETING THIS FORM