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Department of the Treasury Internal Revenue Service

SCANNED JAN 0 6 2011

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No 1545 0047

| | For t | he 2009 calend | ar year, | or tax year beginning Ju] | . 1 , | 2009, and endin | g Jun | ı 30 | | ,2010 | | |
|-------------------------------|-------------|---------------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------|---------------------|-----------------------------------|-------------|-------------|
| В | | if applicable | | C Name of organization | | | | D Employ | yer Ide | entification Nu | ımber | |
| | | ddress change | Please use IRS label | BALTIMORE CITY FO | UNDATION, IN | c. | | 52- | 121 | 2473 | | |
| | \sqcap | lame change | or print or type. | Number and street (or P O box | | | uite | E Teleph | | | | |
| | \prod_{i} | nitial return | See specific | 10 N. CALVERT STR | REET | 915 | | (41 | o) | 396-13 | 95 | |
| | Пт | ermination | Instruc- tions | City, town or country | | State ZIP code + 4 | | | · / | | | |
| | | mended return | | BALTIMORE | | MD 21202 | | G Gross | eceint | ts \$ 3,83 | 5.310 | l _ |
| | Π | pplication pending | F Name a | and address of principal officer | | | H(a) Is this | s a group retui | _ | | Yes | X No |
| | | | Lenwoo | d Ivey 10 N. Calvert St # | 915 Baltimore | MD 21202 | | ll affiliates inc | | | Yes | No |
| ī | Tax | k-exempt status | | | | | If 'No, | ,' attach a list | (see | instructions) ' | | |
| J | | bsite: ► N/A | | <u>(-) (-) () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () () (</u> | / | <u> </u> | H(c) Groun | exemption n | ımber | . ▶ | | |
| ĸ | | ` _ | X Corpora | ation Trust Association | Other ► | L Year of Format | | · · · · · · · · · · · · · · · · · · · | | of legal domic | le MD | |
| Pa | irt la | | | | <u></u> | | | | | 3 | | |
| | 1 | | | anization's mission or most | significant activities. | Local are | ea com | nmunity | we | lfare | | |
| 0 | | | | | - | | . – – – | | - – – | | | |
| auc | | | | | | | | | | | | |
| Governance | İ | | | | | | | | | | | |
| <u>%</u> | | Check this box | : ▶ ∐ | if the organization discontin | ued its operations or | disposed of mor | e than 25 | 5% of its a | ssets | | | |
| অ | 3 4 | | | bers of the governing body (t voting members of the gov | | l.m.a. 1 h.) | | | 3 | | | |
| iles | 5 | | | yees (Part V, line 2a) | erring body (Fart VI, | , lifte (b) | | | 5 | 10 | | |
| Activities & | 6 | | | eers (estimate if necessary) | | | | | 6 | 15 | | |
| Ac | 7a | | | usiness revenue from Part \ | /III, Icolumn (C), ine | 12 | | | 7 2 | | | 0. |
| | b | Net unrelated t | business | taxable income from Form 9 | 990-T, line 34 | | | | 71 | b | | |
| | | | | | | | ı | Prior Year | | Cur | rent Ye | ar |
| đ) | 8 | Contributions a | and grant | ts (Part VIII, line 1h) | | | | 2,656,8 | 343. | | | 211. |
| nue | 9 | - | | ue (Part VIII, line 2g) | | | | | | | | |
| Revenue | 10 | | | rt VIII, column (A), lines 3, 4 | | | | 22,2 | 90. | | 578, | 099. |
| - | 11 | Other revenue | (Part VII | L. column (A). Intes 5, 6d, 8 | c, 9c, 10c, and 11e) | | ļ | | | <u> </u> | | |
| | 12 | | | es 8 through 1 Vmust equa | | (1), line 12) | ļ: | 2,679,1 | <u>.33.</u> | . 3 | , 836, | 310. |
| | 13 | | | unts paid (Part IX, column (| | | | | | | | |
| | 14 | Benefits paid to | o or idist | hembers (Part IX, Zotumn (| ine 4) | 5 400 | | | | | | |
| 8 | 15 | | 1 13 | sation, employee benefits (| Total 1 | ines 5-10) | | 18,9 | 18,900. | | 20, | 833. |
| Expenses | | | | tees (Part-IX, columni (A), | 5 m | The state of the s | | | ~, *** | - V + 4 + | | |
| 꺏 | | Total fundraisir | | 4m 2000 | | The state of the s | - 20 1/4 (NE | | | | | |
| | 17 | | | K, column (A), lines 11a-11d | • | | | 2,944,8 | 52. | . 1 | 964, | 216. |
| ì | 18 | | | es 13-17 (must equal Part I | | 5) | | 2,963,7 | 52. | . 1 | 985, | 049. |
| | 19 | Revenue less e | expenses | Subtract line 18 from line | 12 | | | -284,6 | 19. | . 1, | 851, | 261. |
| 000 | | | | | | | Begi | nning of Y | ear | Enc | of Yea | ar |
| Bala | 20 | Total assets (P | | | | | | 8,087,8 | | | 093, | 570. |
| Net Assets or Fund Balance | 21 | Total liabilities | (Part X, | line 26) . | | | | 969,0 | 65. | | 123, | <u>559.</u> |
| | 22 | | | nces. Subtract line 21 from | ine 20 | | | 7,118,7 | 50. | . 8, | 970, | 011. |
| Pa | rt lli | | | | | | | | | | | |
| | | Under penalties of true, correct, and | of perjury, I | Declare that I have examined this re Declaration of preparer (other than of | turn, including accompanyi officer) is based on all infor | ng schedules and state mation of which prepa | ements, and rer has any | d to the best of knowledge | of my k | knowledge and | d belief, i | t is |
| c:~ | - | | | 4 | | | | | | | | |
| Sig Her | | Smature | officer . | 7/1/ | \ | | | .1/30/1 ate | 0 | | | |
| | | ► LENWOO | | | \checkmark | | 00 | 210 | | | | |
| | | Type or print | | | | | | | | | | |
| | | 1 | | | | Date | 10 | | TF | Preparer's ide | ntifvina n | umber |
| Pai | d | | | | | | se | heck if | \neg $^{\circ}$ | Preparer's ide (see instructio | ns) | |
| Pre | | Preparer's signature | - KVBV | KING BESS, CPA | | 12/01/10 | | mployed P | 믜 | | | |
| par | | Firm's name (or | | , KING & ASSOCIAT | ES, P.A. | 112/01/10 | ' | | | | | |
| Use | | yours if self- employed), | | SLADE AVENUE SUIT | | | | INI 🕨 | | | | |
| Onl | y | address, and ZIP + 4 | | 'IMORE | | 1208-4900 | | hana na | //1 | 0) 496 | -4504 | |
| May | the II | _' | | ith the preparer shown abov | | 1200-4900 | I Pi | hone no | (41 | X Ye | -4500 | No. |
| | | | | vork Reduction Act Notice, | | tructions | | TEEA0101 | 0750 | | | (2009) |
| | | | p v | , | and deparate IIID | ·· ~~~~~~~~ | | 1 | 4/12 | U 5 C | | (5003) |

| | m 990 (2009) BALTIMORE CITY FOUNDATION, INC. | 52-1 | 21247 | 73 | | Page 2 |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------|--------------|-------------|------------|
| Pa | rt III Statement of Program Service Accomplishments | | | | * | |
| 1 | Briefly describe the organization's mission | | | | | |
| | Local area community welfare | | | | | |
| | | | | | | |
| | | | | - | | |
| | | | | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on t | he prior | | | | |
| _ | Form 990 or 990-EZ? | rie prior | | Yes | X | No |
| | | | Ш | 162 | △ | No |
| • | If 'Yes,' describe these new services on Schedule O. | 2 | | V | | N1. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program servi | ces | ш | 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 t and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and | by expens | es Sec s to oth | tion 50 | 1(c)(3 |) |
| | expenses, and revenue, if any, for each program service reported | anocation | 3 10 0111 | J. J. U. | · iotai | |
| | | | | | | |
| | | | | | _ | |
| 48 | a (Code) (Expenses \$ 687,449. including grants of \$ 0.) (| | | | | |
| | YouthWorks Summer Jobs Program- Baltimore City youth ages 14-21 a: | | | | | |
| | connected to public and private sector employers who provide the | | - | | | . _ |
| | supervision and job assignments that give these youth the | | | | | |
| | opportunity to earn wages and learn the valuable skills necessary | | | | | |
| | to be successfully employed. | | | | | |
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| | | | <u> </u> | | | |
| 41 | b (Code) (Expenses \$ 161,281. including grants of \$ 0.) (F | Revenue | \$ | 42 | 7,33 | 33.) |
| | Recreation & Parks - Various activities for organizations and cit: | | | | | |
| | in the City of Baltimore are funded for athletic activities and for | or the | | | | |
| | maintenance of athletic facilities. | | | | | |
| | | | | | | |
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| | | | | - - - | | |
| | | | | | | |
| 40 | c (Code) (Expenses \$109,422. including grants of \$0.) (F | Pavanua | ė | 1 Ω | 2 11 | 0) |
| 70 | Academy for College and Career Exploration - An innovation high so | | | | | |
| | | | | - | | |
| | funded by both public and private donations aims to help youth dev | етор_ | | | | |
| | a love of learning, a constructive direction for their lives and a | 1 | | | | |
| | belief i the own abilities to succeed by promoting academic success | ss | | | | |
| | and preparation for careers of the 21st century. | | | | | |
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| | | - - | | | | |
| | | | | | | |
| 4d | Other program services (Describe in Schedule O) | | | | | |
| | (Expenses \$ 716,118. including grants of \$ 0.) (Revenue \$ | | 544, | 4 Q Q | ١ | |
| 4e | e Total program service expenses ► 1,674,270. | | | | , | |
| | | | | | | |

| -, - | TO WAS TO THOUGHT OF THOU WINDS | | | _ |
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| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 3 | | х_ |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II | 4 | | Х |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III | 5_ | | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II | 7 | | Х_ |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | 8 | | _X |
| 9 | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV | 9 | х | |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If Yes , Yes | 10 | | х |
| 11 | Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | 11 | - | X |
| | Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI | | ريت ودراي اي اي ميل ايل کرد اي ميل ايل کرد | |
| | Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII | | | |
| | • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX | 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | • Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. | | | |
| | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes, 'complete Schedule D, Part X | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12 | х | |
| 12 | AWas the organization included in consolidated, independent audited financial statement for the tax Yes No | A STATE OF THE STA | 3 4 5 5 5 | |
| 12 | | | ٣٠ - ١٠ | 6 4 7 5 J |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?. | 13 14a | | <u> </u> |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I | 14b | | <u>x</u> |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II | 15 | | x |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III | 16 | | <u>x</u> |
| | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I | 17 | | <u>x</u> |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | | x |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 19 | | х |
| 20 | Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 20 | | <u>X</u> |
| | | | | |

| | | | 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? If 'Yes,' complete Schedule I, Parts I and II | 21 | | 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? If 'Yes,' complete Schedule I, Parts I and III | 22 | | х |
| 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> . | 23 | | <u>x</u> |
| 24 a | 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 | 24a | | X |
| Ŀ | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| (| Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| 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? If 'Yes,' complete Schedule L, Part I | 25a | | Х |
| Ł | 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? If 'Yes,' complete Schedule L, Part I | 25b | | 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? If 'Yes,' complete Schedule L, Part II | 26 | | x |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III | 27 | | Х |
| 28 | Was the organization a party to a business transation 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? If 'Yes,' complete Schedule L, Part IV . | 28a | | <u>X</u> |
| t | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28b | ٠. | : X |
| | 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? If 'Yes,' complete Schedule L, Part IV | 28c | | х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M | 30 | | x |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | х |
| 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? If 'Yes,' complete Schedule R, Part I | 33 | | х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | х |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 | 35 | | Х |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 | 36 | | <u>x</u> |
| 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? If 'Yes,' complete Schedule R, Part VI | 37 | | х |
| 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 | 38 | | Х |
| | | _ | | |

| | | | Yes | No |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------|---------------------------------|
| 1 | a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. | | 1.00 mg | 1 2 2 2 3 |
| | Information Returns. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 | 31,473 | | 200 |
| | | | 游 | \$ 25 |
| | c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1 c | X | |
| 2 | a 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 | | | |
| 2 | b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) | 3.00 | | |
| 3 | a 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 | 3 b | | L_ |
| 4 | 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 | | х |
| | 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. | Party of | | 5 * 3 2*55 |
| | a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Х |
| 1 | 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 line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | 5 c | | |
| 6 | a 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 | | Х |
| ı | b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | 7 |
| ; | 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? | کے 7a | | X |
| ١ | b'If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | 7 b | | |
| • | c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7с | | Х |
| (| d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d | V. 3. | A | 4.5 |
| • | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7 e | | х |
| 1 | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Х |
| • | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| ĺ | 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? | A S | # | (1) (1) (1) |
| 9 | Sponsoring organizations maintaining donor advised funds. | | 2.1. 7.1. | <u> </u> |
| - | a Did the organization make any taxable distributions under section 4966? | 9a | =1.0." | X |
| | Did the organization make any distribution to a donor, donor advisor, or related person? | 9b | | X |
| | Section 501(c)(7) organizations. Enter: | £ 20 E | | <u> </u> |
| | Initiation fees and capital contributions included on Part VIII, line 12 | 보증 | | |
| | Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | £ | | |
| 11 | | | | Marie Contraction (Contraction) |
| á | Gross income from other members or shareholders | 1 | | |
| ŀ | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | 经证 |
| 12 a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| Ŀ | olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b | ··· · · · · · · · · · · · · · · · · · | | 12 60 |
| | | | | |

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.

| <u>Se</u> | ction A. | Governing I | Body and N | lanagement | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------------------------------------------|-----------------------------------|-----------------------------------------|--------------------------|----------------------------------------------|---------------------------|--------------------------------------|-------------------|-------------|-----------------------------------------|------------|
| | - | - | <u> </u> | | | | | | | | Yes | No |
| 1 | a Enter the | number of votin | ng members of | the governing b | ody | | | 1a 10 | | | 3,3 | |
| | b Enter the | e number of votin | ng members th | at are independ | ent | | | 1b 10 | | 25 4 6 K | 2 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | |
| 2 | Did any officer, of | officer, director, f lirector, trustee o | trustee, or key er key employe | employee have e? | a family re | lationship or a busi | iness relat | tionship with any | other | 2 | | X |
| 3 | Did the o | organization dele | gate control or ustees, or kev | ver management emplovees to a | duties cus | tomarily performed nt company or othe | l by or und | der the direct sup | ervision | 3 | | Х |
| 4 | | organization mak | | | _ | · - | | | | 4 | | x |
| | | prior Form 990 | | 3 | | | | | | | | |
| 5 | Did the o | organization beco | me aware dur | ing the year of a | material d | version of the orga | anızatıon's | assets? | | 5 | | Х |
| 6 | Does the | organization ha | ve members o | r stockholders? | | _ | | | | 6 | | Х |
| 7 | a Does the | | ve members, s | stockholders, or | other perso | ns who may elect o | one or mo | re members of the | he | 7a | | х |
| | b Are any | decisions of the | governing bod | y subject to appr | roval by me | mbers, stockholder | rs, or othe | r persons? | | 7 b | | Х |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | | | | | | 30X 33X | |
| | | erning body? | | | | | | | | 8a | x | "- Bi |
| | • | nmittee with auth | nority to act or | behalf of the or | overnina bo | dv? | | | | 8b | x | |
| | Is there | anv officer, direct | tor or trustee. | or kev emplovee | listed in P | art VII, Section A, v Idresses in Schedul | who cann | ot be reached at | the | 9 | | х |
| Sa | | | | | | on about policie | | equired by the | e Internal | | | |
| - | enue Code | • | ins occio | 7 D Tequests | miomia | on about ponen | 05 7701 7 | equired by tin | o internar | | | |
| | 01100 | | | ······································ | - | | | | | | Yes | No |
| 10 | a Does the | organization hav | ve local chapte | ers, branches, or | affiliates? | | | | | 10a | | Х |
| | b If 'Yes,' o | does the organizathes to ensure the | ation have writh | ten policies and are consistent | procedures | s governing the acti of the organization? | ivities of s | such chapters, af | filiates, | 10b | | - |
| 11 | | | | | | ers of its governing | | fore filing the for | m? | 11 | Х | |
| | | • | | | | on to review this Fo | | J | Ī | T = 1, 7, 8 | وموجه ويتجيد | |
| 12 | a Does the | organization hav | ve a written co | inflict of interest | policy? If 'I | Vo,' go to line 13 | | | | 12a | | Х |
| | b Are office to conflic | | trustees, and k | ey employees re | equired to o | lisclose annually in | nterests tha | at could give rise | ; | 12b | | |
| | c Does the | organization reg O how this is do | gularly and cor | sistently monito | r and enfor | ce compliance with | the policy | y? If 'Yes,' descr | ibe in | 12 c | | |
| 13 | Does the | organization hav | ve a written wl | nistleblower polic | cy? | | | | | 13 | | Х |
| 14 | Does the | organization hav | ve a written do | cument retentio | n and destr | uction policy? | | | . [| 14 | | Х |
| 15 | Did the p | rocess for deterr comparability da | mining comper ata, and contei | nsation of the fol Inporaneous sub | lowing pers | ons include a revie of the deliberation a | ew and ap and decis | proval by indepersion? | endent | | | 三建造 |
| | a The orga | nization's CEO, I | Executive Dire | ctor, or top man | agement of | ficial | | | . [| 15a | | X |
| | b Other off | icers of key emp | loyees of the | organization | | | | | | 15 b | | X |
| | If 'Yes' to | line 15a or 15b | , describe the | process in Sche | dule O. (Se | e instructions.) | | | | 1 | | a |
| 16 | | rganization investing the year? | st in, contribut | e assets to, or p | articipate ir | a joint venture or | sımılar ar | rangement with | a taxable | 16a | | X |
| | b If 'Yes,' I in joint v | nas the organizat enture arrangement th respect to suc | non adopted a ents under app | written policy or blicable federal t | procedure ax law, and | requiring the orgar I taken steps to saf | nization to feguard th | evaluate its par e organization's | ticipation exempt | 16b | | |
| Ser | | Disclosures | | | | | | | | .55 | | |
| | | tates with which | | Form 990 is rea | uired to be | filed ► Maryla | and | | | | | |
| | | | | | | 1024 if applicable), apply. | | 990-T (501(c)(3) |)s only) avai | lable | for pu | blic |
| | | website | | s website | | on request | | | | | | |
| 19 | Describe statemer | ın Schedule O w its available to th | hether (and if e public | so, how) the org | ganization r | nakes its governing | g documer | nts, conflict of in | terest policy | , and | fınanc | ıal |
| 20 | State the | name, physical | address, and | telephone numb | er of the pe | rson who possesse | es the boo | ks and records o | of the organi | zation | : | |
| | ► <u>Nancy</u> | Leonard_ | 40 | 1 E. Fayette | Street, | Baltimore_ | <u>M</u> D | 21202 | (41 | <u>0)_3</u> | <u>96-1</u> | <u>459</u> |

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 organizations'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 employees.'
- 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 | t compens | ate ar | ту сі | urre | nt o | fficer, | dıre | ctor, or trustee. | | |
|--------------------------------------------|------------------------------|-------------|-----------------------|------|----------------|-----------------------|-----------|------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| (A) | (B) | | | (4 | c) | | | (D) | (E) | (F) |
| Name and Title | Average hours per week | or director | anstitutional toustee | _ | a key amployee | ap High est cornacted | y) Forner | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| Mayor Stephanie Rawlings-Blake | | | | | | | | | | |
| Volunteer Board | 0.00 | Х | | | | | | 0. | 0. | 0. |
| Lenwood Ivey President/ As Needed Basis | 20.00 | х | | Х | | | | 20,833. | 0. | 0. |
| Karen Sitnick | | | • | | | | ļ. | | | |
| Secretary | 0.00 | Х | | | | | | 0. | 0. | 0. |
| Frank Bossle Treasurer | 0.00 | Х | | | | | | 0. | 0. | 0. |
| James Piper, III | | | | | | | | - | | - |
| Volunteer Board | 0.00 | Х | | | | | | 0. | 0. | 0. |
| Edward Gallagher Volunteer Board | 0.00 | x | | | | | | 0. | 0. | 0. |
| L. Patrick Deering | | | | | | | | | | |
| Volunteer Board | 0.00 | <u> X</u> | | | | | | 0. | 0. | 0. |
| Ellen H. Yankellow Volunteer Board | 0.00 | х | | | | | | 0. | 0. | 0. |
| Martin_WelchVolunteer Board | 0.00 | х | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
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| Part VII- Section A. Officers, Directors, Trus | tees, I | Кеу | En | ıple | oye | es, | an | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------|-----------------------|---------------------|---------------|------------------------------|----------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| (A) | (B) | erage Position (| | | c) | | | (D) | (E) | (F) |
| Name and Title | hours per weel | individual trustee | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| | - | | | | | | | | | |
| | - | | | | | | | | | |
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| | - | | | | | | | , | | |
| | - | | | | | | | | | |
| 1 b Total 2 Total number of individuals (including but not limited from the organization ► | d to thos | e lis | ted a | abov | ve) v | who | rece | 20,833. eived more than \$ | - 0 100,000 in reporta | |
| 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in | or truste | e, k | еу е | mple | oye | e, or | hıgl | hest compensated | employee | 3 X |
| 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater the individual | oortable | com | pen)? <i>If</i> | satio 'Ye: | on a s' co | nd c | other <i>lete</i> | r compensation fro Schedule J for su | om ch | 4 X |
| 5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch | ompensa edule J | ation for s | fror uch | n ar <i>pers</i> | ny u son | nrela | ated | organization for s | ervices | 5 X |
| Section B. Independent Contractors | | | | | | | | | | |
| 1 Complete this table for your five highest compensation from the organization. | ed indep | ende | ent c | ontr | racto | ors t | hat i | received more tha | n \$100,000 of | |
| (A) Name and business addres | s | | | | | | | (B) Description o | | (C) Compensation |
| | | | | | | | - | | | |
| | | | | | | | | | | |
| Total number of independent contractors (including) | but not l | ımıte | ed to | tho | se I | ıster | d ab | ove) who received | more than | |
| \$100,000 in compensation from the organization | | | 0 | 0 | 1 | | | 2.5, 10001100 | - The state of the | |

| である。 | では、 | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|--------------------------------------------------------|----------|-------------------------------------------------------------------|----------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------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| 27.5 | 1a | Federated campaigns | | 1 a | 18 18 18 18 18 18 | | | 元章建筑社会 |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | l t | Membership dues | | 1 b | | | 影响的影響 | |
| 2,5 | (| Fundraising events | | 1 c | | | | 128-30-28-8-8 |
| F | | Related organizations | | 1 d | | | | |
| SIG | | Government grants (contributi | ons) | 1 e | | | | |
| NO. W | , ا | All other contributions wifts | ranta and | | | | | |
| 문문 | ' | All other contributions, gifts, g similar amounts not included | above | 1f 3,258,211 | | | | |
| Ę0 | ، ا | Noncash contribns included in | | \$ | | | | |
| 중 | İ | Total. Add lines 1a-1f | | 7 | 3,258,211. | | | |
| UE | | | | Business Code | was British | · 表示: 1000000000000000000000000000000000000 | 建一个工作 | Marin Marin Contract |
| ĒŇ | 2 a | · | | | 1 | | N MC MCM XC 31 CACA C | 22 22 400 00 100 00 00 00 |
| Ä | l t | | | | | | | |
| /ICE | 6 | ; | | | | | | |
| Ë | ۱ ۵ | | | | | | | |
| ΣV | e | | | | | | | |
| S, | f | All other program service | e revenue | | | | | |
| PROGRAM SERVICE REVENUE | 1 | Total. Add lines 2a-2f | | <u> </u> | - | (学生的意思) | 3550 EN 5852 | 20 (TE 128) |
| | | | ludina dividei | nds interest and | | | | |
| | | Investment income (incother similar amounts) | ading divide | indo, interest and | 578,099. | 578,099. | 0. | 0. |
| | 4 | Income from investmen | t of tax-exem | npt bond proceeds | | | | |
| | 5 | Royalties | | • | - | | | |
| | i | | (i) Real | (ii) Personal | February States | THE SERVE | | \$1650 P |
| | 6a | Gross Rents | | | | 1000年 | | |
| | b | Less: rental expenses | | | | | | |
| | c | : Rental income or (loss) | | | | | | |
| | ١d | Net rental income or (lo | ss) | • | - | | | |
| | 7 a | Gross amount from sales of | (i) Securitie | s (II) Other | | | (事) (建) (進) | |
| | | assets other than inventory | | | | | | |
| | Ь | Less cost or other basis | | | | | | 有是是一种的 |
| | | and sales expenses | | | | | | 在一种特別 |
| | С | Gain or (loss) | | | | | | |
| | d | Net gain or (loss) | | <u> </u> | • | | | |
| ш | 8a | Gross income from fund | raising even | ts | | | | alitarità l'actività del distributa |
| ENUE | | (not including \$ | | _ | | | | |
| ξΕVI | | of contributions reported | on line 1c). | | | | | |
| OTHER REVE | | See Part IV, line 18 | | a | | | | |
| TH | | Less: direct expenses | | p[| | | ોર્ટી હર્સિંદી હોકાર્ય કે | |
| | | Net income or (loss) from | | | Service Control Control | 7 - 10 L L L L L L L L L L L L L L L L L L | To all the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the secon | The section of the Sections |
| | 9a | Gross income from gam See Part IV, line 19 | ing activities | | | | | |
| | | | | a | | | | |
| | | Less: direct expenses | | D | | 19 19 19 19 19 19 19 19 19 19 19 19 19 1 | BELL REFLECT | |
| | | Net income or (loss) from | | | As the control of the control | on a fact by Sunt State | Contract to the contract | Multiple Polices of the Section |
| | 10 a | Gross sales of inventory and allowances | , less returns | 5 | 高等的重要的 | | | |
| | | | | | | | | |
| | | Less: cost of goods sold | | b[| | | Testi es tetrici | west on a constant |
| ŀ | <u>c</u> | Net income or (loss) from Miscellaneous Revenu | | Ventory Business Code | | N. A. S. C. L. | | |
| ŀ | 11 a | | | Dasiness Code | 1 (150 to 150 to | | #4.122.54. (1) | న పర్శకుగ్నటుడ్నితో |
| Į | , rea | | | - | | | | · |
| İ | 2 | | | - | | | | |
| | 4 | All other revenue | | - | | | | |
| ļ | | Total. Add lines 11a-11d | l | | | الله والمنظمة المنظمة المنظمة والمنظمة والمنظمة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة والمنطقة | | |
| | | Total revenue. See instr | | • | 3,836,310. | 578,099. | 0. | 0. |
| | | I I I I I I I I I I I I I I I I I | 4011J | | 1 3,030,310. | 3,0,033. | | 0. |

Part IX Statement of Functional Expenses

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

| All other organizations must complete | te column (A) but are r | ot required to complete | columns (B), (C), and (D). |
|---------------------------------------|-------------------------|-------------------------|----------------------------|
| | | | |

| Do i | not include amounts reported on lines | (A) Total expenses | (B) Program service | (C) Management and | (D) Fundraising |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>60,</i> | 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, | | expenses | general expenses | expenses |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV. lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | Mary Take The Bearing | TOWN TO THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE |
| 5 | Compensation of current officers, directors, trustees, and key employees | 20,833. | 0. | 20,833. | 0. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees) | | | | |
| a | Management | | | | |
| t | Legal | | | | |
| c | : Accounting . | 20,906. | 0. | 20,906. | 0. |
| c | Lobbying . | | | | |
| e | Prof fundraising svcs. See Part IV, In 17. | | ·意识的生活。病一五 | されば、ないは、 | |
| | Investment management fees . | 31,735. | 0. | 31,735. | 0. |
| ç | Other . | 615,109. | 574,934. | 40,175. | 0. |
| 12 | Advertising and promotion | ,,, | | | |
| 13 | Office expenses | 325. | 0. | 325. | 0. |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | · | |
| 17 | Travel | 38,937. | 38,937. | 0. | 0. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 285. | 0. | 285. | 0. |
| 20 | Interest | | | | <u></u> |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 1,213. | 0. | 1,213. | 0. |
| 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.) | | | | |
| я | Reimbursed Salaries | 673,604. | 673,604. | 0. | 0. |
| | Contributions | 159,000. | 0. | 159,000. | 0. |
| | Other Costs | 332,980. | 332,512. | 468. | 0. |
| | Bank Charges | 3,516. | 0. | 3,516. | 0 |
| | Materials & Supplies | 39,273. | 39,273. | 0. | 0. |
| | All other expenses | 47,333. | 15,010. | 32,323. | 0. |
| | Total functional expenses Add lines 1 through 24f | 1,985,049. | 1,674,270. | 310,779. | 0. |
| | Joint costs. Check here SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |
| BAA | | | | | Form 990 (2009) |

Part X Balance Sheet

(B) End of year (A) Beginning of year Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments 1,768,879 1,756,135. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 442,126. 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 7 Notes and loans receivable, net 8 Inventories for sale or use . 8 9 9 Prepaid expenses and deferred charges 30,670 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 10 c **b** Less: accumulated depreciation. 11 11 Investments - publicly-traded securities 6,259,149 6,784,124. 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 15 Other assets. See Part IV, line 11 59,787 80,515. 8,087,815 16 9,093,570. 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 730,445 17 118,686. 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other Irabilities. Complete Part X of Schedule D 238,620 25 4,873. 26 Total liabilities. Add lines 17 through 25 969,065 26 123,559 N E T Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29 and lines 33 and 34. ASSETS 27 27 Unrestricted net assets 1,589,981 1,855,880. 28 Temporarily restricted net assets 5,528,769 28 7,114,131 29 Permanently restricted net assets 29 e R Organizations that do not follow SFAS 117, check here and complete FUZD lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 **B41420世の** Paid-in or capital surplus, or land, building, and equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances. 7,118,750. 33 8,970,011 34 Total liabilities and net assets/fund balances 8,087,815 34 9,093,570.

BAA

Form 990 (2009)

| Part XI Financial Statements and Reporting | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | Yes | No |
| 1 Accounting method used to prepare the Form 990: Cash X Accrual Other | 14.00 m | | |
| If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O | | 1000 | がき |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | Х |
| b Were the organization's financial statements audited by an independent accountant? | 2b | Х | |
| 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? | 2c | х | , |
| If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | ار مادر در اد مادر در اد مادر | | 12 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 7 1 6 |
| 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. | | | |
| X Separate basis Consolidated basis Both consolidated and separate basis | \$ | 1 2 3 Kg | |
| 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? | 3a | | х |
| 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 | lit 3b | | |
| | | | |

BAA

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Públic

Employer identification number

| | | 1ORE | | | | | | | | | | | | | | | | | | | | | | 21247 | | | | | |
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| Par | | Rea | son | for | Pul | <u>olic</u> | <u>Cha</u> | rity | <u>Stat</u> | us (| All | org | anız | zatı | ons | mu | st c | omp | olet | <u>te thi</u> | s par | t.) : | <u>See</u> | instru | ctions | 3 | | | |
| The c | rgai | | | | - | | | | | | | - | | | | _ | | | - | one (| | | | | | | | | |
| 1 | Ц | | | | | | | | | | | | | | | | ın s | ectio | n 1 | 70(b)(| 1)(A) (i |). | | | | | | | |
| 2 | Ц | A sch | ool c | descri | bed | ın se | ction | 170 | b)(1)(| (A)(ii | . (A | ttact | h Sc | hedi | ule E | Ξ) | | | | | | | | | | | | | |
| 3 | Ш | | • | | • | | | | | ~ | • | | | | | | | | ٠,, | 1)(A)(i | • | | | | | | | | |
| 4 | Ш | A me | dıcal | resea | arch | orga | nızat | tion o | perate | ed in | con | junc | tion | with | a h | ospita | al de | scrib | ed i | ın sec | ion 17 | '0(b) | (1)(A) | (iii). En | ter the | e hosp | otal's | 5 | |
| _ | $\overline{}$ | name | | | | | | | | -, | | | | | | | | | | | | | | | | | - | | _ |
| 5 | | 170(b | X 1)(| 4)(iv) | . (C | ompl | ete F | Part II | .) | | | _ | | | - | | | | | | _ | rnm | ental | unit des | scribed | i inse | ction | 1 | |
| 6 7 | X | | ganiz | zation | tha | t nor | mally | rece | ives a | sub: | stan | | | | | | | | | (b)(1) rnmer | | ıt or | from | the ger | neral p | ublic | desc | rıbed | |
| 8 | Ш | A cor | nmur | nity tr | ust c | lescr | ıbed | ın se | ction | 170(L |)(1) | (A)(\ | vi). (| Corr | plet | e Pa | t II.) | | | | | | | | | | | | |
| 9 | | from | actıvı Imen | ties r t inco | elate me | ed to and i | ıts e ınrel: | xemp ated t | t func ousine | tions ess ta | - s axab | subje ole in | ct to | cer e (le | rtaın | exce | ption | ns, a | nd (| (2) no | more | than | 33-1 | rship fe /3 % of ed by th | its sur | ppört 1 | from | gross | |
| 10 | | An or | ganız | ation | org | anıze | ed an | id ope | erated | excl | usiv | ely t | o tes | st fo | r pul | blic s | afety | /. Se | e se | ection | 509(a) | (4). | | | | | | | |
| 11 | | An or more descr | publ | icly si | oggu | rted | orga | anızat | ions (| descri | ıbed | l in s | section | on 5 | 09(a | a)(1) i | or se | ection | า 50 | 9(a)(2 | tions). See | of, o | r carr tion 5 | y out th 09(a)(3) | e purp). Che | oses ck the | of or e box | ne or k that | |
| | | а | Туре | :1 | • | | b | ΠŤτ | ype II | | | • | c 🗀 |] Tyl | pe II | l – F | unct | ional | ly ır | ntegra | ed | | | d 🗆 | Typ | e III– | - Oth | er | |
| е | | By ch | eckir ounc | ng this | bo: mai | k, I c nage | ertify rs an | that d oth | the or er tha | rganız ın one | zatio e or | on is | not | con | trolle | ed dir | ectly | or II | ndır | ectiv t | v one | or r ed II | nore o | disquali ion 509 | fied p | erson | s oth | ner | |
| f | | • | orga | | on r | eceiv | ed a | writte | en det | termi | natio | on fr | om t | the I | RS t | that is | s a T | уре | I, Ty | ype II | or Typ | e III | supp | orting o | rganız | ation, | | | J |
| g | | Since | Aug | ust 17 | , 20 | 06, ł | nas th | he org | anıza | ation . | acce | epter | d an | y gif | it or | cont | rıbut | ion fi | rom | any o | f the f | ollo | vina p | ersons | ? | | | | |
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| | | (i) | a per belov | son v | vho gov | direc ernir | tly or | r ındır ody of | ectly the s | contr uppo | ols, rted | eith | er al anıza | lone atıor | or to | ogeth | er w | ıth p | erso | ons de | scribe | d ın | (II) ar | nd (III) | 11 | l g (i) | | | - |
| | | (ii) | a fan | nıly m | emt | er o | of a p | ersor | n desc | cribed | ın t | (i) al | bove | ? | | | | | | | | | | | | g (ii) | | | - |
| | | (iii) | a 35 | % cor | itroll | ed e | ntity | of a p | ersor | des | cribe | ed in | (ı) ı | or (II | ı) ab | ove? | | | | | | | | | | g (iii) | \Box | | - |
| h | | Provid | le th | e folic | win | ginfo | ormat | tion a | bout t | he su | Japa | orted | lorg | anız | ation | ns. | | | | | | | | | | | | | - |
| | 0 | Name o Orga | of Sup nizatio | | | | (ii) | EIN | | | desc) abo | pe of ribed ve or l e insti | on lin | nes 1- ection | 9 | orga (i) | (iv) Is nization isted governi locum | n in c in you ning | ol It | he orga col | ou notiful nization (i) of upport? | in I o | ganizat | Is the tion in col zed in the S ? | 1 ' | i) Amour | nt of S | Support | - |
| | | | | | | | | | | | | | | | | Ye | s | No | | Yes | No | | Yes | No | | | | | |
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| | | | | | | ا المارة المارة | 7.7 | <u> </u> | - 4,5st - | 12.53 | | | " 25 , | | , | F 1 | + | ő., | <u> </u> | | 1- 318°E | . T 1 43 | -13. F | * " \$ > | - | | | | - |
| otal | | | | | 1 | | | ر ما مار مار شار المار br>مار المار | 1 | | ۾ ايوار رايا | | بالاد م مرابع | , 5, | 1000 | 5.1 | هر رخ رخمه وجوع | | | | ر من النو د / المور | | | | | | | |

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

| Sec | (Complete only if you checkettion A. Public Support | ed the box on line | 5, 7, or 8 of Part | 1.) | · · · · · · · · · · · · · · · · · · · | · | |
|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------|---------------------|---------------------------------------|--------------------|----------------------------------------------|
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') | 3,981,166. | 6,110,586. | 3,441,781. | 2,656,843. | 3,258,211. | 19,448,587. |
| 2 | Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge | | | | | | |
| 4 | Total. Add lines 1-through 3 | 3,981,166. | 6,110,586. | 3,441,781. | 2,656,843. | 3,258,211. | 19,448,587. |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 19,448,587. |
| Sec | tion B. Total Support | r | | г | ı | · | |
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 7 | Amounts from line 4 | 3,981,166. | 6,110,586. | 3,441,781. | 2,656,843. | 3,258,211. | 19,448,587. |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | 245,161. | 713,374. | 456,274. | 22,290. | 578,099. | 2,015, <u>198.</u> |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 21,463,785. |
| 12 | Gross receipts from related activ | ities, etc. (see ins | tructions) | | | . 12 | <u>. </u> |
| | First five years. If the Form 990 organization, check this box and | stop here | | d, third, fourth, o | r fifth tax year as | a section 501(c)(3 |) ▶ □ |
| | tion C. Computation of Pu | | | | | T III | |
| | Public support percentage for 20 Public support percentage from 2 | • | | e 11, column (f) | | 14 | 90.61 %_ 91.91 % |
| | 33-1/3 support test – 2009. If the and stop here. The organization | organization did | not check the box | on line 13, and | the line 14 is 33-1 | <u></u> | |
| t | 33-1/3 support test — 2008. If the and stop here. The organization | e organization did | not check a box o | on line 13, or 16a, | and line 15 is 33- | 1/3% or more, ch | _ |
| 17 a | 10%-facts-and-circumstances te or more, and if the organization is the organization meets the 'facts' | meets the 'facts-ai | nd-circumstances' | test, check this b | ox and stop here. | Explain in Part I\ | / how |
| b | 10%-facts-and-circumstances te or more, and if the organization in organization meets the 'facts-and | meets the 'facts-ai | nď-circumstances' | test, check this b | ox and stop here. | Explain in Part I\ | 15 is 10% / how the ► □ |
| 18 | Private foundation. If the organiz | zation did not ched | ck a box on line, 1 | 3, 16a, 16b, 17a, | | | |
| BAA | | | | | Sc | hedule A (Form 9 | 90 or 990-EZ) 2009 |

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes.' to Form 990.

OMB No 1545-0047

Open to Public Inspection 🖔

Employer Identification number

Department of the Treasury Name of the organization

Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

BALTIMORE CITY FOUNDATION, INC 52-1212473 Part 1 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 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. Held at the End of the Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2с d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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. 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. b 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: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X **►** S 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: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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|---------------------------------------------------------------------------|--------------------------|-----------------------------------------|----------------------|-------------|-----------------------------------------------------------------------------------------------------------------|------------|-------------------|------------------------|--------------------|------------|-----------------|
| 3 Using the organization's acquisition items (check all that apply): | on accession a | nd other reco | rds, check | k any | of the follo | owing that | are a s | significant u | se of its c | ollection | ١ . |
| a Public exhibition | | d | Loan (| or exc | hange pro | grams | | | | | |
| b Scholarly research | | е | Other | <u> </u> | | | | | | | |
| c Preservation for future genera | itions | | | | | | | | | | |
| 4 Provide a description of the organ Part XIV. | ization's collec | tions and exp | plain how | they t | further the | organızat | ion's ex | cempt purpo | se in | | |
| 5 During the year, did the organizati assets to be sold to raise funds ra | | | | | | | | | Yes | | No |
| Part IV Escrow and Custodial 9, or reported an amou | Arrangeme unt on Form | ents Comp 1990, Part | lete if o X, line | rgan 21. | ization a | answere | d 'Yes | s' to Form | 990, Pa | art IV, | line ——— |
| 1 a Is the organization an agent, trust included on Form 990, Part X? | ee, custodian, | or other inter | rmediary f | for cor | ntributions | or other a | assets r | not | X Yes | . [| No |
| b If 'Yes,' explain the arrangement in | n Part XIV and | d complete th | e followin | ig tabl | e: | | | | | | |
| | | | | | | | | | Amour | | |
| c Beginning balance | | | | | | | 1 c | | | <u>238</u> | <u>,620.</u> |
| d Additions during the year | | | | | | | 1 d | | | | 0. |
| Distributions during the year | | | | | | | 1 e | | | | <u>,747.</u> |
| f Ending balance | | | | | | | 1f | | | | <u>,873.</u> |
| 2a Did the organization include an ar | | 990, Part X, | line 21? | | | | | | Yes | · [| X No |
| b If 'Yes,' explain the arrangement i | | | | | = | | | 45.7 1 | | | |
| Part V Endowment Funds Cor | nplete if org | | | | | | | | | | |
| - | (a) Current y | ear (b |) Prior year | <u> </u> | (c) Two y | ears back | (d) | Three years bad | ck (e) | Four year | s back |
| 1 a Beginning of year balance | . <u></u> | | | | | | 5 | | | <u> </u> | 39-24 |
| b Contributions | | | | | م من المار من المار من المار من المار من المار من المار من المار من المار من المار من المار من المار من المار م | - 65,77 | | | (元) · 50 | | |
| c Net Investment earnings, gains, and losses | | | | | | | | | | | |
| d Grants or scholarships | | | | | م الم الم الم الم الم الم الم الم الم ال | | | 5 Mile 12 | | | |
| Other expenditures for facilities and programs | | - • | | | y Ken | | | | 至 | | |
| f Administrative expenses | | | | | | Transfer . | 1.00 | | A CONTRACT | - Jak Jak | A COMPANY OF |
| g End of year balance | | | | | " " " " " " " " " " " " " " " " " " " | | (* { i = 1 } | | ्री को स्व | | |
| 2 Provide the estimated percentage | of the year en | d balance he | ld as: | | | | | | | | |
| a Board designated or quasi-endowr | ment 🟲 | { | \$ | | | | | | | | |
| b Permanent endowment ► | % | | | | | | | | | | |
| c Term endowment ► | % | | | | | | | | | | |
| 3a Are there endowment funds not in organization by: | the possessio | n of the orga | nızatıon tl | hat are | e held and | administe | ered for | the | | Yes | No |
| (i) unrelated organizations | | | | | | | | | 3a(i) | | |
| (ii) related organizations | | | | | | | | | 3a(ii) | | |
| b If 'Yes' to 3a(II), are the related or | ganizations lis | ted as require | ed on Sch | nedule | R? | | | | 3b | | |
| 4 Describe in Part XIV the intended | • | • | | | | | | | <u> </u> | | |
| Part VI Investments-Land, Bu | | | | | | Part X, I | ine 10 |). | | | |
| Description of investment | | a) Cost or oth | er basis | (b) | Cost or ot | ther | (c) Acc | cumulated reciation | (d) | Book V | alue |
| 1 a Land | | - · · · · · · · · · · · · · · · · · · · | | | • | · . | | The state of the | ¹ _ | | |
| b Buildings | | | | | | | | | | | |
| c Leasehold improvements | | | | | | | | | | | |
| d Equipment | | | | | | | | • | | | |
| e Other | | | | | | | • | | | | |
| Total. Add lines 1a through 1e (Column | (d) must equa | I Form 990. F | Part X, coi | lumn i | (B), line 10 | O(c)) | • | | - | | |
| BAA | <u> </u> | · | | | | | | Sch | nedule D (l | Form 99 | 30) 2009 |

| Schedule D (Form 990) 2009 BALTIMORE CITY FOR Part VII. Investments—Other Securities See Form | UNDATION, INC. | 52-1212473 Page |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------------|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| Financial derivatives | | cost of one of your marries value |
| Closely-held equity interests | | |
| Other | | |
| | | |
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| | | |
| Total. (Column (b) must equal Form 990 Part X, col (B) line 12.) | | |
| Part VIII Investments-Program Related (See | Form 990, Part X, II | |
| (a) Description of investment type | (b) Book value | (c) Method of valuation |
| | | Cost or end-of-year market value |
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| Total. (Column (b) must equal Form 990, Part X, Col (B) line 13.) | | |
| Part IX Other Assets (See Form 990, Part X, | line 15) | |
| | scription | (b) Book value |
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| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B), lin | | > |
| Total. (Column (b) must equal Form 990, Part X, col (B), Irr. Part X Other Liabilities (See Form 990, Part | | P |
| | | |
| Part X: Other Liabilities (See Form 990, Part | X, line 25) | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | |
| Part X: Other Liabilities (See Form 990, Part (a) Description of Liability Federal Income Taxes | X, line 25) (b) Amount | 3. |

| Schedule D (Form 990) 2009 BALTIMORE CITY FOUNDATION, INC | | 52-12124 | 73 Page 4 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------------|------------------|
| Part XI Reconciliation of Change in Net Assets from Form 9 | 90 to Financial Stateme | nts | |
| 1 Total revenue (Form 990, Part VIII, column (A), line 12) | | | 3,836,310. |
| 2 Total expenses (Form 990, Part IX, column (A), line 25) | | | 1,985,049. |
| 3 Excess or (deficit) for the year. Subtract line 2 from line 1 | | | 1,851,261. |
| 4 Net unrealized gains (losses) on investments | | | |
| 5 Donated services and use of facilities | | | |
| 6 Investment expenses | | | |
| 7 Prior period adjustments . | | <u> </u> | |
| 8 Other (Describe in Part XIV) | | | |
| 9 Total adjustments (net). Add lines 4 through 8 | | | ····- |
| 10 Excess or (deficit) for the year per audited financial statements. Combine | lines 3 and 9 | | 1,851,261. |
| Part XII Reconciliation of Revenue per Audited Financial Sta | tements With Revenue | per Return | |
| 1 Total revenue, gains, and other support per audited financial statements | | 1 | 3,836,310. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. | | | |
| a Net unrealized gains on investments . | 2a | | |
| b Donated services and use of facilities | 2b | | |
| c Recoveries of prior year grants | 2c | | |
| d Other (Describe in Part XIV) | 2d | 45.45 | |
| e Add lines 2a through 2d | | 2 e | |
| 3 Subtract line 2e from line 1 | | . 3 | 3,836,310. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line1. | | 1300 | |
| a Investments expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b Other (Describe in Part XIV) | 4b | | |
| c Add lines 4a and 4b | | 4c | |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line | | 5 | 3,836,310. |
| Part XIII Reconciliation of Expenses per Audited Financial St | atements With Expense | s per Return | ·· · · - |
| 1 Total expenses and losses per audited financial statements | | 1 | 1,985,049. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | 1 1 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| a Donated services and use of facilities | 2a | | |
| b Prior year adjustments | 2b | 22 3 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| c Other losses | 2c | 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| d Other (Describe in Part XIV) | 2d | 2000 | |
| e Add lines 2a through 2d | | 2e | |
| 3 Subtract line 2e from line 1 | | 3 | 1,985,049. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line1: | | 37.32 | |
| a Investments expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b Other (Describe in Part XIV) | 4b | 1 Fig. 327 | |
| c Add lines 4a and 4b | | 4 c | |
| 5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line | e 18) | 5 | 1,985,049. |
| Part XIV Supplemental Information | | | |
| Complete this part to provide the descriptions required for Part II, lines 3, 5, and ine 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines and information. Pt_IV_Line_1bBaltimore_City_Foundation_acted | es 2d and 4b. Also complete th | his part to provide | e any additional |
| in the process of obtaining its | ' exempt status. | | |
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TEEA3304 02/02/10

Schedule **D** (Form 990) 2009

BAA

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public

Department of the Treasury

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

► Attach to Form 990.

| | Employer identification number |
|--------------------------------------------------------------------|--------------------------------|
| BALTIMORE CITY FOUNDATION, INC. | 52-1212473 |
| Pt XI, Line 2c The Foundation has an audit committee of the Bo | ard |
| Pt VI-B, Line 11A A copy of the Form 990 is presented at the Board | meeting |
| prior to mailing. | |
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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III. Line 4d (continued)

| | | ose achievements for each of the organization's other program and (4) organizations and 4947(a)(1) trusts are required to |
|-------------------|--------------|----------------------------------------------------------------------------------------------------------------------------|
| report the | | ts and allocations to others, the total expenses, and revenue, if any, for |
| Code ⁻ | Description: | Various projects and programs that improve the |
| Expenses | 716,118. | general welfare of the citizens and City of Baltimore. |
| Grants Of | 0. | |
| Revenue | 544,498. | |
| _ | | |
| | | |