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Form **990**Department of the Treasury  
Internal Revenue Service**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.

OMB No 1545-0047

**2011****Open to Public Inspection**

<b>A</b> For the 2011 calendar year, or tax year beginning <b>7/1/2011</b> , and ending <b>6/30/2012</b>	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>University of Maryland Baltimore Foundation, Inc.</b> <b>D</b> Employer identification number <b>31-1678679</b> <b>E</b> Telephone number <b>(410) 706-2949</b> <b>G</b> Gross receipts \$ <b>76,136,832</b> <b>F</b> Name and address of principal officer <b>Edward J. Brody 620 W Lexington Street, Baltimore, MD 21201-1508</b> <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: ▶ <b>www.umaryland.edu/umbf</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation <b>1999</b> <b>M</b> State of legal domicile <b>MD</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>The organization's mission is to solicit and receive contributions and grants from the general public and to hold, invest, and administer these funds and pay expenditures for the benefit of the University of Maryland in Baltimore and to serve in an advisory role to its president.</u>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	<b>32</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	<b>30</b>
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . . .	<b>5</b>	<b>0</b>
	<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	<b>117</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	<b>0</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	<b>31,062,425</b>	<b>33,925,793</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	<b>203,288</b>	<b>354,116</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	<b>4,938,105</b>	<b>7,332,305</b>
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	<b>281,808</b>	<b>263,327</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	<b>36,485,626</b>	<b>41,875,541</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	<b>14,449,175</b>	<b>15,138,531</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . .	<b>0</b>	<b>0</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11) . . . . .	<b>0</b>	<b>0</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>579,757</b>	<b>0</b>	<b>0</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	<b>6,834,112</b>	<b>7,240,498</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . .	<b>21,283,287</b>	<b>22,379,029</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .	<b>15,202,339</b>	<b>19,496,512</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) . . . . .	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	<b>181,555,559</b>	<b>197,588,137</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .	<b>3,470,605</b>	<b>4,111,449</b>
		<b>178,084,954</b>	<b>193,476,688</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>		Date <b>2/8/13</b>
	Signature of officer <b>Judith S. Blackburn</b>	Treasurer
	Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>TRAVIS L. PATTON</b>	Preparer's signature 	Date <b>01/30/13</b>	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶ <b>TRAVIS L. PATTON P0036923</b>	Firm's EIN ▶			
	Firm's address ▶ <b>PRICewaterhouseCOOPERS LLP 13-4008324</b> <b>1301 K STREET, N.W., WASHINGTON, DC 20005-3333</b>	Phone no <b>202-414-1000</b>			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

(HTA)

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**Part III****Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III. ☒ **X****1** Briefly describe the organization's mission:

The primary mission of the University of Maryland Baltimore Foundation, Inc. is to solicit and receive contributions, gifts, and grants from the general public and to hold, invest, and administer these funds and pay expenditures for the benefit of the University of Maryland in Baltimore

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 2,074,700 including grants of \$ 1,110,640 ) (Revenue \$ 88,803 )

The UMB Foundation manages and invests private gifts and/or property for the benefit of the University of Maryland in Baltimore (UMB), facilitates fundraising programs and contributions from private sources, and engages in other activities to further educational, research and service missions of UMB. UMB is Maryland's public academic health and law university devoted to professional and graduate education, research, patient care, and public service. UMB includes the schools of Medicine, Law, Pharmacy, Dentistry, Nursing, Public Health, and Social Work, the Health Sciences & Human Services Library, and the National Museum of Dentistry. Using state-of-the-art technological support, UMB educates leaders in health care delivery, biomedical sciences, social services, and law. By conducting internationally recognized collaborative research to cure disease and to improve the health, social functioning, and treatment of the people it serves, the University fosters economic development in the city, state and region. UMB is a major employer in Baltimore, generating (continued on schedule O)

**4b** (Code: ) (Expenses \$ 11,393,057 including grants of \$ 9,273,343 ) (Revenue \$ 155,695 )

The UMB Foundation supports academic programs, clinical activities and research in the UMB School of Medicine (SOM). Established in 1807, SOM is the first public and fifth oldest medical school in the U.S., and the first to institute a residency training program. In 2012, the SOM graduated 147 new medical doctors who joined the ranks of more than 7,500 living alumni. A significant number, 49 percent have chosen to continue their training in primary care fields. This past year, the SOM admitted one of the strongest academic classes in its history. More than half of the practicing physicians in Maryland receive their training at the SOM or its clinical partner, the University of Maryland Medical Center. The School's continuing education programs serve more than 5,000 physicians and other health professionals annually. The SOM is committed to the education and training of MD, PhD, Graduate, Physical Therapy, and Rehabilitation Science and Medical Research Technology students

**4c** (Code: ) (Expenses \$ 2,728,626 including grants of \$ 1,927,507 ) (Revenue \$ 55,376 )

The UMB Foundation supports academic programs and clinical and research activities in the University of Maryland Francis King Carey School of Law (Carey SOL). Established in 1816, the Carey SOL began regular instruction in 1824. It is the third oldest law school in the nation, but its innovative programs make it one of the liveliest and most dynamic today. The Carey SOL's experimental programs are among the most extensive in the country, including the nationally recognized clinical law program. Interdisciplinary specialty programs are offered in Environmental Law and Law and Health Care. Other programs include Advocacy, Alternative Dispute Resolution, Business Law, Clinical Law, Intellectual Property Law and International and Comparative Law. The Carey SOL seeks to promote a more just society by educating outstanding lawyers by advancing the understanding of law and legal institutions and by enhancing access to justice. A cross-cultural component will expand the law school's clinical program to disadvantaged communities across the country and the globe. (continued on schedule O)

**4d** Other program services (Describe in Schedule O.)

(Expenses \$ 4,130,518 including grants of \$ 2,827,041 ) (Revenue \$ 54,242 )

**4e** Total program service expenses ► 20,326,901

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	<b>2</b> X	
<b>3</b> 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 . . . . .	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>4</b>	X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . . .	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 . . . . .	<b>6</b>	X
<b>7</b> 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 . . . . .	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<b>8</b>	X
<b>9</b> 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 . . . . .	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	<b>10</b> X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. . . . .	<b>11a</b>	X
<b>b</b> 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. . . . .	<b>11b</b> X	
<b>c</b> 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. . . . .	<b>11c</b>	X
<b>d</b> 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. . . . .	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. . . . .	<b>11e</b> X	
<b>f</b> 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 (ASC 740)? If "Yes," complete Schedule D, Part X. . . . .	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . . . . .	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b> X	
<b>15</b> 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, Parts II and IV . . . . .	<b>15</b>	X
<b>16</b> 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, Parts III and IV . . . . .	<b>16</b>	X
<b>17</b> 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 (see instructions) . . . . .	<b>17</b>	X
<b>18</b> 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 . . . . .	<b>18</b> X	
<b>19</b> 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 . . . . .	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	

**Part IV Checklist of Required Schedules (continued)**

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

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	152		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X	
<b>2a</b> 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.	0		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			
<b>4a</b> 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)?			X
<b>b</b> If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			X
<b>6a</b> 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?			X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> 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?		X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year.			
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the organization make any taxable distributions under section 4966?			
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?			
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12.			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.			
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders.			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?			
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O			
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			
<b>c</b> Enter the amount of reserves on hand.			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?			X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b> 32		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b> 30		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	<b>2</b>		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		X
<b>6</b> Did the organization have members or stockholders? . . . . .	<b>6</b>		X
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	<b>7a</b>		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	<b>7b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body? . . . . .	<b>8a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	<b>9</b>		X

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

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **►** AR, AZ, CA, FL, KY, MD, MI, NH, NJ, NY, OH, OR, S

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☒ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **►** Judith S. Blackburn (410) 706-2949  
 620 W. Lexington Street, 2nd Floor, Baltimore, MD 21201-1508

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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, if any. See instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Janet S. Owens Trustee, Chair	10.00	X		X				0	0	0
(2) Edward J. Brody Trustee, Vice Chair	5.00	X		X				0	0	0
(3) James A. Earl Trustee, Secretary	2.00	X		X				0	0	0
(4) Don-N. Brotman Trustee	1.00	X						0	0	0
(5) Harold E. Chappellear Trustee	1.00	X						0	0	0
(6) Charles W. Cole Jr. Trustee	3.00	X						0	0	0
(7) James D'Orta Trustee	1.00	X						0	0	0
(8) Morton P. Fisher, Jr. Trustee	2.00	X						0	0	0
(9) Brian J. Gibbons Trustee	1.00	X						0	0	0
(10) Peter S. Greenleaf Trustee	1.00	X						0	0	0
(11) Joseph R. Hardiman Trustee	3.00	X						0	0	0
(12) David H. Hillman Trustee	1.00	X						0	0	0
(13) Sandra S. Hillman Trustee	1.00	X						0	0	0
(14) Richard J. Himelfarb Trustee	1.00	X						0	0	0



**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Wallace J. Hoff Trustee	1.00	X						0	0	0
(16) Kempton M. Ingersol Trustee	3.00	X						0	0	0
(17) Donald M. Kirson Trustee	1.00	X						0	0	0
(18) Harry C. Knipp Trustee	1.00	X						0	0	0
(19) Kyle P. Legg Trustee	2.00	X						0	0	0
(20) Thomas P. O'Neill Trustee	3.00	X						0	0	0
(21) Theo C. Rodgers Trustee	1.00	X						0	0	0
(22) Donald E. Roland Trustee	1.00	X						0	0	0
(23) Devy Patterson Russell Trustee	1.00	X						0	0	0
(24) Alan S. Silverstone Trustee	1.00	X						0	0	0
(25) Frederick G. Smith Trustee	1.00	X						0	0	0
<b>1b Sub-total</b>								0	0	0
<b>c Total from continuation sheets to Part VII, Section A</b>								0	0	0
<b>d Total (add lines 1b and 1c)</b>								0	0	0

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	X	

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Hilton Baltimore Convention	401 West Pratt Street, Baltimore, MD 21201	Program Event Service
Community Counselling Se	P O Box 27462, New York, NY 10087	Consulting/fundraising
Bon Appetit	P O Box 417632, Boston, MA 02241	Program event services
Susie Flaherty	280 Walden Street, #2, Cambridge, MA 0213	Communication & marketing
		0
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	<b>4</b>	

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b> 82,414				
	<b>b</b> Membership dues . . . . .	<b>1b</b> 0				
	<b>c</b> Fundraising events . . . . .	<b>1c</b> 473,601				
	<b>d</b> Related organizations . . . . .	<b>1d</b> 0				
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b> 0				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b> 33,369,778				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ . . . . .	1,740,467				
	<b>h Total.</b> Add lines 1a-1f . . . . .		33,925,793			
<b>Program Service Revenue</b>	<b>Business Code</b>					
	<b>2a</b> Conferences/educational programs . . . . .	611710	294,632	294,632		
	<b>b</b> Contracts & publications . . . . .	611710	38,389	38,389		
	<b>c</b> Alumni, faculty, and staff functions . . . . .	900099	20,601	20,601		
	<b>d</b> Memberships . . . . .	900099	494	494		
	<b>e</b> . . . . .		0			
	<b>f</b> All other program service revenue . . . . .		0			
	<b>g Total.</b> Add lines 2a-2f . . . . .		354,116			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		2,117,022			2,117,022
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .		0			0
	<b>5</b> Royalties . . . . .		14,130			14,130
		(i) Real (ii) Personal				
	<b>6a</b> Gross rents . . . . .					
	<b>b</b> Less: rental expenses . . . . .					
	<b>c</b> Rental income or (loss) . . . . .	0 0				
	<b>d</b> Net rental income or (loss) . . . . .		0			0
	<b>7a</b> Gross amount from sales of assets other than inventory . . . . .	(i) Securities (ii) Other				
		39,322,077 0				
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	34,106,794 0				
	<b>c</b> Gain or (loss) . . . . .	5,215,283 0				
	<b>d</b> Net gain or (loss) . . . . .		5,215,283			5,215,283
	<b>8a</b> Gross income from fundraising events (not including \$ 473,601 of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b> 403,694				
	<b>b</b> Less: direct expenses . . . . .	<b>b</b> 154,497				
	<b>c</b> Net income or (loss) from fundraising events . . . . .		249,197			249,197
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b> 0				
	<b>b</b> Less: direct expenses . . . . .	<b>b</b> 0				
	<b>c</b> Net income or (loss) from gaming activities . . . . .		0			
	<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b> 0				
<b>b</b> Less: cost of goods sold . . . . .	<b>b</b> 0					
<b>c</b> Net income or (loss) from sales of inventory . . . . .		0				
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11a</b> . . . . .		0				
<b>b</b> . . . . .		0				
<b>c</b> . . . . .		0				
<b>d</b> All other revenue . . . . .		0				
<b>e Total.</b> Add lines 11a-11d . . . . .		0				
<b>12 Total revenue.</b> See instructions . . . . .		41,875,541	354,116	0	7,595,632	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX. ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	14,922,713	14,922,713		
<b>2</b>	Grants and other assistance to individuals in the United States. See Part IV, line 22	215,818	215,818		
<b>3</b>	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
<b>4</b>	Benefits paid to or for members	0			
<b>5</b>	Compensation of current officers, directors, trustees, and key employees	0			
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
<b>7</b>	Other salaries and wages	0			
<b>8</b>	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
<b>9</b>	Other employee benefits	0			
<b>10</b>	Payroll taxes	0			
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management	2,251,067	1,025,943	964,040	261,084
<b>b</b>	Legal	1,908	1,715	173	20
<b>c</b>	Accounting	100,186	0	100,186	0
<b>d</b>	Lobbying	0			
<b>e</b>	Professional fundraising services. See Part IV, line 17	0			0
<b>f</b>	Investment management fees	1,484,445	1,186,270	298,175	0
<b>g</b>	Other	0	0	0	0
<b>12</b>	Advertising and promotion	145,611	114,849	44	30,718
<b>13</b>	Office expenses	122,500	112,821	6,194	3,485
<b>14</b>	Information technology	163,086	125,747	27,169	10,170
<b>15</b>	Royalties	0			
<b>16</b>	Occupancy	19,173	18,713	460	0
<b>17</b>	Travel	341,274	335,414	292	5,568
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
<b>19</b>	Conferences, conventions, and meetings	2,040,070	1,879,519	12,832	147,719
<b>20</b>	Interest	0			
<b>21</b>	Payments to affiliates	37,842	0	37,184	658
<b>22</b>	Depreciation, depletion, and amortization	0	0	0	0
<b>23</b>	Insurance	30,434	4,856	23,316	2,262
<b>24</b>	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b>	Printing & publications	157,538	145,915	2,240	9,383
<b>b</b>	Equipment purchase, rental & repairs	122,592	122,592	0	0
<b>c</b>	N/A	0			
<b>d</b>	N/A	0			
<b>e</b>	All other expenses Miscellaneous	222,772	114,016	66	108,690
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24e.	22,379,029	20,326,901	1,472,371	579,757
<b>26</b>	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest-bearing . . . . .		1	
	2 Savings and temporary cash investments . . . . .		2	
	3 Pledges and grants receivable, net . . . . .	22,454,757	3	23,998,378
	4 Accounts receivable, net . . . . .	0	4	0
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . .	0	6	0
	7 Notes and loans receivable, net . . . . .	0	7	0
	8 Inventories for sale or use . . . . .		8	
	9 Prepaid expenses and deferred charges . . . . .		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a 0		
	b Less: accumulated depreciation . . . . .	10b 0	10c 0	
	11 Investments—publicly traded securities . . . . .	14,510,159	11	8,372,619
	12 Investments—other securities. See Part IV, line 11 . . . . .	142,422,674	12	161,364,697
	13 Investments—program-related. See Part IV, line 11 . . . . .	0	13	0
	14 Intangible assets . . . . .	0	14	0
	15 Other assets. See Part IV, line 11 . . . . .	2,167,969	15	3,852,443
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	181,555,559	16	197,588,137	
<b>Liabilities</b>	17 Accounts payable and accrued expenses . . . . .	2,520,097	17	3,108,741
	18 Grants payable . . . . .		18	
	19 Deferred revenue . . . . .		19	
	20 Tax-exempt bond liabilities . . . . .		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22	
	23 Secured mortgages and notes payable to unrelated third parties . . . . .	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties . . . . .	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .	950,508	25	1,002,708
	26 <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	3,470,605	26	4,111,449
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets . . . . .	16,475,392	27	19,113,761
	28 Temporarily restricted net assets . . . . .	58,568,145	28	61,143,494
	29 Permanently restricted net assets . . . . .	103,041,417	29	113,219,433
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds . . . . .		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
	33 <b>Total net assets or fund balances</b> . . . . .	178,084,954	33	193,476,688
34 <b>Total liabilities and net assets/fund balances</b> . . . . .	181,555,559	34	197,588,137	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	41,875,541
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	22,379,029
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1 . . . . .	<b>3</b>	19,496,512
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	178,084,954
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>5</b>	-4,104,778
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	<b>6</b>	193,476,688

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		X
<b>2b</b> Were the organization's financial statements audited by an independent accountant? . . . . .	X	
<b>2c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . . If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b> 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? . . . . .		X
<b>b</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.		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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

**2011**

**Open to Public  
Inspection**

Name of the organization

University of Maryland Baltimore Foundation, Inc.

Employer identification number

31-1678679

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III—Functionally integrated      d ☐ Type III—Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box. ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .
- (ii) A family member of a person described in (i) above? . . . . .
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									0
(B)									0
(C)									0
(D)									0
(E)									0
Total									0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  
(HTA)

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	38,877,650	23,452,138	19,288,903	31,062,425	33,925,793	146,606,909
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	0	0	0	0	0	0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	0	0	0	0		0
<b>4 Total.</b> Add lines 1 through 3 . . . . .	38,877,650	23,452,138	19,288,903	31,062,425	33,925,793	146,606,909
<b>5</b> 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) . . . . .						3,219,051
<b>6 Public support.</b> Subtract line 5 from line 4. . . . .						143,387,858

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4 . . . . .	38,877,650	23,452,138	19,288,903	31,062,425	33,925,793	146,606,909
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	1,954,890	1,498,024	1,772,078	1,939,036	2,131,152	9,295,180
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	0	0	0	0	0	0
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	37,072	-9,959	117,583	281,039	249,197	674,932
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						156,577,021
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	1,385,768
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	91.58%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 . . . . .	<b>15</b>	89.66%
<b>16a 33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test—2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . . . . ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						0
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513.						0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge.						0
<b>6</b> <b>Total.</b> Add lines 1 through 5	0	0	0	0	0	0
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						0
<b>c</b> Add lines 7a and 7b	0	0	0	0	0	0
<b>8</b> <b>Public support</b> (Subtract line 7c from line 6).						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6	0	0	0	0	0	0
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
<b>c</b> Add lines 10a and 10b	0	0	0	0	0	0
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
<b>14</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	0.00%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	<b>16</b>	0.00%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	0.00%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	<b>18</b>	0.00%

**19a 33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐

**b 33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐

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



**Part IV**

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

- ▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

University of Maryland Baltimore Foundation, Inc.

Employer identification number

31-1678679

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . . ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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 . . . . . ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$

b Assets included in Form 990, Part X . . . . . ▶ \$

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition      d ☐ Loan or exchange programs  
 b ☐ Scholarly research      e ☐ Other \_\_\_\_\_  
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f 0

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	123,684,056	95,545,584	82,012,328	101,603,860	
b Contributions	10,162,565	16,198,518	6,126,908	7,335,523	
c Net investment earnings, gains, and losses	918,532	14,592,880	9,541,675	-22,784,909	
d Grants or scholarships	2,514,541	1,445,322	1,141,016	2,243,055	
e Other expenditures for facilities and programs	416,075	52,254	196,392	213,697	
f Administrative expenses	1,663,121	1,155,350	797,919	1,685,394	
g End of year balance	130,171,416	123,684,056	95,545,584	82,012,328	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 3%  
 b Permanent endowment 97%  
 c Temporarily restricted endowment %  
 The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	0	0	0
d Equipment	0	0	0	0
e Other	0	0	0	0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 0

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1) Financial derivatives . . . . .	0	
(2) Closely-held equity interests . . . . .	0	
(3) Other USMF Investments	158,531,363	F
(A) Yi, Yu Lerma - Debenture: Xcision Endowm	1,333,334	F
(B) McKenzie Meadows Inc. S-Corp stock	1,500,000	F
(C) . . . . .	0	
(D) . . . . .	0	
(E) . . . . .	0	
(F) . . . . .	0	
(G) . . . . .	0	
(H) . . . . .	0	
(I) . . . . .	0	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	161,364,697	

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	0	
(2)	0	
(3)	0	
(4)	0	
(5)	0	
(6)	0	
(7)	0	
(8)	0	
(9)	0	
(10)	0	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0	

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	0
(2)	0
(3)	0
(4)	0
(5)	0
(6)	0
(7)	0
(8)	0
(9)	0
(10)	0
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	0

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Payable under split-interest agreements	1,002,708
(3)	0
(4)	0
(5)	0
(6)	0
(7)	0
(8)	0
(9)	0
(10)	0
(11)	0
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,002,708

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	41,875,541
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	22,379,029
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	19,496,512
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	-4,104,778
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	
<b>9</b>	Total adjustments (net) Add lines 4 through 8	<b>9</b>	-4,104,778
<b>10</b>	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<b>10</b>	15,391,734

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	36,623,053
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	-4,104,778
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV.)	<b>2d</b>	
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	-4,104,778
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	40,727,831
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	1,147,709
<b>b</b>	Other (Describe in Part XIV.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	1,147,709
<b>5</b>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<b>5</b>	41,875,540

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	21,231,319
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV.)	<b>2d</b>	
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	0
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	21,231,319
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	1,147,709
<b>b</b>	Other (Describe in Part XIV.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	1,147,709
<b>5</b>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<b>5</b>	22,379,028

**Part XIV Supplemental Information**

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

Part V Line 4 Endowment accounts are established and funded by donors in support of

programs at the University of Maryland in Baltimore. These endowments are predominantly

permanent endowments and they have various purposes including scholarships,

professorships, lectureships, chairs, capital expenditures, and research activities

Part X Line 2 The Foundation is organized and operated exclusively for charitable and

educational purposes within the meaning of the provisions of section 501(c)(3) of the

Internal Revenue Code. Since the Foundation had no material unrelated business income for

the years ended June 30, 2012 and 2011, no provision for income taxes has been made. The

**Part XIV Supplemental Information** (continued)

FASB issued guidance on accounting for uncertainty in income taxes clarifies the accounting for uncertainty of income tax positions. (continued below)

Part X Line 2 (continued) This guidance defines the threshold for recognizing tax return positions in the financial statements as "more likely than not" that the position is sustainable, based on its technical merits. This guidance also provides guidance on the measurement, classification and disclosure of tax return positions in the financial statements. No asset or liability has been recorded as of June 30, 2012 and 2011 for uncertain tax positions. The Foundation is no longer subject to (continued below)

Part X Line 2 (continued) U.S. federal or state examinations by tax authorities for years before fiscal year ended June 30, 2007

**Schedule F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

University of Maryland Baltimore Foundation, Inc

Employer identification number

31-1678679

**Part I**

**General Information on Activities Outside the United States.** Complete if the organization answered  
"Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Sub-Saharan Africa					
(1)	0	0	Program services	University support	98,461
Central America and the Caribbean					
(2)	0	0	Program services	University support	3,438
East Asia and the Pacific					
(3)	0	0	Program services	University support	102,882
(4)	0	0			0
(5)	0	0			0
(6)	0	0			0
(7)	0	0			0
(8)	0	0			0
(9)	0	0			0
(10)	0	0			0
(11)	0	0			0
(12)	0	0			0
(13)	0	0			0
(14)	0	0			0
(15)	0	0			0
(16)	0	0			0
(17)	0	0			0
<b>3a Sub-total</b>	0	0			204,781
<b>b Total from continuation sheets to Part I.</b>	0	0			0
<b>c Totals (add lines 3a and 3b)</b>	0	0			204,781

**Part II**

**Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐ **Part II** can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)					0		0		
(2)					0		0		
(3)					0		0		
(4)					0		0		
(5)					0		0		
(6)					0		0		
(7)					0		0		
(8)					0		0		
(9)					0		0		
(10)					0		0		
(11)					0		0		
(12)					0		0		
(13)					0		0		
(14)					0		0		
(15)					0		0		
(16)					0		0		

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **0**
- 3 Enter total number of other organizations or entities **0**



**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)		0	0		0		
(2)		0	0		0		
(3)		0	0		0		
(4)		0	0		0		
(5)		0	0		0		
(6)		0	0		0		
(7)		0	0		0		
(8)		0	0		0		
(9)		0	0		0		
(10)		0	0		0		
(11)		0	0		0		
(12)		0	0		0		
(13)		0	0		0		
(14)		0	0		0		
(15)		0	0		0		
(16)		0	0		0		
(17)		0	0		0		
(18)		0	0		0		

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) . . . . . ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) . . . . . ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) . . . . . ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) . . . . . ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) . . . . . ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) . . . . . ☐ Yes ☒ No

**Part V** **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I Line 2 The organization establishes separate accounts to house grant funds donated  
pursuant to a grant agreement to provide support for a particular program. The grant  
agreement is reviewed and signed by the organization's Treasurer. The expenditures from  
the grant fund are then monitored to ensure that monies are spent in accordance with the  
budget included in the grant agreement. Periodic grant progress reports and financial  
reports are prepared under the direction of the Principal Investigator.  
Part I Line 2 (continued) These reports are then reviewed and signed by the Treasurer.  
Subject to the language in the grant agreement, remaining funds are returned to the  
granting organization. In addition, we maintain the Federal Employer Identification number  
and the Internal Revenue Code section under which the tax-exempt status was granted for  
each grantor.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the  
organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

University of Maryland Baltimore Foundation, Inc.

Employer identification number

31-1678679

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.  
Form 990-EZ filers are not required to complete this part

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |  |   |
|--|---|
| <b>a</b> <input type="checkbox"/> Mail solicitations               | <b>e</b> <input type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input type="checkbox"/> Internet and email solicitations | <b>f</b> <input type="checkbox"/> Solicitation of government grants     |
| <b>c</b> <input type="checkbox"/> Phone solicitations              | <b>g</b> <input type="checkbox"/> Special fundraising events            |
| <b>d</b> <input type="checkbox"/> In-person solicitations          |   |

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1				0	0	0
2				0	0	0
3				0	0	0
4				0	0	0
5				0	0	0
6				0	0	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
<b>Total</b>				0	0	0

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 CICL Fundraisers (event type)	(b) Event #2 Fund for Medicine (event type)	(c) Other events 10 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts . . . . .	190,048	302,562	384,685	877,295
	2 Less: Charitable contributions . . . . .	102,596	163,336	207,669	473,601
	3 Gross income (line 1 minus line 2) . . . . .	87,452	139,226	177,016	403,694
Direct Expenses	4 Cash prizes . . . . .	0	0	0	0
	5 Noncash prizes . . . . .	0	0	0	0
	6 Rent/facility costs . . . . .	0	0	0	0
	7 Food and beverages . . . . .	0	0	0	0
	8 Entertainment . . . . .	0	0	0	0
	9 Other direct expenses . . . . .	66,883	0	87,614	154,497
	10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 154,497 )
	11 Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶				249,197

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue . . . . .				0
	2 Cash prizes . . . . .				0
Direct Expenses	3 Noncash prizes . . . . .				0
	4 Rent/facility costs . . . . .				0
	5 Other direct expenses . . . . .				0
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( 0 )
	8 Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶				0

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_

- |           |   |                              |                             |
|-----------|---|------------------------------|-----------------------------|
| <b>11</b> | Does the organization operate gaming activities with nonmembers? . . . . .  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>12</b> | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>13</b> | Indicate the percentage of gaming activity operated in:   |                              |                             |
| <b>a</b>  | The organization's facility . . . . .   | <b>13a</b>                   | %                           |
| <b>b</b>  | An outside facility . . . . .   | <b>13b</b>                   | %                           |
| <b>14</b> | Enter the name and address of the person who prepares the organization's gaming/special events books and records.   |                              |                             |

Name ► \_\_\_\_\_

Address ►

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ 0 and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_ 0
- c** If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ►

- 16** Gaming manager information:

Name 

**Gaming manager compensation** ▶ \$ 0

Description of services provided ▶ \_\_\_\_\_

☐ Director/officer      ☐ Employee      ☐ Independent contractor

- 17 Mandatory distributions:**
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

University of Maryland Baltimore Foundation, Inc.

Employer identification number

31-1678679

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ☐

Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) University of Maryland, Baltimore Lombard & Greene Sts Baltimore, MD	52-6002033	115	12,721,282	0			Education/Research
(2) University of Maryland Emergent 110 S. Poca Street, 6th Floor Baltimore, MD	52-1403415	501c3	1,845,625	0			Clinical support
(3) University of Maryland Surgical 11 S. Poca St., 3rd Floor Baltimore, MD	52-1557551	501c3	336,418	0			Clinical support
(4) Shock Trauma Associates, PA 11 S. Poca Street, Suite 500 Baltimore, MD	52-1119350	501c3	221,060	0			Clinical support
(5) Brigham and Women's Hospital 116 Huntington Avenue, 5th Floor Boston, MA	04-2312909	501c3	197,668	0			Transfer/Research Support
(6) University of Maryland Pediatric 737 W. Lombard Street, Room 333 Baltimore, MD	52-1182593	501c3	144,834	0			Clinical support
(7) James Lawrence Kernan Hospital 2200 Kernan Drive Baltimore, MD	52-0591639	501c3	106,060	0			Clinical support
(8) University of Maryland Medical 110 S. Poca Street Baltimore, MD	52-1362793	501c3	104,622	0			Program support
(9) Maryland Public Interest Law Project 500 W. Baltimore Street Baltimore, MD	52-1620485	501c3	52,000	0			Clinical support
(10) University of Maryland OB-GYN 250 W. Pratt Street, Suite 880 Baltimore, MD	52-0913438	501c3	50,799	0			Clinical support
(11) University of Maryland Family Medicine 29 S. Poca Street Baltimore, MD	52-1274266	501c3	43,069	0			Clinical support
(12) University of Maryland Neurology 11 S. Poca Street, Suite 400 Baltimore, MD	52-1138284	501c3	26,899	0			Clinical support
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table			30				
<b>3</b> Enter total number of other organizations listed in the line 1 table			0				

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(HTA)

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Program assistance to indigent area residents	0	22,516	0		
2 School of Dentistry scholarships and awards	0	33,792	0		
3 School of Law scholarships and awards	0	44,794	0		
4 School of Medicine scholarships and awards	0	33,666	0		
5 School of Nursing scholarships and awards	0	80,550	0		
6 School of Pharmacy scholarships and awards	0	400	0		
7 School of Social Work scholarships and awards	0	100	0		

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part I Line 2 The organization establishes separate accounts to house grant funds donated pursuant to a grant agreement to provide support for a particular program. The grant agreement is reviewed and signed by the organization's Treasurer. The expenditures from the grant fund are then monitored to confirm that monies are spent in accordance with the budget included in the grant agreement. Periodic grant progress reports and financial reports are prepared under the direction of the (continued below)

Part I Line 2 (continued) Principal Investigator and then reviewed and signed by the Treasurer. Subject to the language in the grant agreement remaining funds are returned to the granting organization. In addition, we record the federal employer identification number and Internal Revenue code section under which the tax-exempt status was granted for each grantee.

Part II Line 1 The following explanations provide details of grants made to organizations outside of the University: (5) Bingham and Women's Hospital; Transfer of private support to the Bingham and Women's Hospital to continue Dr. Mehra's work in the Department of Medicine in Advanced Heart Failure and Transplant Cardiology at his new institution; (9) Maryland Public Interest Law Project, Inc. (MPILP); Grants to University of Maryland Francis King Carey School of Law students for a variety of (continued below)



**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	0	0	0		
2	0	0	0		
3	0	0	0		
4	0	0	0		
5	0	0	0		
6	0	0	0		
7	0	0	0		

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

Part II Line 1 (continued) public service initiatives. (14) The Albert Schweitzer fellowship: Fellow awards for UMB Medical students that meet the criteria for the Albert Schweitzer fellowships. (15) Practice Greenhealth: Strauss Foundation grant to the Nursing School's Hospitals for a Healthy Environment initiative in support of a subcontract with PG to fund a portion of the salary of the technical director at Maryland Hospitals for a healthy Environment as called for in the grant budget. (continued below)

Part II Line 1 (continued) (19) Planned Parenthood of Maryland: Providing grant sub contract services for the Center for Reproductive Health Education in Family Medicine-Abortion Training Program. (21) Regents of the University of California: Annie E. Casey Foundation funded a grant for "Informing Social Work about the Common Elements Approach to Evidence-Based Practice: Building capacity for Social Work Education and Research Work". These payments support salary and expenses pursuant to a (continued below)

Part II Line 1 (Continued) sub contract included in the grant budget. (22) International Social Service USA: Law School sponsorship of a conference at Georgetown University entitled "Kids in Between". Exploring a Unified Strategy for Child Protection in America. (25)

North Shore University Hospital Zanyl and Isabel Krieger Foundation grant subcontract for a School of Social Work program entitled

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	0	0	0		
2	0	0	0		
3	0	0	0		
4	0	0	0		
5	0	0	0		
6	0	0	0		
7	0	0	0		

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

"Structural Psychotherapy for Adolescents Responding to Chronic Stress" (continued below)

Part II Line 1 (continued) (28) American Heart Association; Sponsorship of the American Heart Association Annual Ball attended by

School of Medicine and University of Maryland Medical Center Leadership; (29) NASW Foundation; Sponsorship of the National

Association of Social Workers annual conference entitled "Restoring Hope: The Power of Social Work" (Continued below)

Part II Line 1 (30) University of Denver School of Law's membership in a University of Denver consortium dedicated to facilitating and assessing innovation in legal education entitled "Educating Tomorrow's Lawyers"

# Continuation Sheet for Schedule I (Form 990)

Page 1 of 2

Name of the organization

University of Maryland Baltimore Foundation, Inc

Employer identification number

31-1678679

## Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(13) Community Law in Action, Inc. (CLIA) 520 W Fayette Street Baltimore, MD 212	06-1710518	501c3	26,000	0			Education-Law
(14) The Albert Schweitzer Fellowship 330 Brookline Avenue Boston, MA 02215	13-1982786	501c3	25,848	0			Fellowship
(15) Practice Greenhealth 12355 Sunrise Valley Drive, Suite 680 Reston, VA 20191	76-0815736	501c3	22,414	0			Research-Nursing
(16) University of Maryland Physicians, P 419 W. Redwood Street, Suite 660 Baltimore, MD 21201	52-1103228	501c3	19,100	0			Clinical support
(17) U M FDSP Associates, PA 522 W Lombard Street Baltimore, MD 21201	52-1456103	501c3	15,200	0			Clinical support
(18) Medical Alumni Association of the U 522 W Lombard Street Baltimore, MD 21201	52-0615433	501c3	13,500	0			Education/Research
(19) Planned Parenthood of Maryland, In 330 North Howard Street Baltimore, MD 21201	52-0607930	501c3	12,480	0			Program support
(20) University of Maryland Orthopaedic 22 S Greene Street, Suite S11B Baltimore, MD 21201	52-2122145	501c3	11,264	0			Clinical support
(21) Regents of the University of Californ 10920 Wilshire Blvd Suite 620 Payroll Mgmt, Los Angeles, CA 90024	95-6006143	501c3	10,061	0			Clinical support
(22) International Social Service USA Bra 200 E. Lexington, Suite 1700 Baltimore, MD 21201	13-2720500	501c3	10,000	0			Program support
(23) University of MD Radiation Oncology 22 S. Greene Street, GGJ-35 Baltimore, MD 21201	52-1266476	501c3	9,547	0			Clinical support
(24) University of Maryland Clinical Law C 500 W. Baltimore Street, Suite 360 Baltimore, MD 21201	06-1710518	501c3	9,476	0			Clinical support
(25) North Shore University Hospital 400 Community Drive Manhasset, NY 11030	11-1562701	501c3	8,581	0			Program support
(26) U of MD Oral-Maxillofacial Surgery A 650 W. Baltimore Street Baltimore, MD 21201	52-1908293	501c3	8,499	0			Clinical support
(27) University of Maryland College Park 2101 Main Administration Bldg College Park, MD 20742	52-2197313	115	6,000	0			Program support
(28) American Heart Association 4217 Park Place Court Glen Allen, VA 22080	13-5613797	501c3	5,000	0			Program support
(29) NASW Foundation (National Associa 750 First Street, Suite 700 Washington, DC 20001	13-6128093	501c3	5,000	0			Conference support

# Continuation Sheet for Schedule I (Form 990)

Page 2 of 2

Name of the organization

University of Maryland Baltimore Foundation, Inc.

Employer identification number

31-1678679

## Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(30) University of Denver 2044 E Evans Ave, Suite 307 Denver, CO	84-0404231	501c3	5,000	0			Program support
(31) .....				0			
(32) .....				0			
(33) .....				0			
(34) .....				0			
(35) .....				0			
(36) .....				0			
(37) .....				0			
(38) .....				0			
(39) .....				0			
(40) .....				0			
(41) .....				0			
(42) .....				0			
(43) .....				0			
(44) .....				0			
(45) .....				0			
(46) .....				0			

# Continuation Sheet for Schedule I (Form 990)

Name of the organization  
University of Maryland Baltimore Foundation, Inc

Part III Continuation of Grants and Other Assistance to Individuals in the United States					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
8	0	0	0		
9	0	0	0		
10	0	0	0		
11	0	0	0		
12	0	0	0		
13	0	0	0		
14	0	0	0		
15	0	0	0		
16	0	0	0		
17	0	0	0		
18	0	0	0		
19	0	0	0		
20	0	0	0		
21	0	0	0		
22	0	0	0		
23	0	0	0		
24	0	0	0		
25	0	0	0		
26	0	0	0		

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2011**

**Open to Public  
Inspection**

University of Maryland Baltimore Foundation, Inc.

Employer identification number

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**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items		
<input checked="" type="checkbox"/> First-class or charter travel		
<input checked="" type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input checked="" type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	<b>1b</b> X	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	<b>2</b> X	
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
<b>a</b> Receive a severance payment or change-of-control payment?	<b>4a</b>	X
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	<b>4b</b>	X
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?	<b>4c</b>	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
<b>a</b> The organization?	<b>5a</b>	X
<b>b</b> Any related organization?	<b>5b</b>	X
If "Yes" to line 5a or 5b, describe in Part III.		
<b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
<b>a</b> The organization?	<b>6a</b>	X
<b>b</b> Any related organization?	<b>6b</b>	X
If "Yes" to line 6a or 6b, describe in Part III.		
<b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	<b>7</b>	X
<b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	<b>8</b>	X
<b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>	

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
2	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
3	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
4	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
5	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
6	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
7	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
8	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
9	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
10	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
11	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
12	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
13	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
14	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
15	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
16	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I Line a The discretionary spending account available to the President/CEO of the organization is used exclusively for

business-related activities and each expenditure is reviewed by the Treasurer of the organization for appropriate use. The

President/CEO is also provided a membership in a private dining and meeting establishment for the sole purpose of conducting

Foundation business. The first class travel with a companion was for University business in China for the (continued below)

Part I Line a (continued) University of Maryland President who is a trustee of the organization.

Part II T. Sue Gladhill received compensation in the form of salary and benefits from the University of Maryland, a portion of

which is \$113,941 and \$25,414 in her role as President and Chief Executive Officer of the organization. Judith S. Blackburn

received compensation in the form of salary and benefits from the University of Maryland, a portion of which is \$140,733 and

\$23,352 in her role as Treasurer and Chief Financial Officer of the organization. No other officer, director, or (continued below)

Part II (continued) trustee received compensation or benefits in connection with service to the University of Maryland Baltimore

Foundation.



**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Noncash Contributions**

► Complete if the organizations answered "Yes" on Form  
990, Part IV, lines 29 or 30.  
► Attach to Form 990.

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**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	59	1,323,800	Average Market High/Low
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .	X	1	416,667	Cash Equivalent
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( . . . . . )		0	0	
26 Other ► ( . . . . . )		0	0	
27 Other ► ( . . . . . )		0	0	
28 Other ► ( . . . . . )		0	0	

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment . . . . . **29** 0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part I Line 9b The items listed in Part 1, line 9 Securities-Publicly traded, references

the number of non-cash contributions.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

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

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Form 990 Part III Line 4a (continued) \$15 in economic activity for every \$1 of state general  
funds invested. In FY 2012, UMB was awarded over \$529.1 million in research and grant funding.

Form 990 Part III Line 4c (continued) Excellence in teaching prepares students for productive  
leadership and professional success in a wide range of careers and promotes in both students  
and faculty, the highest standard of public and professional service.

Form 990 Part III Line 4d The UMB Foundation supports academic programs and clinical research  
activities in the University of Maryland School of Nursing (SON). SON was founded in 1889 and  
is one of the oldest and largest nursing schools in the nation. The School achieves its  
mission to shape the profession of nursing by developing nurse leaders in education, research,  
and practice through excellent baccalaureate, graduate, and continuing education programs,  
cutting edge science and research, and innovative clinical enterprise. Its 151 faculty are  
also dedicated practitioners. With an average annual enrollment of more than 1,600 students,

37% of whom represent minority/underrepresented populations, SON is the largest nursing school  
in Maryland and produces 41% of the state's nursing workforce. More than 19,000 alumni serve  
as clinical practice, research, educational, and policy leaders across the country.

Form 990 Part III Line 4d (continued) and internationally, SON is ranked eleventh among all  
nursing schools nationally by U.S. News & World Report and four of its master's specialties  
are ranked in the top 10; the adult and gerontological nurse practitioner program is ranked  
eighth. The school currently enrolls 1,664 students, including 590 baccalaureate students, 955  
masters students, and 128 doctoral students - PhD (56) and DNP (72). In 2012, SON graduated  
643 students, which is the largest class of nurses in Maryland history (Expenses \$1,443,267  
including grants of \$1,193,610) (Revenue \$20,817).

Form 990 Part III Line 4e The University of Maryland School of Pharmacy, the fourth oldest in  
the United States, leads pharmacy education, scientific discovery, patient care, and community  
engagement in the state of Maryland and beyond. With an enrollment of nearly 700 doctor of  
pharmacy and graduate students, the highly ranked school conducts cutting edge research in

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drug delivery mechanisms, cost impact studies, basic drug discovery and development, and

disease management, and engages in a wide variety of professional practice activities,

partnering with over 200 community pharmacies, hospitals, assisted living facilities, and

other agencies to provide services to citizens and practitioners around the state and across

the nation. (Expenses \$1,054,374 including grants of \$658,524) (Revenue \$8,750).

Form 990 Part III Line 4f The UMB Foundation supports academic programs and research and

community work in the University of Maryland School of Social Work (SSW). SSW's mission is to

develop leaders and scholars to advance the well-being of populations and communities at risk.

SSW is a highly-ranked institution that produces outstanding social workers whose practice

advances the well-being of all the people they serve. U.S. News & World Report ranks the

school 16th in their 2012 list of Best Graduate Schools in America. The school serves society

through the development of knowledge in education, research, scholarship, service innovation,

and advocacy. SSW was created in 1961 and has grown to become one of the largest and most

respected schools of social work in America. Part of a public university in a diversified

state and region, the School promotes social and economic justice in all of its activities.

Form 990 Part III Line 4f (continued) SSW provides 500,000 hours of social work services a

year within the state of Maryland and surrounding communities. The student body concentration

breakout is generally 80% clinical and 20% MACO (Management & Community Organization), the

largest MACO concentration program in the country. In addition to the School's academic side,

SSW has multiple community service programs. One example, SWCOS (Social Work Community

Outreach Services) allows students to provide their field service to small non-profits

throughout the region and then connect this work back to research. (Expenses \$1,207,467

including grants of \$902,787) (Revenue \$21,575).

Form 990 Part III Line 4g The University of Maryland School of Dentistry (SOD), founded

in 1840, is the first dental school in the world establishing the first doctor of dental

surgery degree in 1841. As the only dental school in the state of Maryland, the SOD provides

essential dental care for more than 30,000 residents, many of whom are underserved. SOD

scientists, specializing in cancer, pain and microbiological research, discover treatments

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that inform patient care. The SOD building, completed in 2006, is one of the most technologically advanced dental educational facilities in the world. Through the innovative, technology-based curriculum, each class of 130 students is equipped with skills to excel in 21st-century dentistry. Upon graduation, SOD students join a network of more than 7,000 alumni who are leaders in the oral health care field. (Expenses \$425,410 including grants of \$72,120) (Revenue \$3,100)

Form 990 Part VI Section B Line 11a A draft version of form 990 is provided to the Executive Committee of the organization's Board of Trustees. This committee convenes to review the return. Any corrections or suggestions are made to the draft return which is then mailed to all of the members of the full Board of Trustees. Upon formal approval by this body, the return is signed by a public accounting firm and the Treasurer of the organization and electronically filed with the Internal Revenue Service by the extended due date

Form 990 Part VI Section C Line 19 The organization maintains a public disclosure file in its office where the books and records are maintained. This file contains IRS form 1023 Application of Recognition of Exemption and the public disclosure version of IRS form 990 Return of Organization Exempt from Income tax for the three most recent fiscal years. These documents plus the Articles of Incorporation, Bylaws and Conflict of Interest & Nepotism policy are available on the organization's website

Form 990 Part VI Section B Line 12c The Board of Trustees and Officers of the organization are required to review the Conflict of Interest Policy and complete a disclosure form annually to indicate anything that they perceive to be a conflict as described in the policy. The President of the organization maintains a record that indicates compliance with this policy by each board member which is then provided to the Audit & Finance Committees. There were no restrictions imposed on any persons with a conflict, such as prohibiting them from participating in the governing body's deliberations and decisions in the transaction with the exception of one trustee who recuses himself during all deliberations relating to two investment managers with funds in our portfolio.

Form 990 Part VI Section B Line 15 The organization has no employees. Members of the

Name of the organization

Employer identification number

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organization's workforce are employees of the University of Maryland in Baltimore (UMB). The

organization reimburses the University annually for its share of the compensation. Each

member's portion of compensation related to their Foundation efforts is approved by the UMBF

Compensation Committee annually. UMB is part of the University System of Maryland, therefore

the compensation of the officers and members of the organization's workforce is established

monitored, and governed by regulations and guidelines in place for all university employees.

In addition, the Foundation's budget which includes salaries in the aggregate is reviewed

annually by the Audit and Finance Committees and by the full Board of Trustees.

Form 990 Part XI Line 5 Unrealized investment gain/(loss)

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[illegible]