

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2012 calen	dar year, or tax y				, 2012,			Oct	31		, 2013		
В	Check if a	pplicable	C Name of organiz	ation MARY	LAND HUMAN	ITIES	COUNCI	L,	INC.		D Emplo	yer Iden	tification Nur	nber	
	Addre	ess change	Doing Business	As							52-	1102	799		
	Name	e change	Number and stre	et (or PO box i	mail is not delivered	d to street add	ir)		Room/sui	ite	E Teleph	one num	nber	_	
	Initia	I return	108 WEST C	ENTRE ST	REET						(41	0) 6	85-009	5	
	Term	unated	City, town or cou	ıntry			State	ZIP c	ode + 4						
	Amer	nded return	BALTIMORE				MD	212	201-4	565	G Gross	receipts	\$2,015	,251.	
	Appli	cation pending		ess of principal of	ficer						group retu			Yes	ΧN
	□	, ,	PHOEBE STEIN	V 108 WEST CE	NTER STREET BA	LTIMOR	e MI	2120	1-456\$	(b) Are all	affiliates inc attach a list	luded?	[Yes	□ N
	Tax-exe	empt status	x 501(c)(3)	501(c) () ◀ (insert no		47(a)(1) or		527	If 'No,'	attach a list	(see in	structions)		
<u>:</u> _	Webs		W.MDHC.ORG		/	<u>/ </u>	(-)(-)	1 1		(c) Group	exemption n	umber I	-		
ĸ		f organization	X Corporation	1 1	ssociation Othe	er ►	L	rear of		1977			legal domicile	MD	
	rt I	Summar		11030	3300144011	<u></u>			. 0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· <u> </u>	1	71010 01	Togar dominion		
Га			y be the organizat	ion's mission	or most signific	cant activi	ties pri	PPOS	E TC 1	O INCE	EASE AL	JAPEN	TESS OF F	TTMANT	TTTE
			ND AND TO PRO												
၁၁	_		IT DEVELOPS										- 		
nai			SPEAKERS BUI												
Activities & Governance	_		ox ► If the c												
ၓ			oting members o				·					3			2
જ			dependent voting									4			2
ij			of individuals e		•	12 (Part V	', line 2a)				5			_ 1
ξ			r of volunteers (e				_					6			
۲			ed business reve				2					7a			0
	b N	et unrelated	d business taxab	le income fro	m Form 990-1,	line 34						7b			
											rior Year			ent Yea	
<u>a</u>			and grants (Par							1	,069,9	87.	1,	097,	<u> 568</u>
Revenue			vice revenue (Pa			7.15									
ě			ncome (Part VIII,				1			_		L70.			106
ш.			e (Part VIII, colu					10			,140,8			917,	
			e – add lines 8 t				nn (A), III	ne 12)	2	,211,0		2,	015,	
			ımılar amounts p								74,9	37.		92,	880
		-	I to or for member												
S			er compensation				A), lines	5-10))		686,9	71.		<u>629,</u>	536
Expenses	16a P	rofessional	fundraising fees	(Part IX, col	umn (A), line 11	le)									
¢ be	b To	otal fundrais	sıng expenses (F	Part IX, colun	nn (D), line 25)	•	12	9,9	23.	» & ···	4 - 4 3	* ** * * * * * * * * * * * * * * * * *		- 4 °	
Ω	17 0	ther expens	ses (Part IX, colu	ımn (A), line:	s 11a-11d, 11 6-2	^{24e}) D = (CEIV (1	,584,8	33.	1,	310,	684
	18 To	otal expens	es Add lines 13	-17 (must eq	ual Part IX, colu	Jinn (A) E		Eħ	<u></u>		,346,7			033,	
			expenses Subf				,		၂၀၀		-135,6			-17,	
8 8			<u> </u>		6	S FEB	272	014	니이		g of Currer			of Yea	
sete elan	20 To	otal assets	(Part X, line 16)		۶Į	기	_		- RS	20g	887,6			838,	
A B			es (Part X, line 2	6)	1	L			一点		108,3				809
ŠĒ			fund balances	•	21 from line	<u>, 9G</u>	DEN.	<u>u</u> T			779,2			761,	
Pa	rt II	Signatur		Cabirdot into	21 110111 11110 120	***************************************	HOLDING TO THE		= 2		113,2	03.		, o . ,	410
			eclare that I have exar	mined this return	including accompany	wno schodulo	s and states	nants	and to the	best of m	, knowledge	and be	lief it is true	correct :	
comp	lete Deck	aration of prepa	arer (other than officer)) is based on all	nformation of which	preparer has	any knowled	ige	and to the	best of m	Knowledge	dia bei	ilet, it is tide,	correct, a	and
			Marke	B. S	•			-			021	121	14		
Sig	n	Signatu	ire of officer	<u> </u>				+		Dat	e /	10/	/		
He		N Pl	mese	B Slo	n Er	east	VA S	eat	280						
		Type or	print name and title	<u> </u>	V V DEAT		<u> </u>	<u> </u>	<u>~</u>						
		Print/Type o	preparer's name	TP	reparer's signature			Date			Chack 3	【 If	PTIN		
_		''	·		R~ (10)	24 0	40	1	1 Ali	u l	_	_ ,		145	
Pai			LL L SNYDER		· vindal	150 m	The same	اعرا	1011	-1	self-employ	# 0	P01225	147	
	parer e Only	_			DER, CPA,		<u> </u>				P = 411				
US	e Uniy	Firm's addre			ERICK ROAL						Firm's EIN		<u>-11721</u>		
				TTSVILLE		MD	2110	4			Phone no	(41	0) 442		
			nis return with the				ions)						X Yes		No
BA	A For P	aperwork R	Reduction Act No	tice, see the	separate instru	actions.			TEEAC	101 05/0	9/13		Forr	n 990	(2012

	990 (2012) MARYLAND HUMANITIES COUNCIL, INC.	52-110	4133		age Z
Par					.
	Check if Schedule O contains a response to any question in this Part III				x
1					
	PURPOSE IS TO INCREASE AWARENESS OF HUMANITIES IN MARYLAND AND TO DIALOGUE AND CIVIC ENGAGEMENT ON ISSUES CRITICAL TO MARYLANDERS.				
	See Form 990, Page 2, Part III, Line 1 (continued)				- -
	Did the organization undertake any significant program services during the year which were not listed on	the prior	•		
_	Form 990 or 990-EZ?	the phon	Yes	\mathbf{x}	No
	If 'Yes,' describe these new services on Schedule O		□ .63	<u>~</u>	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	ucas 2	Yes	x	No
3	If 'Yes,' describe these changes on Schedule O	1063	163	<u>~</u>]	140
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am	es, as mea ount of grai	sured by a	expen: locatio	ses ons to
	others, the total expenses, and revenue, if any, for each program service reported				
	a (Code) (Expenses \$ 202,554. including grants of \$ 92,424.) (Re	venue ¢		4 21	3)
4 a		_		4,21	
	GRANTS - PROVIDED GRANTS TO NON-PROFIT ORGANIZATIONS IN MARYLAND TO COL				
	PROGRAMS WITH SPECIAL EMPHASIS ON PROGRAMS THAT FEATURED CIVIC DIAL	OGOR WN	D ENGA	GEWE	<u>NT -</u> .
	IN THE MOST RECENT YEAR THE PROGRAM FUNDED 19 GRANTS.				
		. – – – –			
4 b		venue \$_	9	0,17	3.)
4 b	b (Code) (Expenses \$185,849. including grants of \$0.) (Ret	· -	9	0,17	3.)
4 b		JRAGE_	9	0,17	<u>'3.</u>)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCO	JRAGE_	9	0,17	<u>'3.</u>)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED INCLUDING ONE MARYLAND ONE BOOK THAT SERVED	JRAGE	9	0,17	(3.)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE,	JRAGE	9	0,17	· · · · · · · · · · · · · · · · · · ·
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE,	JRAGE	9	0,17	<u>'3.</u>)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE,	JRAGE	9	0,17	(3.)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.		0,17	/3.)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.		0,17	/3.)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.		0,17	/3.)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.		0,17	/ <u>3.</u>)
4 b	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.		0,17	/ <u>3.</u>)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.			
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST	JRAGE 5,241 FIVALS.		1,90	22.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Retained by the company of the	JRAGE 5,241 FIVALS. venue \$_ 3_AWAREI		1,90	22.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880 including grants of \$ 0.) (Reflection of the control of the	JRAGE 5,241 FIVALS. venue \$_ 3 AWAREI ANALYTIC	VESS	1,90	
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflection of the control of th	JRAGE 5,241 FIVALS. venue \$ 3_AWAREI ANALYTIC	VESS	1,90	(2.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOUR READING AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C(Code:)(Expenses \$ 215,880. Including grants of \$ 0.)(Reflection of the control of	Venue \$_ S_AWAREI ANALYTIC DENTS, (NESS CAL	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURE ADDING AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C(Code:)(Expenses \$ 215,880. including grants of \$ 0.)(Reference of the control of	Venue \$ AWAREI ANALYTIC	VESS	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Resembled to the content of the	Venue \$ AWAREI	MESS CAL	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C(Code:)(Expenses \$ 215,880. including grants of \$ 0.)(Reservice) HISTORY - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO INCREASE OF LOCAL AND NATIONAL HISTORICAL EVENTS AND IMPROVE RESEARCH AND SKILLS. PROGRAMS INCLUDED MARYLAND HISTORY DAY SERVING 21,779 STUMESUM ON MAIN STREET, AND CIVIL WAR READING AND DISCUSSION PROGRAMS.	Venue \$ AWAREN	VESS CAL	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflicted by the control of the	Venue \$_AWAREIANALYTIC	NESS CAL	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflicted by the control of the	JRAGE 5,241 FIVALS. venue \$ 3 AWAREI ANALYTIC DENTS, C	VESS CAL CHATAU	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflicted by the control of the	JRAGE 5,241 FIVALS. venue \$ 3 AWAREI ANALYTIC DENTS, C	VESS CAL CHATAU	1,90	12.)
	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflicted by the control of the	JRAGE 5,241 FIVALS. venue \$ 3 AWAREI ANALYTIC DENTS, C	VESS CAL CHATAU	1,90	12.)
40	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflicted by the control of the	JRAGE 5,241 FIVALS. venue \$ 3 AWAREI ANALYTIC DENTS, C	VESS CAL CHATAU	1,90	12.)
40	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST OF COOK OF SERVICE OF COOK OF SERVICE OF COOK OF SERVICE OF LOCAL AND NATIONAL HISTORICAL EVENTS AND IMPROVE RESEARCH AND SKILLS. PROGRAMS INCLUDED MARYLAND HISTORY DAY SERVING 21,779 STU MUSEUM ON MAIN STREET, AND CIVIL WAR READING AND DISCUSSION PROGRAMS OF COOK OF	Venue \$_ SAWAREI ANALYTIC DENTS, CAM.	VESS	1,90	12.)
4 0	LITERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENCOURED AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVED PARTICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE, LITERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FEST C (Code:) (Expenses \$ 215,880. including grants of \$ 0.) (Reflicted by the control of the	Venue \$_ SAWAREI ANALYTIC DENTS, CAM.	VESS	1,90	12.)

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х 1 Schedule A 2 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 X Section 501(c)(3) organizations 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 4 х 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 X 5 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. 6 Х Part I 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 Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes.' 8 Х complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 9 Х 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 10 Х If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, 11 or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a D, Part VI 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 11 b Х c 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 11 c Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported X in Part X, line 16? If 'Yes,' complete Schedule D, Part IX 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e Х f 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 X 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete х Schedule D, Parts XI, and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and X 12b if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 х Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a ${f b}$ 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 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV. X 15 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 X 16 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) 17 X 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 Х 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 Х X 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

20 b

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		x
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		x
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	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? If 'Yes,' complete Schedule L, Part III	27		х
	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)	<u> </u>	×	5
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	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? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2012)

Form **990** (2012) MARYLAND HUMANITIES COUNCIL, INC. 52-1102799 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 28 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c X 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 14 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) 4 a X **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 X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6 a **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b Organizations that may receive deductible contributions under section 170(c). Ä a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and Х services provided to the payor? 7 a 7 b X b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 x as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a X Form 1098-C7 7 h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Х 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a X X **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter 10 a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **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 13b c Enter the amount of reserves on hand 13c

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

Х

14 a

14b

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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members of the governing body, or if the governing body delegated broad 1 a 24 authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 24 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee or key employee? Х Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 X Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b stockholders, or other persons other than the governing body? X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by 1 400 the following a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 8ь Х Is there any officer, director or 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 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12cX 13 х 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 X 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? 15 a a The organization's CEO, Executive Director, or top management official X 15_b **b** Other officers of key employees of the organization X If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) # 9 3 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a X 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Maryland Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization

PHOEBE STEIN PH D 108 WEST CENTRE STREET BALTIMORE $\underline{MD} = 21201-4565 \qquad (410) 685-0095$ BAA TEEA0106 08/08/12 Form 990 (2012)

Page 7

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

- 1 a 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	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current of	flicer, director, or trus	tee
	(c)									
(A) Name and Title	(B) Average hours per week (list	one bo	x, ùnl	ess p	ersor	more the state of	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) PHOEBE STEIN	40.00									
EXEC DIRECTOR				x				100,876.	0.	0.
(2) JAMES S KITTERMAN, JR	40.00									
FISCAL OFFICER					x			59,788.	0.	0.
(3) AARON HEINSMAN	40.00									
DEVELOPMENT OFFICER					x			71,341.	0.	0.
(4) DR. LENNEAL JHENDERSON, JR	0.00									
CHAIR, BOARD OF DIRECTORS		x		x				0.	0.	0.
(5) LIZ CANNON	0.00								·	
VICE CHAIRMAN, BOARD OF DIRECTORS		х		х				0.	0.	0.
(6) DR. SILVIA GOLOMBEK	0.00									
SECRETARY, BOARD OF DIRECTORS		x		х				0.	0.	0.
(7) DAVIS SHERMAN	0.00									
TREASURER, BOARD OF DIRECTORS		х		х				0.	0.	0.
(8) DAVID PHILLIPS	0.00									
BOARD OF DIRECTORS		x						0.	0.	0.
(9) DR. DIEDRA BADEJO	0.00									
BOARD OF DIRECTORS		x						0.	0.	0.
(10) GORDON COOLEY	0.00			ŀ					İ	
BOARD OF DIRECTORS		X						0.	0.	0.
(11) ALEX CASTRO	0.00									
BOARD OF DIRECTORS		Х						0.	0.	0.
(12) RHONDA DALLAS	0.00									
BOARD OF DIRECTORS		X	•					0.	0.	0.
(13) MONIQUE DIXON	0.00									
BAORD OF DIRECTORS		x						0.	0.	0.
(14) ALBERT FELDSTEIN	0.00									,
BOARD OF DIRECTORS		х						0.	0.	0.

Part VII Section A. Officers, Directo	ors, Trustees,	Key	Em	<u>iplo</u>	<u>oye</u>	es,	and	d Highest Com	pensated Emp	loyees (co	ont)
	(B)	İ		((C)						
(A) Name and title	Average hours per	box	, unle:	heck ss pe	rson	than on the thick the thic	n an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimate amount of	ed other
	week (list any hours	Q 0	ltst	Officer	₹ Q	emp	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensa from the organizati	e
	for related	or director	Tutor	æ	Key employee	Highest co employee	ner Per			and relat	ted
	organiza - tions	2 2	nal tr		loye) omp					
	below dotted line)	See	nstitutional trustee		"	Highest compensated employee					
		ļ				ä					
(15) MICHAEL S. GLASER BOARD OF DIRECTORS	0.00	×						0.	0.		0
(16) LAUREN DUGAS GLOVER	0.00	+			-	 	\vdash	<u> </u>		 	0.
BOARD OF DIRETORS		x			l	İ	İ	0.	0.		0.
(17) O. F. MAKARAH	0.00	+-	\vdash					•	•	-	
BOARD OF DIRECTORS		x						0.	0.		0.
(18) HILARY B. MILLER	0.00	+	 					0.	•		
BOARD OF DIRECTORS		x						0.	0.		ο.
(19) ADRIANNE NOE	0.00	+	\vdash						•	 	
BOARD OF DIRECTORS		×						0.	0.		0.
(20) DR. MARTIN L. PEREBOOM	0.00							-			
BOARD OF DIRECTORS		x						0.	0.		0.
(21) MATT POWER	0.00										_
BOARD OF DIRECTORS		x						0.	0.		0.
(22) CYNTHIA RAPOSO	0.00									1	
BOARD OF DIRECTORS		X						0.	0.		0.
(23) THOMAS B. RIFORD	0.00	- 1									
BOARD OF DIRECTORS		X						0.	0.		0.
(24) HEATHER SARKISSIAN	0.00	 x							0		^
BOARD OF DIRECTORS	0.00	+-						0.	0.		0.
(25) STEPHEN SFEKAS BOARD OF DIRECTORS		x						0.	0.		٥.
1 b Sub-total					<u> </u>	!	>	232,005.	0.		0.
c Total from continuation sheets to Part \	/II, Section A						▶				
d Total (add lines 1b and 1c)								232,005.	0.		0.
2 Total number of individuals (including bu	it not limited to th	ose !	listed	d ab	ove)) who	re	ceived more than	\$100,000 of report	able comper	nsation
from the organization 1											1
										Yes	s No
3 Did the organization list any former office			key	em	ploy	ee, c	or hi	ighest compensate	ed employee	3	
on line 1a? If 'Yes,' complete Schedule									_	 •	+^-
4 For any individual listed on line 1a, is the the organization and related organization	e sum of reportab as greater than \$1	le co	mpe	nsa '' If	ition /es/	and com	oth olet	er compensation : le Schedule I for	from		
such individual	is greater than ϕ	00,0	•			00,,	0.01	0 00.100010 0 101		4	Х
5 Did any person listed on line 1a receive	or accrue comper	satio	on fr	om	any	unre	late	ed organization or	ındıvıdual	<u>-</u> -	
for services rendered to the organization	i? If 'Yes,' comple	te S	chec	lule	J fo	r suc	h p	erson		5	X
Section B. Independent Contractors 1 Complete this table for your five highest	compensated ind	ener	deni	t coi	ntrac	ctors	tha	t received more th	nan \$100,000 of		
compensation from the organization Re	port compensation	for	the	cale	nda	r yea	ır ei	nding with or with	in the organization'	s tax year.	
(A)								(B)	,	(C)	
Name and busin	ess address							Description of	of services	Compensat	ion
											
	<u> </u>								_		
2 Total number of independent contractors	(including but so	t lim	ited	to #	hosa	lista		hove) who roces	nd more than		
\$100,000 in compensation from the orga			cu			, 11316	Juc	ADDITO, WIND IECEIV	od more triall		26
									1		

	Check if Scl	nedule O contains	a respo	onse to any quest	ion in this Part VIII			
			·.		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	 1 a Federated can b Membership d c Fundraising exit d Related organ e Government grants 	ues rents zations (contributions)	1 a 1 b 1 c 1 d 1 e	881,240.		^		
ONTRIBU And Othi	sımılar amounts n	ons, gifts, grants, and ot included above ons included in Ins 1a	1 f	216,328.	-			* *
	h Total. Add line	s 1a-1f		▶	1,097,568.	y		, «,
N				Business Code	*	*	,	* * * * * * * * * * * * * * * * * * * *
PROGRAM SERVICE REVENUE		am service reven						
<u>-</u>	g Total. Add line 3 Investment incother similar a	ome (including di	vidends	, interest and	106.	0.	0.	106.
		nvestment of tax-	exempt Real	bond proceeds			· · ·	100.
	6 a Gross rents b Less rental ex c Rental Income or (penses	real	(ii) Felsoliai				
	d Net rental inco	, <u></u>	<u> </u>		_ h.m		- · · · · · · · · · · · · · · · · · · ·	<u> </u>
		(i) Sec	curities	(n) Other				.,, , , , , ,
	7 a Gross amount fror assets other than b Less. cost or other	nventory	Junios	(ii) Otto	;	* * * *	* * * * *	
	and sales expense c Gain or (loss) d Net gain or (lo			>				
OTHER REVENUE		\$_ s reported on line			- 1 1 1 1 1 1			3 % %
OTHER	See Part IV, II b Less direct ex c Net income or		a b aising e		* * * *			*
	9a Gross income See Part IV, li	from gaming activ	vities a		\$	* , *	* * .	
	b Less direct ex	penses	b			*		mer menselbenomen en engen en en en en engen en en en en en en en en en en en en e
	c Net income or	(loss) from gamır	ng activi	ties •				
	10a Gross sales of and allowance b Less cost of g	s	eturns a			* * *	* ^	
	-	(loss) from sales	of inver	'I ntorv ▶				<u>*</u>
		eous Revenue	7. 111461	Business Code				
	11 a					a ah amandan mada mada mada mada mada mada m		
	C							
	d All other rever				917,577.	917,577.	0.	0.
	e Total. Add line 12 Total revenue			>	<u> </u>		* `	** **
	iz ioiai revenue	. See insulictions.		-	2 015 251	017 577		100

Part IX | Statement of Functional Expenses

Seci	Check if Schedule O contains a re			must complete column	(A)
	Check if Schedule O contains a re		(B)	(C)	(D)
Do r 7b, d	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments				*
	and organizations in the United States. See Part IV. line 21	92,880.	92,880.		,
2	Grants and other assistance to individuals in the United States See Part IV, line 22.	92,000.	32,000.		*
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16			*	*
4	Benefits paid to or for members				, 5 }
	Compensation of current officers, directors, trustees, and key employees	232,005.	38,068.	105,953.	87,984.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	293,348.	282,336.	11,012.	0.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b)				
	employer contributions)	21,704.	13,237.	4,832.	3,635.
9	Other employee benefits	38,170.	23,279.	8,498.	6,393.
10	· · · · · · · · · · · · · · · · · · ·	44,309.	27,023.	9,865.	7,421.
11	Fees for services (non-employees)				
а	Management				
t	Legal	4,179.	3,5 <u>5</u> 5.	357.	267.
c	Accounting	3,803.	3,235.	325.	243.
c	Lobbying				
е	Professional fundraising services. See Part IV, line 17		1 \$ % 1	*. ** x	
f	Investment management fees		· 		
_	Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0) Advertising and promotion				=
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	21 005	27 122	2 725	2 020
_	Travel	31,885.	27,122.	2,725.	2,038.
17	Payments of travel or entertainment	2,892.	1,108.	111.	1,673.
18	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,360.	0.	1,360.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	30,231.	25,715.	2,584.	1,932.
23	Insurance	4,843.	4,120.	414.	309.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses	, ,	* *	* * * * * * *	
	in line 24e If line 24e amount exceeds 10%	4	* *	* *	ł 🐎 '> 4
	of line 25, column (A) amount, list line 24e		<.		*
	expenses on Schedule O)				
	COUNCIL PROJECTS	192,453.	192,453.	0.	0.
	PSTAFF_DEVELOPMENT	9,786.	8,325.	836.	625.
	AUDIT_FEES	7,575.	6,444.	647.	484.
	COST_SHARING	917,577.	917,577.	0.	0.
	All other expenses	104,100.	62,973.	24,208.	16,919.
25	Total functional expenses. Add lines 1 through 24e	2,033,100.	1,729,450.	173,727.	129,923.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)				

Balance Sheet Part X Check if Schedule O contains a response to any question in this Part X (A) End of year Beginning of year 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 347,014 411,870. 3 3 Pledges and grants receivable, net 313,558 231,891. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other 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). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges. 9 Land, buildings, and equipment $\,$ cost or other basis Complete Part VI of Schedule D 10 a 487,142 **b** Less accumulated depreciation 10b 310,492 205,552 10 c 176,650. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets Other assets See Part IV, line 11 15 15 2,500. 2,500. Total assets. Add lines 1 through 15 (must equal line 34). 16 16 887,637 838,225. Accounts payable and accrued expenses 17 17 60,688 48,453. Grants payable 18 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties. 24 24 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. 25 47,684 28,356. 26 Total liabilities. Add lines 17 through 25. 108,372 76,809. 26 Organizations that follow SFAS 117 (ASC 958), check here > 1/k | and complete N E T lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 399,629 205. 473. Temporarily restricted net assets 28 28 288,211 <u>379,636</u> Permanently restricted net assets 29 29 8 R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 33 33 *779,*265 <u>761,416.</u> Total liabilities and net assets/fund balances 34 887,637 34 838,225.

BAA

Form 990 (2012)

Forr	90 (2012) MARYLAND HUMANITIES COUNCIL, INC. 52-1102799			76	ige 12		
Pa	t XI Reconciliation of Net Assets	<u> </u>					
	Check if Schedule O contains a response to any question in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,0	15,2	251.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,0	33,1	100.		
3	Revenue less expenses Subtract line 2 from line 1	3			349.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7	79,2	265.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9							
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7	61,4	16.		
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				x		
				Yes	No		
1	Accounting method used to prepare the Form 990. Cash 🕱 Accrual Other		* \ *	* "			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			***			
2	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		x		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both	viewed on a					
	Separate basis Consolidated basis Both consolidated and separate basis						
	Were the organization's financial statements audited by an independent accountant?		2b	x			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s	eparate		**	3.0		
	basis, consolidated basis, or both.		. %	, % 8	13		
	X Separate basis Consolidated basis Both consolidated and separate basis			<u></u>	- -		
,	olf 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigle review, or compilation of its financial statements and selection of an independent accountant?	nt of the audit,	2 c	x			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth it Audit Act and OMB Circular A-133?	n the Single	3 a	x			
	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	e required audit	3 b	x			
BAA			Form	990 ((2012)		

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

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2012

Name of the organization Employer identification number											
MAR	YLAND HUMANITIES	COUNCIL, INC	•					52-13	10279	9	
Par	t I Reason for Publ	ic Charity Status	(All organizations	must (comple	ete this	part.) See ı	nstruct	tions.	
The c	organization is not a priva	te foundation because	e it is (For lines 1 thro	ugh 11,	check c	nly one	box)				
1	A church, convention	of churches or assoc	ciation of churches des	cribed ir	section	n 170(b)	X1)(A)(i)).			
2	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)							
3	\		e organization describe		ction 17	0(b)(1)(A)(iii).				
4			in conjunction with a h					0(b)(1)(AX(iii). E	nter the hospital's	
	name, city, and state	-	•	•						•	
5		ated for the benefit of	f a college or university	y owned	or oper	ated by	a gove	rnmenta	I unit de	scribed in section	_
6	A federal, state, or lo	cal government or go	vernmental unit descri	bed in s	ection 1	170(b)(1)(A)(v).				
7	An organization that in section 170(b)(1)(A	normally receives a s \()(vi). (Complete Par	ubstantial part of its sut II)	upport fr	om a go	vernme	ental uni	t or fron	n the ge	neral public described	d
8	A community trust de	scribed in section 17	0(b)(1)(A)(vi). (Comple	te Part I	1.)						
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 organ	nized and operated e	xclusively to test for pu	ublic saf	ety See	section	n 509(a)	(4).			
11	An organization organisation supported organization supporting organization	ns described in section	isively for the benefit of, to 1 509(a)(1) or section 50 1 1 1 through 11 h	o perforr 19(a)(2)	n the fun See sec	ctions of t ion 50 9	, or carry (a)(3). (out the part out the part of the character of the charact	purposes e box tha	s of one or more publicly it describes the type of	y f
	a Type I b	Type II c		nally inte	egrated		a 🗆 -	Type III	– Non-f	unctionally integrated	1
е	By checking this box, other than foundation section 509(a)(2).	I certify that the organismanagers and other	anization is not control than one or more pub	led dired licly sup	otly or in	directly organiza	by one ations de	or more escribed	disqual In secti	ified persons on 509(a)(1) or	•
f	If the organization re- check this box	ceived a written deter	mination from the IRS	that is a	a Type I	, Type I	I or Typ	e III sup	porting	organization,	
g	Since August 17, 200	6, has the organization	on accepted any gift o	r contrit	oution fr	om any	of the f	ollowing	persons	S? Yes No	_
	(i) A person who do below, the gove	lirectly or indirectly co erning body of the sup	ontrols, either alone or oported organization?	togethe	r with pe	ersons o	describe	d ın (ıı)	and (III)	11 g (i)	<u>-</u>
	(ii) A family member	er of a person describ	ed in (i) above?							11 g (iı)	
	• • •		described in (i) or (ii) a	bove?						11 g (iii)	_
h	* *	-	e supported organization							119()	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	your go	ation in) listed in	(v) Did yo the organi column (i supp	zation in	organize	ation in	(vii) Amount of monetary support	_
				Yes	No	Yes	No	Yes	No		
(Δ)											
(A)					<u> </u>		 				
(B)					<u> </u>						_
(C)											_
<u>(D)</u>										.	_
<u>(E)</u>											_
Total		, ,	*			* *	. *	1	, \$		

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

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

	9		· / / / / /	
(Complete only if you checked	d the box on line 5, 7, or 8 of Par	t I or if the organization failed to quali	ify under Part III If the	е
organization fails to qualify up	nder the tests listed below inlease	e complete Part III.)	.,	

Sec	tion A. Public Support									
begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	2,795,759.	1,782,561.	1,739,532.	2,211,056.	2,015,251.	10,544,159.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	2,795,759.	1,782,561.	1,739,532.	2,211,056.	2,015,251.	10,544,159.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	\$ \$ \$	å ·	, §	x v \$ \$ \$	S e X s X				
6	Public support. Subtract line 5 from line 4	`** »	*	* * * *	* */ *	*	10,544,159.			
Sec	tion B. Total Support									
Cale	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
7	Amounts from line 4	2,795,759.	1,782,561.	1,739,532.	2,211,056.	2,015,251.	10,544,159.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,157.	499.	264.	170.	106.	2,196.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10	* **	, ,	* *	_	* *	10,546,355.			
12	Gross receipts from related activ	vities, etc (see ins	tructions)			12				
13	First five years. If the Form 990 organization, check this box and	is for the organiz I stop here	ation's first, secoi	nd, third, fourth, o	or fifth tax year as	a section 501(c)	(3)			
	tion C. Computation of Pu					<u> </u>				
	Public support percentage for 20			ne 11, column (f))	•	14	99.98%			
	Public support percentage from			•		15	99.96 %			
16 a	a 33-1/3% support test — 2012. If and stop here. The organization	the organization qualifies as a pul	did not check the blicly supported o	box on line 13, a rganization	nd the line 14 is 3	33-1/3% or more,	check this box			
ŀ	b 33-1/3% support test — 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17 a	17a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.									
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Part ed organization	t IV how the ▶			
18	Private foundation. If the organ	ization did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in:	structions >			
544										

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)

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	2	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')							-
	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		-					
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge.							
6	Total. Add lines 1 through 5		<u> </u>					
	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b				<u>-</u>			
	Public support (Subtract line 7c from line 6)		1.3 1.32 ,			i en		<u> </u>
	tion B. Total Support		·	T			. 1	
	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	<u> </u>	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable							
	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						~=	
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
	Total support. (AddIns 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and		ation's first, seco	 nd, third, fourth, o	r fifth tax year as	a section 50	1(c)(3)	
					•			
	tion C. Computation of Pu			no 13 column (6)		Г	15	
15	Public support percentage for 20	•		ne 13, column (1))		-	16	
	Public support percentage from						10	
	tion D. Computation of Inv				mn (fl)	Ι	17	<u> </u>
	Investment income percentage f				HILL (1)).	-	18	
	Investment income percentage f				and line 15 to man	 than 22 17		
	33-1/3% support tests — 2012. I is not more than 33-1/3%, check 33-1/3% support tests — 2011. I	k this box and sto l	p here. The orgai	nization qualifies a	is a publicly supp	orted organiz	zation	▶ 📗
	line 18 is not more than 33-1/3% Private foundation. If the organi	6, check this box a	and stop here. Th	ne organization qu	alifies as a public	y supported	organiza	ation •
BAA			TEEA0403	08/09/12				or 990 E7) 2010
			1 E E MU+U3	00103112	50	neuule A (F(ハロロ ブブリ	or 990-EZ) 2012

Schedule A	(Form 990 or 990-EZ) 2012	MARYLAND HUMANITII	IS COUNCIL, INC.	52-1102/99
Part IV	Supplemental Informat Part II, line 17a or 17b; (See instructions).	ion. Complete this part and Part III, line 12. Als	to provide the explanations in complete this part for any	required by Part II, line 10; additional information.
				
_				
 _	 			
_				
_		- 		-
				
- -				

Supporting Statement of:

Form 990 p 9/Government Grants

Description	Amount
STATE GRANTS	701,880. 179,360.
Total	881,240.

Supporting Statement of:

Form 990 p 9/Other amt. not included

Description	Amount
PRIVATE GIFTS OTHER GRANTS AND INCOME	189,058. 27,270.
Total	216,328.

Supporting Statement of:

Sch C, page 3/Part II-B Line 1g(b)

Description	Amount
ADVOCACY EXPENSES	
PERSONNEL	7,721.
TRAVEL	1,120.
MEETINGS	467.
OTHER	912.
Total	10,220.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• (Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III			
Name	of organization			Employer identific	cation number
MAI	RYLAND HUMANITIES (COUNCIL, INC.		52-110279	9
Pai	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1	Provide a description of the	organization's direct and indirect political of	ampaign activities i	n Part IV.	
2	Political expenditures			► :	\$
3	Volunteer hours				
Pai	rt I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶ ;	\$
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	► 5	\$
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4:	a Was a correction made?				Yes No
ı	b If 'Yes,' describe in Part IV				
Par	rt I=C Complete if the o	rganization is exempt under secti	on 501(c), exce	ot section 501(c)(3)	•
1		pended by the filing organization for section			
2	Enter the amount of the filin function activities	g organization's funds contributed to other	organizations for se	ection 527 exempt	3
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	▶ \$;
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contributi	and employer identification number (EIN) s. For each organization listed, enter the all ons received that were promptly and direct all action committee (PAC). If additional spansors	mount paid from the tly delivered to a sei	filing organization's fun parate political organizat	ds Also enter the tion, such as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule C (Form 990 or 990-EZ) 201	2 MARYLAND HU	MANITIES COUNCIL	INC.	52-1102	799 Page 2
	the organizatio	n is exempt under se		d filed Form 5768 (el	ection under
A Check ► If the filin	ng organization bel	ongs to an affiliated group	and list in Part IV ea	ch affiliated group membei	's name,
address,	EIN, expenses, an	d share of excess lobbying	expenditures)		
B Check ► if the filing	ng organization che	cked box A and 'limited co	ntrol' provisions apply		
(The term	Limits on Lobby	ving Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence pu	ıblıc opinion (grass roots lo	bbying)		
b Total lobbying expenditi	ures to influence a	legislative body (direct lobb	yıng)		
c Total lobbying expenditi		and 1b)			
d Other exempt purpose of	•				
e Total exempt purpose e	xpenditures (add li	nes 1c and 1d)			
f Lobbying nontaxable an both columns	nount Enter the an	nount from the following tab			
If the amount on line 1e, col	umn (a) or (b) is [.]	The lobbying nontaxable	amount is	· ·	å
Not over \$500,000		20% of the amount on line 1e		* * * *	
Over \$500,000 but not over \$1,		\$100,000 plus 15% of the excess		, '	`
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess		* *	* ,
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000				ř « *	
Over \$17,000,000		\$1,000,000		<u> </u>	
g Grassroots nontaxable a					
h Subtract line 1g from lin					·
i Subtract line 1f from lin				4700	
j If there is an amount ot section 4911 tax for this		ther line 1h or line 1i, did ti	ne organization file Fo	orm 4/20 reporting	Yes No
(Son	ne organizations th	4-Year Averaging Period U at made a section 501(h) e ns below. See the instructi	ection do not have to	complete all of the five	
	Lobi	ying Expenditures During	4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling	* * * .	*			
amount (150% of line	* *,	* }	* * *	,	
2a, column (e))				* * * * *	
c Total lobbying expenditures					_
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	* * *	45 e		4 4 4	
f Grassroots lobbying expenditures					
ВАА				Schedule C (Form	990 or 990-EZ) 2012

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(4	a)	_ (D)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity			Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		3.	***************************************
a Volunteers?	x		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		, ž
c Media advertisements?	<u></u>	x	
d Mailings to members, legislators, or the public?		x	
e Publications, or published or broadcast statements?		x	
f Grants to other organizations for lobbying purposes?		x	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	х		10,220.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		х	
i Other activities?		х	
j Total Add lines 1c through 1i	7		10,220.
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			<i>**</i>
b If 'Yes,' enter the amount of any tax incurred under section 4912	F 31		
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	, ,		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			, , ,
Partill-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	1(c)(5)	, or	
		-	Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
Partill-B: Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5)	. or se	ction 501(c)
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	Part II	Î-A, lir	ne 3, is
1 Dues, assessments and similar amounts from members		1	· · · ·
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2 a	
b Carryover from last year		2 b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po			
expenditure next year?		4	
Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information		(- (() - 1	Lad annua Lath
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; f Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.	-art II-A	(апша	ea group list),
Pt_II-B Line 1i MET WITH STATE AND FEDERAL OFFICIALS AND LEGISLATO	<u>R</u> S		
TO MAKE THEM AWARE OF PROGRAM ACTIVITIES AND NEED	FOR_		
GREATER_FUNDING			

Schedule C (Form 990 or 990-EZ) 2012 MARYLAND	HUMANITIES	COUNCIL,	INC.		52-1102799	r aye 🖣
Part IV	Supplemental Information	(continued)					
			- <i>-</i>	- 		- -	
			- 				
		- -					
		-		-			
		- 		-			- -
_ _			- -				- -
		-	- -				-
		-	-				
			. 				
			- 				
		-	- -				
							
					- -		
		-	 .	. 			
		- 	-				
			- 				
					 -		
		- 					
			<i></i> _				_ _
	 				_	_	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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

2012

Open to Public Inspection
Employer identification number

MARYLAND HUMANITIES COUNCIL, INC. 52-1102799 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year 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? No Yes 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? Yes No Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2 a 2 b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 20 d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 4 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No 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 **>**\$ 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 In Part XIII, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a 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 XIII, 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: 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 **►** \$

Schedule D (Form 990) 2012 MARYI	AND HUMAN	ITIES COUNCIL,	INC.	52-110	
Part III Organizations Mainta	ining Collect	tions of Art, Histo	rical Treasures,	or Other Similar Ass	sets (continued)
3 Using the organization's acquisition (check all that apply).	ion, accession,	and other records, che	eck any of the followi	ng that are a significant i	use of its collection
a Public exhibition		d Loan o	or exchange programs	5	
b Scholarly research		e Other			
c Preservation for future gener	rations				
4 Provide a description of the orga Part XIII					se in
5 During the year, did the organiza to be sold to raise funds rather the	ntion solicit or re han to be maint	ceive donations of art	, historical treasures, rganization's collection	or other similar assets n?	Yes No
Part IV Escrow and Custodial reported an amount o	Arrangement n Form 990,	s. Complete if the o Part X, line 21.	rganization answe	rea 'Yes' to Form 990	, Part IV, line 9, or
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian,	or other intermediary	for contributions or o	ther assets not included	Yes No
b If 'Yes,' explain the arrangement	in Part XIII and	d complete the following	ng table		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year					
f Ending balance		000 5 1 7 1 013		1f	
2 a Did the organization include an a			baa baan meed.	ad in Dark VIII	∐ Yes
b If 'Yes,' explain the arrangement	in Part XIII. Ch	eck nere ii the explan	tion has been provide	ed in Part XIII	
Part V Endowment Funds. C	Complete if th	e organization an	swered 'Yes' to F	orm 990 Part IV Jir	ne 10
ruit v Elidowillett i dids. c	(a) Current	(b) Prior yea		(d) Three years	(e) Four years
1 a Beginning of year balance		```			
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					-
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					<u> </u>
2 Provide the estimated percentag	e of the current	year end balance (lin	e 1g, column (a)) hel	d as	
a Board designated or quasi-endow	vment -	%			
b Permanent endowment ►	%	_			
c Temporarily restricted endowmer		 %			
The percentages in lines 2a, 2b,	and 2c should e	equal 100%			
3a Are there endowment funds not organization by	in the possession	on of the organization	that are held and adr	ninistered for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(II), are the related					3b
4 Describe in Part XIII the intended					
Part VI Land, Buildings, and		See Form 990, Pa	(b) Cost or other	(c) Accumulated	(d) Book value
Description of property	(a	(investment)	basis (other)	depreciation	(d) Book value
1 a Land					
b Buildings					
c Leasehold improvements		372,091.		210,851.	161,240.
d Equipment	<u> </u>	115,051.		99,641.	15,410.
e Other					
Total. Add lines 1a through 1e (Colum	nn (d) must equ	al Form 990, Part X, c	olumn (B), line 10(c).		176,650.
BAA				Sched	ule D (Form 990) 2012

Scriedule D (FOITH 990) 2012 MARYLAND HUMANITIES			12/99 Tage
Part VII Investments - Other Securities. See F			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation end-of-year market	value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)		-	
(C) (D)	_		
(E)			
(F)		-	
(G)			
(H)			
(I)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12)			*
Part VIII Investments - Program Related. See F		ıne 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation	Cost or
(1)	<u> </u>	end-of-year market	value
(1)			
(2)			
(3)			
(4) (E)		 	
(5) (6)			· · · · · · · · · · · · · · · · · · ·
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		. 3	# # * · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, Part X, Iir	ne 15.		
(a) Desc			(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)		—	
Total. (Column (b) must equal Form 990, Part X, column (B)			
Part X Other Liabilities. See Form 990, Part X,			. , &, :
(a) Description of liability	(b) Book value	** *	
(1) Federal income taxes			*
(2) LOANS PAYABLE	28,356	∸	*
(3)		_ _	
(4) (E)		_	
(5)		 * * ,	*
(6)		— _*	· · · · · ·
(7)		<u> </u>	
(8)			
(9)		*	
(10)	+	—	* *
(11)		. .	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to	the organization's financial st		for uncertain, tax positions
under FIN 48 (ASC 740) Check here if the text of the footnote has been provide under FIN 48 (ASC 740).	ed in Part XIII	atements that reports the organization's hability	Tot unicertain tax positions
BAA	TEEA3303 12/23/12	Scher	dule D (Form 990) 201

Schedule I	O (Form 990) 2012 MARYLAND HUMANITIES COUNCIL, INC	•	52-1102799	Page 4
Part XI	Reconciliation of Revenue per Audited Financial Statem	ents With Revenu	ie per Return	
1 Total	revenue, gains, and other support per audited financial statements		1 2,	015,251.
2 Amo	unts included on line 1 but not on Form 990, Part VIII, line 12			-
a Net ι	unrealized gains on investments	2 a	1	
b Dona	ated services and use of facilities	2 b	,	
c Reco	overies of prior year grants	2 c		
d Othe	r (Describe in Part XIII)	2 d		
e Add	lines 2a through 2d .		2 e	
3 Subt	ract line 2e from line 1		3 2,	015,251.
4 Amo	unts included on Form 990, Part VIII, line 12, but not on line 1.		* 1	
a Inves	stment expenses not included on Form 990, Part VIII, line 7b	4 a		
	r (Describe in Part XIII)	4 b		
	lines 4a and 4b	<u>'</u>	4 c	
	I revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2)	5 2.	015,251.
	Reconciliation of Expenses per Audited Financial Stater			010,1011
	I expenses and losses per audited financial statements	Homes With Expen		033,100.
	unts included on line 1 but not on Form 990, Part IX, line 25			0337200.
	ated services and use of facilities	2 a		
	year adjustments	2 b		
	r losses .	2 c		
	r (Describe in Part XIII)	2 d	* ***	
	lines 2a through 2d			
	ract line 2e from line 1		<u> </u>	033,100.
	unts included on Form 990, Part IX, line 25, but not on line 1:			000,200.
	stment expenses not included on Form 990, Part VIII, line 7b	4 a		
	r (Describe in Part XIII)	4 b		
c Add	lines 4a and 4b	,	4 c	
5 Tota	expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)	5 2,	033,100.
Part XIII	Supplemental Information			
	this part to provide the descriptions required for Part II, lines 3, 5, and 9 t X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also descriptions are also described by the second	complete this part to p	orovide any additional infor	
 			Schedule D (Fo	
DAA			Contequie 🗗 (FO	JJUJ 2012

Schedule D	(Form 990) 2012	MARYLAND HUMA	NITIES COUNC	CIL, INC.		52-1102799	raye :
Part XIII	Supplemental	Information (con	tınued)	=			
							
		. 					
				- 			- -
							
-		-				 -	
		_		- 			- -
					- -		-
			- -				
	-						
				- 	 -		
							
		_					
					-		
			-	-			
					_ 	_ -	
		-					
			-		-		- -
					-		
		-			_		
							
				- 			
			-				
				- -	_		-
							
							_
							
							

TEEA3305 06/08/12

Schedule **D** (Form 990) 2012

BAA

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

2012

Open to Public Inspection

Employer identification number 52-1102799

No

x Yes

MARYLAND HUMANITIES COUNCIL, INC.

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?

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	for any recipient	t that received m	ore than \$5,000. P	art II can be duplic	ated if additional	space is needec	} }
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) <u>CIVIC WORKS</u>	52-1925614	501(C)(3)	10,000.	0	OTHER	0	HUMANITIES PRO
	52-1919988	501(C)(3)	10,000.	0	OTHER	0	HUMANITIES PRO
UM	52-1054640	501(C)(3)	10.000.	0	OTHER	_ 0	HUMANITIES PRO
SER		501(C)(3)	.000,6	0.	OTHER	0	HUMANITIES PRO
(5) HARFORD_COMM_COLLEGE_FDN40_1_THOMAS_RUN_ROADBEL_AIR_MD_21015	52-1635738	501(C)(3)	7,600.	0	OTHER	0	HUMANITIES PRO
<u>om</u>	52-6051766	501(C)(3)	.000,7	0.	OTHER	0	HUMANITIES PRO
(7) PAINTED SCREEN SOCIETY OF P.O. BOX 12122	52-1436228	501(C)(3)	7,000.	0	OTHER	0	HUMANITIES PRO
(8) CHESAPEAKE BAY MARITIME M P.O. BOX 636 NAVY POINT ST MICHAEL'S MD 21633	23-7051889	501(C)(3)	6,286.	0.	0. OTHER	0	HUMANITIES PRO
2 Enter total number of section 501(c)(3) and dovernment organizations	(3) and dovernment (Organizations listed	listed in the line I table			•	đ

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table

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

TEEA3901 11/30/12

Schedule 1 (Form 990) (2012)

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

₽

Continuation Page 1

HUMANITIES PRO HUMANITIES PRO (h) Purpose of grant or assistance Employer identification number Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 52-1102799 0 0 (f) Method of valuation (book, FMV, appraisal, other) OTHER 0. OTHER 0 (e) Amount of non-cash assistance 5,200. (d) Amount of cash grant 5,980 (c) IRC section if applicable 501(C)(3) GOVT 52-6002033 52-2197313 (b) EIN MARYLAND HUMANITIES COUNCIL, (a) Name and address of organization or government FROSTBURG_STATE UNIVERSIT. CLARICE SMITH PERFORMING UNIVERSITY OF MARYLAND COLLEGE PARK MD 20742 FROSTBURG MD 21532 101 BRADDOCK ROAD Name of the organization 1

Schedule I Cont (Form 990) 2012

TEEA4001 12/10/12

Page 2 Description of non cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other STAFE SPECIFICALLY, ASSIGNED TO THAT TASK. FINAL PAYMENTS OF GRANT MONIES AWARDED FOR THE COUNCIL MAINTAINS WRITTEN PROCEDURES AND STANDARDS FOR AWARDING GRANTS AND FOR ADMINISTERING THOSE GRANTS THAT ARE AWARDED. THOSE STANDARDS REQUIRE WRITTEN FINAL PROGRAM NARRATIVE REPORTS AND A FINAL FINANCIAL REPORT THAT THE GRANTEE COMPLETES ε AND THE AUTHORIZED OFFICIAL SIGNS AND ATTESTS TO ITS COMPLETENESS AND ACCURACY. THE REPORT REQUIRES THE GRANTEE TO SHOW HOW GRANT FUNDS WERE EXPENDED AND ALSO <u>- MAJOR GRANTS (OVER \$1,200) ARE NOT MADE UNTIL ALL RPEORTS HAVE BEEN SUBMITTED</u> ALL DECLARED EXPENSES. GRANTEE REPORTING IS MONITORED CLOSELY BY THE COUNCIL REQUIRES EVIDENCE OF MATCHING CONTRIBUTIONS TO THE PROJECT FROM THE GRANTEE (e) Method of valuation (book, FMV, appraisal, other) AND OTHER SOURCES. THE GRANTEE IS REQUIRED TO MAINTAIN DOCUMENTATION FOR (d) Amount of non-cash assistance (c) Amount of cash grant MARYLAND HUMANITIES COUNCIL, INC (b) Number of recipients AND APPROVED additional information (a) Type of grant or assistance Schedule I (Form 990) (2012) Pt_I_Line_2 Pt_T_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt I Line 2 BAA Part IV Part III

~

ന

4

വ

9

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

MARYLAND HUMANITI	ES COUNCIL, INC.	52-1102799
Pt_VI,_Line_7a	THE COUNCIL'S BOARD PROVIDES THAT UP TO 6 MEMBER	RS_OR
	25% OF THE TOTAL BOARD MAY BE GUBERNATORIAL APPO	DINTEES.
	GUBERNATORIAL APPOINTMENTS ARE MADE AT THE DISCH	RETION
	OF THE GOVERNOR OF MARYLAND, UPON RECOMMENDATION	OF THE
	COUNCIL. ELECTION OF MEMBERS IS BY MAJORITY VOTE	OF THE
	COUNCIL AT ITS ANNUAL MEETING. IN THIS INSTANCE,	THE GOVERNOR
	IS CONSIDERED TO BE 'OTHER PERSONS" AS DESCRIBED	O IN THIS QUESTION.
Pt_VI,_Line_8a	THE ORGANIZATION MAINTAINS MINUTES OF THE MEETIN	īgs
Pt VI, Line 8b	THE ORGANIZATION MAINTAINS MINUTES OF THE MEETIN	rgs
Pt_VI,_Line_11b_	THE FORM 990 IS FIRST PREPARED BY THE AUDITOR, REVIEW	ED BY THE COUNCIL'S FISCAL
	OFFICER, AND THEN REVIEWED BY THE EXECUTIVE DIRE	CTOR. ONCE COMPLETED,
	THE AUDIT AND FORM 990 ARE REVIEWED BY THE EXECUTIVE	E COMMITTEE OF THE BOARD,
	AND THEN REVIEWED AND APPROVED BY THE FULL BOARD	BEFORE FILING.
Pt VI, Line 12c	ALL BOARD AND STAFF MEMBERS ARE REQUIRED TO COMPLETE A CON	FLICT OF INTEREST DISCLOSURE
	STATEMENT AT LEAST ANNUALLY OR WHEN A MATERIAL CHAN	GE OCCURS. MEMBERS OF THE
	BOARD AND ITS COMMITTEES ARE REQUIRED TO DISCLOSE CONFLIC	TS PRIOR TO DECISION-MAKING
	BY THE ENTITY. IF THE BOARD OR COMMITTEE DISCOVERS A FAIL	URE TO DISCLOSE AND TO EXCUSE
	ONESELF, THE BOARD OR COMMITTEE SHALL INVESTIGATE AND	D TAKE APPROPRIATE ACTION.
	FORM 990 IS ON OWN WEBSITE, ANOTHER'S WEBSITE, A	AND UPON REQUEST.
Pt_VI,_Line_15a_	THE EXECUTIVE COMMITTEE REVIEWS THE PERFORMANCE C	F THE EXECUTIVE DIRECTOR
Pt_VI,_Line_15b_	AND DETERMINES SALARY BASED ON JOB PERFORMANCE, TAKING	INTO ACCOUNT COMPENSATION
	LEVELS OF OTHER EXECUTIVE DIRECTORS OF NEH-FUNDED HUMA	NITIES COUNCILS THROUGHOUT
	THE COUNTRY FROM AN ANNUAL MEMBER SALARY SURVEY.	COMPENSATION FOR OTHER
	STAFF MEMBERS IS APPROVED BY THE EXECUTIVE COMMITTEE AND THE	IE BOARD AS PART OF THE ANNUAL
	BUDGET. THE EXECUTIVE DIRECTOR DETERMIES THE SALARY	Y FOR MANAGEMENT AND OTHER
	PERSONNEL BASED ON THE APPROVED BUDGET FOR THE YEAR AN	ND INDIVIDUAL PERFORMANCE.

Schedule O (Form 990 or	990-EZ) 2012	Fage 2
Name of the organization MARYLAND HUMANIT	IES COUNCIL, INC.	Employer identification number 52-1102799
	THE AUDITED FINANCIAL STATEMENTS, IN THE FORM OF T	HE 990, ARE POSTED ON THE
	COUNCIL'S WEBSITE, IN GUIDESTAR AND AVAILABLE UPON	REQUEST. AN ANNUAL REPORT
	INCLUDING FINANCIAL INFORMATION, IS ALSO POSTED	ON THE COUNCIL'S WEBSITE.
	GOVERNING DOCUMENTS, THE CONFLICT OF INTEREST P	OLICY, AND OTHER
	POLICY MANUALS ARE MADE AVAILABLE TO THE PUBLIC	UPON REQUEST.
Pt_XII, Line 2c	THE COUNCIL'S TREASURER AND EXECUTIVE COMMITTEE H.	AVE OVERSIGHT OF THE AUDIT
	OF ITS FINANCIAL STATEMENTS AND SELECTION OF TH	E INDEPENDENT AUDITOR
		
		
		

MARYLAND	HUMANITIES COUNCIL, INC.	52-1102799	1
	(Form 990), Supplemental Infor		
DEVELOPS AN		ASED PROGRAMS AS MARYLAND HISTORY DAY,	
	(Form 990), Supplemental Infor		-
services, report the each prog	as measured by expenses Secter amount of grants and allocation gram service reported.	cice accomplishments for each of its three lation 501(c)(3) and 501(c)(4) organizations and to others, the total expenses, and revenue.	are required to ue, if any, for
	· ·	LINARY - PROVIDED PUBLIC PROGRAMS THRO THER HUMANITIES DISCIPLINES, INCLUD	

Grants Of 0. DEMOCRACY THAT INVOLVED 391 PARTICIPANTS IN CIVIC ENGAGEMENT Revenue 22,247. AND DIALOGUE, SPEAKERS BUREAU, AND COMMUNICATIONS.

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

Employler Identification number

MARYLAND HUMANITIES COUNCIL, INC. 52-1102799 Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated

(A) Name and Title				(((D)	(E)	(F)
					Key employee	hat app Highest employe	Former	Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee		oloyee	Highest compensated employee		1		and related organizations
26 LINDSAY J. THOMPSON BOARD OF DIRECTORS	0.00	x						0.	0.	0
27 YOLANDA VAZQUEZ	0.00									
BOARD OF DIRECTORS	_	Х						0.	0.	0
									l	
	-									
	-									
	-									
	-									
	-									
	-									
								_		
	-									

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545-0172

2012

Attachment Sequence No 179

Identifying number

	ess or activity to which this form re		<u>. </u>				52-1102/99							
	•													
	m 990 / Form 990		Duamantu Hadau Ca	otion 170										
Paï		any listed property	Property Under Sec complete Part V before	ction 179 e vou complete F	Part I									
1	Maximum amount (see i		complete rate v bolote	you complete t	<u> </u>		1							
2	Total cost of section 179	•	service (see instruction	s)			2							
3	Threshold cost of section		•	•	ıs)		3							
4	Reduction in limitation S					-	4							
5	Dollar limitation for tax y		•		married filing	,								
	separately, see instruction			<u> </u>		<u>'</u>	5							
6	(a) Description of property		(b) Cost (business	use only)	(C) Elected cost	, «							
7 Listed property. Enter the amount from line 29														
7	Listed property Enter th													
8	Total elected cost of sec	_	8											
9	Tentative deduction Ent		9											
10	Carryover of disallowed					⊢	10							
11	Business income limitati	see instrs)	11 12											
12	Section 179 expense de													
	13 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12													
Par			ce and Other Depre		at include list	ad proporty \ (See instructions)							
				•			See instructions)							
14	4 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)													
15 Property subject to section 168(f)(1) election 15														
16	16													
Pai	Other depreciation (incluing the street of t		clude listed property)	(See instructions)		<u> </u>							
		•	Section											
17	MACRS deductions for a	issets placed in serv	ice in tax years beginni	ng before 2012			17 30,091							
18	If you are electing to gro asset accounts, check he	oup any assets place ere	ed in service during the	tax year into one	e or more ger	neral ► 🔲 🔯								
	Section	B - Assets Placed	in Service During 2012	Tax Year Using	the General [Depreciation S	ystem							
	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction							
19 a	3-year property													
t	5-year property	* * * *	1,328.	5.0 yrs	MQ	200 DB	140							
	7-year property													
	10-year property	, , , , , , , , , ,		.										
	15-year property													
	20-year property			· _										
	25-year property			25 yrs		S/L								
	Residential rental			27.5 yrs	MM	S/L								
	property			27.5 yrs	MM	S/L								
i	Nonresidential real			39 yrs	MM	S/L								
	property				MM	S/L								
		- Assets Placed in	Service During 2012 T	ax Year Using th			Svstem							
20 a	Class life	** , *				S/L								
	12-year	*****		12 yrs		S/L								
	40-year			40 yrs	MM	S/L								
Par		instructions)	<u> </u>	TO YES	I PAPE	1 5/11	_							
	Listed property. Enter ar					21								

23 For assets shown above and placed in service during the current year, enter

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions

22

to the property control of the	Form	n 4562 (2012)	MARYLAND	HUMANITI	ES COU	NCIL,	INC.							52-1	10279	9	Page 2
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (p) through (c) of Section A. Depreciation and Other Information (Caution: See the instructions for infinite for passenger automobiles) 24 a Do you have evidence to support the business/prives/investment use claimed? Ves [M] 25 th If Yet; the euderse written? Ves [M] 26 th If Yet; the euderse written? Ves [M] 26 th If Yet; the euderse written? Ves [M] 27 pay of propriy (put space of property leaves in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 Special depreciation ellewance for qualified business use (see instructions) 26 Property used 50% or less in a qualified business use 27 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 Section 8 — Information on Use of Vehicles 29 Add amounts in column (h), lines 26 finite here and on line 2, page 1 29 Section 8 — Information on Use of Vehicles 29 Add amounts in column (h), lines 26 finite here and on line 2, page 1 29 Vehicle 1 (vehicle sused by a sole property) placed in service during the section for vehicles used by a sole property, placed in service during the section for vehicles used by a sole property in place or other more than 5% owner, or related person. If you provided vehicles to your employees, this answer the questions in Section C to use if you meet an exception to completing this section for frost vehicles community miles of the property placed in exception to completing this section for frost vehicles and from the property placed in exception to completing this section for frost vehicles or use by vehicle and on integration and the property of the property placed in the place of the place than 5% owner or related person. 30 Talla times driven during the year Add intes 30 through 27 Enter here and on line 27, page 1 31 Talla community in the property of the place of	Par				oiles, cert	tain othe	r vehicle	es, cert	aın co	omp	uters, a	and prop	erty use	d for e	ntertaini	ment,	
Section A — Depreciation and Other Information (Caution: See the instructions for funds for passenger authoribles) 24 a Dougous have evaluated to support the business presentment use claimed? Yes [Mo. 26 if Yes, 1st the evaluate within?] Yes [Mo. 27 if Yes of		Note: Fo	or any vehicle fo	or which you a	are using	the stan	ndard mi	leage r	ate or	r de	ducting	lease e	xpense,	comple	ete only	24a, 24	lb,
24 a Do you have evidence to support the business/investment use claimed? Yes No (2) (3) (3) (4) (5) (4) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6												limits fo	r nasser	nger au	tomobile	25.)	
(c) (b) Day Report (cut whices first) in service (cut or instruct) (b) Day Report (cut whices first) in service) (cut or instruct) (b) Day Report (cut or instruct) (b) Day Report (cut or instruct) (cut of the base (cut of the b	24 :								_							\neg	No
Type of insperty (last whocker triat) that where the property placed in service during the tax year and property placed in service during the tax year and property used more than 50% in a qualified business use. 27 Property used more than 50% in a qualified business use. 28 Add amounts in column (ii), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (iii), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (iv), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (iv), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (iv), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (iv), lines 25 through 27 Enter here and on line 21, page 1 29 Venicle 5 29 Type through 27 Enter here and on line 21, page 1 29 Venicle 5 29 Venicle 5 29 Venicle 6 29 Venicle 6 29 Venicle 6 29 Venicle 6 20 Total business/investment lines friven communiting miles (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven to line) and interest (iven during the year (iven during to line) and iven during the year (iven during the year (i			1	Т Т	_		I							, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1.00	
25 Special depreciation allowance for qualified bissenses use (see instructions) 26 Property used more than 50% in a qualified business use (see instructions) 27 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (h), lines 25 through 27 Enter here and on line 20, page 1 29 Section 6 — Information in Use of Vehicles 29 Complete this section for vehicles used by a sole proprietor, partner, or other more than 5% owner; or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your down during the year (do not include community miles) in the year (do not include community and the year) and the year (do not include community and year) and the year (do not include community and year) and year and lines 30 through 22 18 No Yes		Type of property Date placed Business/		Cost	Cost or Ba					Recovery	M	ethod/		reciation			
used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 28 Add amounts in column (1), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (1), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (1), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (1), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (2), line 26 Enter here and on line 7, page 1 29 Add amounts in column (3), line 26 Enter here and on line 7, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (3), lines 26 Enter here and on line 7, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 7, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (3), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (4), lines 25 through 27 Enter here and on line 21, page 1 20 Yehicle 10, yehicle 20, yehicle 30, yehicle 4 20 Yehicle 10, yehicle 20, yehicle 30, yehicle 4 20 Yehicle 10, yehicle 20, yehicle 30, yehicle 4 20 Yehicle 20, yehicle 30, yehicle 50, yehi		· · · · · · · · · · · · · · · · · · ·	<u> </u>			use only)							. 1				cost
27 Property used more than 50% in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Section 8 – Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees and through 32 Total other personal (noncommuting) miles driven during the year (40 not include commuting meets) 37 Total miles driven during the year Add lines 30 through 32 Total other personal use during the year (40 not include commuting) miles driven during the year Add lines 30 through 32 Total other personal use of vehicle available for personal use? 38 Was the vehicle available for personal use of vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owner or related persons. See the instructions for vehicles used by composed of the properties of the properties of the properties, directors, or 1% or more corners 39 Do you maintain a written policy statement that prohibits personal use of vehicles, including commuting, by your employees? 39 Do you maintain a written policy statement that prohibits personal use of vehicles, in	25							service	durii	ng ti	he tax	year and	25				
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Section B — Information on Use of Vehicles Complete this section for vehicles used by a sole propinetor, partner, or other immore than 5% owner; or related person. If you grounded vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles or your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles owner under the personal communiting miles driven during the year (do not include commuting miles driven and include commuting miles driven and include commuting driven during the year Add lines 30 through 32 1 Total observed in the personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Is another vehicle available for personal use during off-duty hours? 37 Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 38 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information received? 40 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information for the your employees? 41 Do you meet the requirements concerning qualified automabile demonstration use? (See instructions.) 42 Amortization of costs that begins during your 2012 tax year (see instructions)	26						tions/										
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Section B — Information on Use of Vehicles Complete this section for vehicles used by a sole propinetor, partner, or other immore than 5% owner; or related person. If you grounded vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles or your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles owner under the personal communiting miles driven during the year (do not include commuting miles driven and include commuting miles driven and include commuting driven during the year Add lines 30 through 32 1 Total observed in the personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Is another vehicle available for personal use during off-duty hours? 37 Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 38 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information received? 40 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information for the your employees? 41 Do you meet the requirements concerning qualified automabile demonstration use? (See instructions.) 42 Amortization of costs that begins during your 2012 tax year (see instructions)					_		ļ										_
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Section B — Information on Use of Vehicles Complete this section for vehicles used by a sole propinetor, partner, or other immore than 5% owner; or related person. If you grounded vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles or your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles owner under the personal communiting miles driven during the year (do not include commuting miles driven and include commuting miles driven and include commuting driven during the year Add lines 30 through 32 1 Total observed in the personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Is another vehicle available for personal use during off-duty hours? 37 Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 38 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information received? 40 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information for the your employees? 41 Do you meet the requirements concerning qualified automabile demonstration use? (See instructions.) 42 Amortization of costs that begins during your 2012 tax year (see instructions)						_	-										
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Section B — Information on Use of Vehicles Complete this section for vehicles used by a sole propinetor, partner, or other immore than 5% owner; or related person. If you grounded vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles or your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles owner under the personal communiting miles driven during the year (do not include commuting miles driven and include commuting miles driven and include commuting driven during the year Add lines 30 through 32 1 Total observed in the personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Is another vehicle available for personal use during off-duty hours? 37 Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 38 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information received? 40 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners and teach the information for the your employees? 41 Do you meet the requirements concerning qualified automabile demonstration use? (See instructions.) 42 Amortization of costs that begins during your 2012 tax year (see instructions)	27	Property used !	J	I Landlified bus	siness us	e	<u> </u>								*		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (h), lines 26 Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 29 Add amounts in column (h), line 26 Enter here and on line 7, page 1 20 Add amounts in column (h), line 26 Enter here and on line 7, page 1 20 Complete shis section for vehicles 1 20 Add amounts in column (h), line 26 Enter here and on line 7, page 1 20 Add amounts in column (h), line 26 Enter here and on line 7, page 1 20 Add amounts in column (h), line 26 Enter here and on line 7, page 1 20 Add amounts in column (h), line 26 Enter here and on line 7, or column (h) this section for related person. If you provide whicles 1 20 Add amounts in column (h), line 26 Enter here and on line 7, page 1 21 Add amounts in column (h), line 26 Enter here and on line 7, page 1 22 Add amounts in column (h), line 26 Enter here and on line 7, page 1 23 Total other personal (honcommuting) 24 Amortization of costs that begin before your																	, ,
Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles owner of the year (40 not include commuting miles) 30 Total business/investment miles driven during the year (40 not include commuting miles) 31 Total commuting miles driven during the year Add lines 30 through 32 Yes No							Ţ										
Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles owner of the year (40 not include commuting miles) 30 Total business/investment miles driven during the year (40 not include commuting miles) 31 Total commuting miles driven during the year Add lines 30 through 32 Yes No							<u> </u>						100			_	
Section B – Information on Use of Vehicles Complete this section for vehicles used by a sole propretor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles and the property of the propert								ine 21,	page	1			28		29	*	*
to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year and lines 30 through 32 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use during off-duly hours? 35 Was the vehicle available for personal use during off-duly hours? 36 Is another vehicle available for personal use? 36 Is another vehicle available for personal use? 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicle seed by corporate officers, directors, or 1% or more owners? 39 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles to your employees, obtain information from your employees about the use of the vehicle information received? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles of your answer to 37, 33, 39, 40, or 41 is 7'es, do not complete Section B for the covered vehicles 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that begins during your 2012 tax year 44 Amortization of costs that begins during your 2012 tax year		Add amounts ii	i column (i), iiii	e 20 Enter n				ı on Us	e of V	/ehi	cles				1 20	<u> </u>	
Total business/investment miles driven during the year (do not include commuting miles) Total commuting miles) Total other personal (noncommuting) miles driven during the year at 17 total other personal (noncommuting) miles driven Total miles driven during the year Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Was the vehicle available for personal use during off-duty hours? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) To by your maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Part VI Amortization Qualified automobile demonstration use? (See instructions) Qualified automobile demonstration use? (See instructions) Qualified automobile demonstration use? (See instructions) Qualified automobile demonstration use? Qualified automobile demonstration use? Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobile demonstration Qualified automobil	Com	plete this sectio	n for vehicles u	sed by a sole	proprieto	or, partn	er, or ot	her 'mo	re tha	an 5	% own	er,' or r	elated pe	erson. I	f you pr	ovided	vehicles
Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 during the year (do not include commuting miles) 31 Total other personal (noncommuting) miles driven during the year Add Ines 30 through 32 Intervention 33 Total other personal use during the year Add Ines 30 through 32 Intervention 33 Total other personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Is another vehicle available for personal use? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% cowners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that begins during your 2012 tax year (see instructions)	to yo	our employees, 1	first answer the	questions in	Section C	to see	ir you m	ieet an	excep	Otior	1 to cor	npieting I	this sec	tion for	those v		
Total commuting miles of the personal (noncommuting) miles driven during the year Add lines 30 through 32 Total other personal (noncommuting) miles driven during the year Add lines 30 through 32 Yes No Y	30									(c) Vehicle 3						(Veh	f) icle 6
Total commuting miles driven during the year Total other personal (noncommuting) miles driven during the year Add lines 30 through 32 Yes No						vermene i vermene z											
Total miles driven during the year Add lines 30 through 32 Yes No Yes Yes No Yes No Yes Ye	31	31 Total commuting miles driven during the year															
Total miles driven during the year Add lines 30 through 32 Yes No Yes N	32	•															
Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owner or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization Qa	33 Total miles driven during the year Add							-									
Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) 42 Amortization (a) (b) (c) (d) (d) (e) (mortization period or period or period or period or percentage 43 Amortization of costs that begins during your 2012 tax year (see instructions)		lines 30 throug	ıh 32		Vac	No	Vac	No	V.	_	No	Voc	No.	Voc	No	Voc	No
during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year	34	Was the vehicl	e available for i	nersonal use	162	NO	165	110	16	3	140	163	110	163	140	163	140
Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (b)		during off-duty	hours?				ļ										
Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (b)	35	35 Was the vehicle used primarily by a more than 5% owner or related person?															
Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs Date amortization begins Amortization of costs that begins during your 2012 tax year (see instructions) 42 Amortization of costs that began before your 2012 tax year		Is another veh	_														
Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs (b) Date amortization begins (c) Amortization period or percentage 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year		personal use?	Section		s for Fm	nlovers '	Who Pr	ovide V	ehicle	es fo	or Use	by Their	r Employ	ees	<u> </u>		<u> </u>
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs (b) Date amortization begins (c) Amortizable section Amortization period or percentage 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year	Ans	wer these questi	ons to determin	ne if you meet											who are	not mo	re than
Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization	5%	owners or relate	d persons (see	instructions)	_		-									T	T
Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization	37	Do you maintai	ın a written poli	cy statement	that proh	ıbıts all p	personal	use of	vehic	cles,	, ınclud	ing com	muting,			Yes_	No
memployees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs (b) Date amortization begins (c) Amortizable amount Code Amortization period or percentage 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year	30			cv statement	that prob	ihits ner	sonal us	e of vel	hicles	: ex	cent co	ommutin	ıa by you	ır			
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs (b) Date amortization Amortization Degins Amortization Amortization period or percentage 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year	30	employees? Se	ee the instruction	ons for vehicle	s used by	corpora	ate offic	ers, dire	ectors	, or	1% or	more o	wners				
vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs (b) Date amortization begins Amortization begins Amortization period or percentage 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year	39																
Anortization of costs that begins during your 2012 tax year Amortization of costs that began before your 2012 tax year Amortization use? (See instructions.) (a) Description of costs that began before your 2012 tax year (b) Date amortization begins (c) Amortization of costs that began before your 2012 tax year (d) (e) Amortization period or percentage (f) Amortization period or percentage (f) Amortization of costs that began before your 2012 tax year (see instructions)	40	Do you provide vehicles, and r	e more than five etain the inform	evehicles to y nation receive	our emplo d?	oyees, o	btain inf	formatio	n troi	m y	our em	ployees	about th	e use c	of the		
Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization	41	Do vou meet th	ne requirements	concernina d	ualified a	utomobi	ile demo	nstratio	n use	e? (See ins	struction	s.)				
(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code Section Amortization period or percentage 42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year		Note: If your a	nswer to 37, 38	, 39, 40, or 4	l is 'Yes,'	do not d	complet	e Sectio	on B f	for t	he cove	ered veh	ncles			. 🐠	. * *
Description of costs Date amortization begins Date amortization begins Amortization period or percentage Amortization of costs that begins during your 2012 tax year (see instructions) Amortization of costs that began before your 2012 tax year 43 Amortization of costs that began before your 2012 tax year	Pa	<u>rt VI Amort</u>	ization		т –	4.				_				·	1		
42 Amortization of costs that begins during your 2012 tax year (see instructions) 43 Amortization of costs that began before your 2012 tax year 44 Amortization of costs that began before your 2012 tax year		De			1 .	mortization		Amortizab	le		С	ode	Amor	tization		Amortizatio	
43 Amortization of costs that began before your 2012 tax year 43					6	egins		amount			se	ction				for this ye	ar
	42	Amortization o	f costs that beg	jins during yo	ur 2012 ta	ax year (see inst	ructions	5)								
								_		\perp							
		A mag with = - 4	of 00045 45 54 55 5	an hafara	Ur 2012 +		_ _							42	-		
44 Total. Add amounts in column (f) See the instructions for where to report 44	43 44			-		-	here to	report						43			