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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2009

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning 07/01, 2009, and ending 06/30, 2010

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization CAROLINE CENTER, INC. Doing Business As		D Employer identification number 52-1019072
		Number and street (or P O box if mail is not delivered to street address) Room/suite 12061 SCHOOL STREET P.O. BOX 460		E Telephone number (410) 634-2102
		City or town, state or country, and ZIP + 4 RIDGELY, MD 21660		G Gross receipts \$ 6,898,197.
		F Name and address of principal officer KELLY E. CALLAHAN 2 N. MARYLAND AVE RIDGELY, MD 21660		H(a) Is this a group return for affiliates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> H(b) Are all affiliates included? Yes <input type="checkbox"/> No <input type="checkbox"/> <small>If "No," attach a list (see instructions)</small>
I Tax-exempt status X 501(c) (3) (insert no) 4947(a)(1) or 527	J Website: WWW.CAROLINECENTER.ORG www.carolinecenterinc.org		H(c) Group exemption number	
K Form of organization X Corporation Trust Association Other	L Year of formation 1975		M State of legal domicile MD	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities PROVIDE QUALITY, INDIVIDUALIZED SERVICES FOR PERSONS WHO ARE DEVELOPMENTALLY DISABLED THROUGH WHICH THEIR GREATEST POTENTIAL TOWARD INDEPENDENT LIVING AND INTEGRATION CAN BE OBTAINED.	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 10
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 10
	5	Total number of employees (Part V, line 2a)	5 264
	6	Total number of volunteers (estimate if necessary)	6
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 71,884. Current Year 71,489.
	9	Program service revenue (Part VIII, line 2g)	6,813,888. 6,825,781.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	20,303. 927.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 11e)	0. 0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,906,075. 6,898,197.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,335,772. 5,731,898.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	16b	Total fundraising expenses, Part IX, column (D), line 25	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,513,083. 1,400,263.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,848,855. 7,132,161.
Net Assets or Fund Balances	19	Revenue less expenses Subtract line 18 from line 12	57,220. -233,964.
	20	Total assets (Part X, line 16)	Beginning of Year 4,328,871. End of Year 4,218,682.
	21	Total liabilities (Part X, line 26)	3,697,696. 3,821,471.
	22	Net assets or fund balances Subtract line 21 from line 20	631,175. 397,211.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge

Sign Here: *Kelly E. Callahan, CEO of Caroline Center Inc.* Date: 2-1-11
 Signature of officer
 Type or print name and title: KELLY E. CALLAHAN, CEO

Paid Preparer's Use Only	Preparer's signature: <i>[Signature]</i> Date: 1/25/11	Check if self-employed: <input type="checkbox"/>	Preparer's identifying number (see instructions): 34-1876254
	Firm's name (or yours if self-employed), address, and ZIP + 4: CBIZ MHM, LLC 28614 MARLBORO AVE SUITE 103 EASTON, MD 21601	EIN: 34-1876254	Phone no: 410-822-6950

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.*

Form 990 (2009)

SCANNED FEB 28 2011

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
PROVIDE QUALITY, INDIVIDUALIZED SERVICES FOR PERSONS WHO ARE
DEVELOPMENTALLY DISABLED THROUGH WHICH THEIR GREATEST POTENTIAL
TOWARD INDEPENDENT LIVING AND INTEGRATION CAN BE OBTAINED.

2 Did the organization undertake any significant program services during the year which were not listed on
the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program
services? [] Yes [X] No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 4,232,041 including grants of \$) (Revenue \$ 4,435,864)
RESIDENTIAL - PROVIDES RESIDENTIAL COMMUNITY LIVING
INTEGRATION PROGRAMS FOR DEVELOPMENTALLY DISABLED AND OTHER
HANDICAPPED INDIVIDUALS AND THEIR FAMILIES.

4b (Code) (Expenses \$ 2,037,514 including grants of \$) (Revenue \$ 2,247,184)
DAY - PROVIDES VOCATIONAL, REHABILITATIVE AND COMMUNITY
PLACEMENT ASSISTANCE FOR DEVELOPMENTALLY DISABLED AND OTHER
HANDICAPPED INDIVIDUALS AND THEIR FAMILIES.

4c (Code) (Expenses \$ 90,537 including grants of \$) (Revenue \$ 86,854)
SUPPORT SERVICES - PROVIDES GUIDANCE TO THE COMMUNITY AND
FAMILIES IN THE CARE OF MENTALLY DISABLED CITIZENS AND
PROVIDES COUNSELING TO THE FAMILIES OF MENTALLY DISABLED
CITIZENS.

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 6,360,092.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20 covering various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable. 1a 3		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 264		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a		X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 4b		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year. 7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966? 9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person? 9b		X
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (10); 1b Enter the number of voting members that are independent (10); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X); 6 Does the organization have members or stockholders? (X); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?; 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X); 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (X); 13 Does the organization have a written whistleblower policy? (X); 14 Does the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MD,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply: Own website, Another's website, Upon request (X)
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: CAROLINE CENTER, INC. 12061 SCHOOL STREET RIDGELY, MD 21660 410-634-2102

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
EDWIN RICHARDS DIRECTOR	2.00	X					0.	0	0.	
GAIL TOWERS DIRECTOR	2.00	X					0.	0	0.	
RONNIE THOMPSON DIRECTOR	2.00	X					0.	0	0.	
TOM RICHARD DIRECTOR	2.00	X					0.	0	0.	
ALICE GANGEMI DIRECTOR	2.00	X					0.	0	0.	
SUSAN FINK DIRECTOR	2.00	X					0.	0	0.	
BONNIE BAKER DIRECTOR	2.00	X					0.	0	0.	
NINA JOAN JACKSON DIRECTOR	2.00	X					0.	0	0.	
WALTER PALMER SECRETARY	2.00			X			0.	0	0.	
ELAINE STEIN PRESIDENT	2.00			X			0.	0	0.	
KELLY COLEMAN <i>Callahan</i> CEO	40.00			X	X	X	109,179.		2,287.	
CHERIE MOSLEY CFO	40.00			X	X		87,706.		1,540.	
RICK HARRIS TREASURER	2.00			X			0.	0	0.	
CINDY GOWER VICE PRESIDENT	2.00			X			0.	0	0.	

Part VIII Statement of Revenue

52-1019072

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions) . .	1e	67,221				
	f All other contributions, gifts, grants, and similar amounts not included above . .	1f	4,268				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f ▶		71,489				
	Program Service Revenue	Business Code					
		2a CLIENT PROGRAM FEES		276,543	276,543		
b CONTRACT REVENUE			11,406	11,406			
c KITCHEN AND MISC INCOME			44,473	44,473			
d FEES, CONTRACTS FROM GOV'T AGENCIES			6,493,359	6,493,359			
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f ▶			6,825,781				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		415			415	
	4 Income from investment of tax-exempt bond proceeds . . . ▶		0				
	5 Royalties ▶		0				
	6a Gross Rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss) ▶		0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)		512			512
		d Net gain or (loss) ▶		512			512
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
	b Less direct expenses b						
	c Net income or (loss) from fundraising events ▶		0				
	9a Gross income from gaming activities See Part IV, line 19 a						
b Less direct expenses b							
c Net income or (loss) from gaming activities ▶		0					
10a Gross sales of inventory, less returns and allowances a							
b Less cost of goods sold b							
c Net income or (loss) from sales of inventory ▶		0					
Miscellaneous Revenue		Business Code					
11a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d ▶		0					
12 Total Revenue. See instructions ▶		6,898,197	6,825,781		927		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the US See Part IV, line 21 . . .	0.			
2 Grants and other assistance to individuals in the US See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	200,712.	100,356.	100,356.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages	4,443,029.	4,240,700.	202,329.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	0.			
9 Other employee benefits	690,112.	568,951.	121,161.	
10 Payroll taxes	398,045.	369,778.	28,267.	
11 Fees for services (non-employees)				
a Management	0.			
b Legal	0.			
c Accounting	0.			
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	0.			
12 Advertising and promotion	9,080.	1,798.	7,282.	
13 Office expenses	73,184.	36,872.	36,312.	
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	158,473.	90,829.	67,644.	
17 Travel	28,520.	21,598.	6,922.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	0.			
20 Interest	76,884.	68,930.	7,954.	
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	174,276.	146,673.	27,603.	
23 Insurance	67,831.	50,755.	17,076.	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a <u>EQUIPMENT PURCHASE AND LEASE</u>	34,995.	6,215.	28,780.	
b <u>PROGRAM ACTIVITIES SUPPLIES</u>	118,346.	115,615.	2,731.	
c <u>CONTRACT SERVICES</u>	5,480.	4,102.	1,378.	
d <u>FOOD & HOUSEHOLD SUPPLIES</u>	196,949.	194,900.	2,049.	
e <u>MISCELLANEOUS</u>	9,198.	7,328.	1,870.	
f All other expenses	447,047.	334,692.	112,355.	
25 Total functional expenses. Add lines 1 through 24f	7,132,161.	6,360,092.	772,069.	
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	127,412.	1	0.
	2 Savings and temporary cash investments	2,071,206.	2	2,092,484.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	68,704.	4	64,245.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	10,358.	8	4,529.
	9 Prepaid expenses and deferred charges	21,111.	9	37,653.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 4,336,771.		
	b Less accumulated depreciation	10b 2,500,090.	1,902,893.	10c 1,836,681.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part V, line 11	127,187.	15	183,090.
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,328,871.	16	4,218,682.	
Liabilities	17 Accounts payable and accrued expenses	544,635.	17	364,466.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties ATCH. 4	1,050,772.	23	1,244,513.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	2,102,289.	25	2,212,492.
	26 Total liabilities. Add lines 17 through 25	3,697,696.	26	3,821,471.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	625,073.	27	391,109.
	28 Temporarily restricted net assets	6,102.	28	6,102.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	631,175.	33	397,211.	
34 Total liabilities and net assets/fund balances	4,328,871.	34	4,218,682.	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.
 Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc (see instructions) 12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 %
15 Public support percentage from 2008 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.
17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization.
b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	59,136	71,129	72,845	71,884	71,489	346,483
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	6,145,998	6,253,761	6,689,897	6,813,888	6,825,781	32,729,325
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	6,205,134	6,324,890	6,762,742	6,885,772	6,897,270	33,075,808
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						33,075,808

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	6,205,134	6,324,890	6,762,742	6,885,772	6,897,270	33,075,808
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	36,758	22,577	18,359	20,303		97,997
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	36,758	22,577	18,359	20,303		97,997
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) <u>ATCH 1</u>		18,415				18,415
13 Total support. (Add lines 9, 10c, 11, and 12)	6,241,892	6,365,882	6,781,101	6,906,075	6,897,270	33,192,220
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99.65%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.60%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	.30%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.35%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here** The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

GAIN (LOSS) ON SALE OF ASSETS

2006 - (999) LOSS ON SALE OF ASSET

2009 - 512 GAIN ON SALE OF ASSET

SCHEDULE A, PART III - OTHER INCOME

ATTACHMENT 1

DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
MISCELLANEOUS INCOME		18,415				18,415
TOTAL		<u>18,415</u>				<u>18,415</u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

Name of the organization

CAROLINE CENTER, INC.

Employer identification number

52-1019072

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?, 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Revenues, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items, 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table
- | | Amount |
|---|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Term endowment ▶ _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0.	505,320		505,320.
b Buildings	0.	1,315,602	721,667.	593,935.
c Leasehold improvements				
d Equipment	0.	833,555	708,792.	124,763.
e Other	0.	1,682,294	1,069,631.	612,663.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).				1,836,681.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

Table with 10 rows for reconciliation of net assets. Line 1: Total revenue (6,898,197). Line 2: Total expenses (7,132,161). Line 3: Excess or (deficit) for the year (-233,964). Lines 4-9: Adjustments. Line 10: Excess or (deficit) for the year per audited financial statements (-233,964).

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Table with 5 main rows for revenue reconciliation. Line 1: Total revenue (6,898,197). Lines 2-4: Adjustments. Line 3: Subtract line 2e from line 1 (6,898,197). Lines 4-5: Adjustments. Line 5: Total revenue (6,898,197).

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows for expense reconciliation. Line 1: Total expenses (7,132,161). Lines 2-4: Adjustments. Line 3: Subtract line 2e from line 1 (7,132,161). Lines 4-5: Adjustments. Line 5: Total expenses (7,132,161).

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Series of horizontal dashed lines provided for entering supplemental information.

Part XIV Supplemental Information *(continued)*

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

CAROLINE CENTER, INC.

Employer identification number

52-1019072

ATTACHMENT 2

PART VI, SECTION B, LINE 11

THE 990 IS REVIEWED BY THE CEO AND CFO OF THE CAROLINE CENTER BEFORE FILING. THE AUDITED FINANCIAL STATEMENTS ARE USED TO REVIEW THE 990. THE BOARD DOES NOT RECEIVE A COPY OF THE 990 BEFORE FILING. THE CAROLINE CENTER MANAGEMENT HAS PLANS GOING FORTH TO SUBMIT A COPY OF THE 990 TO THE BOARD BEFORE FILING.

PART VI, SECTION B, LINE 12C

THE BOARD OF DIRECTORS REGULARLY AND CONSISTENTLY MONITOR'S AND ENFORCES THE CONFLICT OF INTEREST POLICY BY REVIEWING OFFICERS, DIRECTORS, AND KEY EMPLOYEES RELATIONSHIPS WITH CLIENTS AND VENDORS THROUGH MONTHLY BOARD OF DIRECTOR MEETINGS. EACH OFFICER, DIRECTOR, AND KEY EMPLOYEE IS REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT ANNUALLY.

PART VI, SECTION B, LINE 15A

THE BOARD OF DIRECTORS SETS THE CEO'S SALARY IN AN ANNUAL REVIEW PROCESS. THE BOARD REVIEWS OVERALL PERFORMANCE AND USES PUBLISHED INFORMATION THAT CONSISTS OF COMPILED NON-PROFIT SALARY STRUCTURES FROM ALL COUNTIES IN THE STATE OF MARYLAND.

PART VI, SECTION C, LINE 19

CAROLINE CENTER, INC. MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Name of the organization

CAROLINE CENTER, INC.

Employer identification number

52-1019072

ATTACHMENT 3

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
PREPAID EXPENSES	37,653.
TOTALS	<u>37,653.</u>

ATTACHMENT 4

FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE

LENDER: CURRENT PORTION OF LONG TERM DEBT

BEGINNING BALANCE DUE	101,071.
ENDING BALANCE DUE	<u>162,914.</u>

LENDER: LONG TERM DEBT

BEGINNING BALANCE DUE	949,701.
ENDING BALANCE DUE	<u>819,991.</u>

Name of the organization

CAROLINE CENTER, INC.

Employer identification number

52-1019072

ATTACHMENT 4 (CONT'D)

LENDER: LINE OF CREDIT

ENDING BALANCE DUE 250,000.

LENDER: CAPITAL LEASE

ENDING BALANCE DUE 11,608.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 1,050,772.

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 1,244,513.

Elaine Stein, President

Second Term Officer-Family w/DD

October 2010 – October 2012

First Term Director April 2007 – October 2011

24691 Long Branch Drive

Denton, Maryland 21629

(h) 410 479-3938

(c) 410 829-4990

cwstein@comcast.net

Walter Palmer, Secretary

Second Term Officer

October 2010 – October 2012

First Term Director October 2007 – October 2011

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(w) 410 479-1880

Walter_b_palmer@hotmail.com

Gail Towers

First Term Director

October 2007 – October 2011

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gtowers47@gmail.com

Tom Richard

First Term Director-Exp. w/ DD

October 2008 – October 2012

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fairview@atlanticbb.net

Alice Gangemi

First Term Director

October 2010 – October 2014

14347 River Road

Greensboro, Maryland 21639

Phone: (410) 482-8159

gangemi@goeastoff.net

Rick Harris, Treasurer

Second Term Officer

October 2010 – October 2012

First Term Director

October 2008 – October 2012

Franklin Street

Denton, Maryland 21629

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(c) 410 924-0521

(w) 410 479-2401

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blueoval32@yahoo.com

Cindy Gower, Vice President

First Term Officer

December 2010 – October 2012

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cindyg@huges.net

Ronnie Thompson

First Term Director

October 2010 – October 2014

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rrbjt@verizon.net

Susan Fink

First Term Director

October 2010 – October 2014

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Bonnie Baker

First Term Director

October 2010 – October 2014

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Phone: (410) 634-2018

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Edwin Richards
Honorary Director
No Term limits
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Nina Joan Jackson
Honorary- Individual w/ disability
No Term limits
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