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**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

AF	or the	2013 Calendar year, or tax year beginning JUL 1 2013 and	enaing J	UN 30, 2014	
B Ch ap	eck if plicable	C Name of organization		D Employer identific	ation number
	Addres change	TOURISM COUNCIL OF FREDERICK COUNTY INC.			
	Name change	Doing Business As		52-1057	866
	Initial return		Room/suite	E Telephone number	
	Termin	,		301-600	-4043
	Jated Amend Ireturn			G Gross receipts \$	1,954,860.
_	Applica			H(a) Is this a group ref	
	ltion pendin	F Name and address of principal officer: JOHN HEALY		for subordinates?	
		·		i	
		SAME AS C ABOVE		H(b) Are all subordinates in	
		mpt status 501(c)(3) _x 501(c) ( 6 ) ◀ (insert no.) 4947(a)(1) i	or <u>5</u> 27	i -	ist. (see instructions)
		e: ► WWW.FREDERICKTOURISM.ORG	<del></del>	H(c) Group exemption	<del></del>
		organization: x Corporation Trust Association Other	L Year	of formation: 1976 M	State of legal domicile; MD
Pa		Summary			
g	1 1	Briefly describe the organization's mission or most significant activities: PROMOT:	ION OF TO	OURISM IN	<del></del>
Activities & Governance	3	REDERICK COUNTY			
Ē	2	Check this box 🕨 🔛 if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as:	sets.
ð	3	Number of voting members of the governing body (Part VI, line 1a)		3	22
9	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	22
SS	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	14
. ₹	6	Fotal number of volunteers (estimate if necessary)		6	22
턍	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	19,250.
<   <		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
			i	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		1,973,466.	1,856,057.
בי		Program service revenue (Part VIII, line 2g)		1,373,400.	
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	-		67,746.
. Be				7,855.	1,456.
,		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	· -	21 071	6 184.
Expenses		Total revenue _add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,002,392.	1,931,443.
Š		Grants and similar amounts paid (Part X, column (A), lines 1-3)		59,455.	53,535.
2	14	Benefits paid to ortor members (Part IX, column (A), line 4)		<u> </u>	<u> </u>
es	15	Salaries, other compensation, employed benefits (Part IX, column (A), lines 5-10)	<u> </u>	662,637.	643,952.
ens		Professional fundraising fees (Part IX, column (A) line 11e)	· .	0.	0.
ă		Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	17	Other expenses (Part 🗱 collector (A), lines 11a-11d, 11f-24e)		1,487,775.	1,228,282.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u></u>	2 209 867.	1,925,769,
	19_	Revenue less expenses Subtract line 18 from line 12		<207,475.	> 5,674.
Ses			В	eginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		3,415,278.	3,342,909.
t As	21 .	Total liabilities (Part X, line 26)		2 437 152.	2 359 109
왕들	22_	Net assets or fund balances Subtract line 21 from line 20		978 126	983_800.
	art II	Signature Block	-		
Unde	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedule	es and stater	nents, and to the best of m	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepare	er has any knowledge.	-
_		A fiereles	<u>'</u>	5/14/	2015
Sign	n	Signature of officer		Date	
Her		JOHN FIESELER EXECUTIVE DIRECTOR			
1161		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid			ļ	-1-1.c	
		JEREMY DAVIS		<del></del>	
Prep		Firm's name MCGLADREY LLP		Firm's EIN	42-0714325
USE	Only	Firm's address 1861 INTERNATIONAL DRIVE, SUITE 400			
		MCLEAN, VA 22102		Phone no.703	
		RS discuss this return with the preparer shown above? (see instructions)		<del> </del>	Yes No
3320	01 10-2	9-13 LHA For Paperwork Reduction Act Notice, see the separate instruction	ions.		Form <b>990</b> (2013)

<u>F@rm</u>	990 (2013) TOURISM COUNCIL OF FREDERICK COUNTY INC.	52-1057866		Page 2
Pai	Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			
1	Briefly describe the organization's mission.			
	THE TOURISM COUNCIL OF FREDERICK COUNTY IS A PUBLIC-PRIVATE			
	PARTNERSHIP DEDICATED TO ENHANCING THE ECONOMIC BENEFIT OF TOURISM FOR			
	FREDERICK COUNTY'S BUSINESSES, ATTRACTIONS, LOCAL GOVERNMENTS, AND			
	RESIDENTS.			
2	Did the organization undertake any significant program services during the year which were not listed on	_		
	the prior Form 990 or 990-EZ?		Yes	x_ No
	If "Yes," describe these new services on Schedule O.	_		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Į	Yes	x_ No
	If "Yes," describe these changes on Schedule O			
4	Describe the organization's program service accomplishments for each of its three largest program services, as	-	-	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total ex	penses, a	nd
	revenue, if any, for each program service reported.			
4a	(Code) (Expenses \$) (Reven	ue \$		)
	VISITOR SERVICES INCLUDING OPERATION OF FREDERICK VISITOR CENTER;			
	TOURISM PRODUCT DEVELOPMENT INCLUDING COORDINATION OF FREDERICK			_
	HISTORIC SITES CONSORTIUM; DESTINATION MARKETING TO INDIVIDUALS AND			
	GROUPS; TRIPP PROGRAM (TOURISM RESOURCES INVESTED IN PROMOTION AND			
	PRODUCT.) THE TOURISM COUNCIL IS GOVERNED BY A VOLUNTEER BOARD OF			
	DIRECTORS AND ALSO HOLDS SEMI-ANNUAL MEMBERSHIP EVENTS INCLUDING THE			
	ANNUAL MEETING IN OCTOBER.			
		<del></del>		
	/o. t. \/ /o \			
4b	(Code) (Expenses \$	ue \$		,
		<del></del>		
			<del></del>	
		<del></del>		<del></del>
4c	(Code) (Expenses \$	ue \$		)
		·· <u> </u>		<u> </u>
		· <u></u>		
		<del></del>		
4d	Other program services (Describe in Schedule O.)			
	(Expenses \$ including grants of \$ ) (Revenue \$		)	
4e	Total program service expenses			

	In the evaporation described in section 501(a)(2) or 4047(a)(1) (a) best here a secret for a data and		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	_		
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		Х	<del>                                     </del>
	public office? If "Yes," complete Schedule C, Part I	3		х
4	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		
5	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	5	x	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		_	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	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		x
10	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	ļ	_х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		ļ	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	Х	<del> </del>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1 10	<del></del>	Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d				<del></del> -
	Part X, line 167 If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	<del></del>
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	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	_x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
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 Schooling F. Bode Land IV.			
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		X
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	45		l
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u>_x</u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		· ·
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		_x
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		<del>                                     </del>	<b></b>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<del></del>
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

Form 990 (2013) TOURISM COUNCIL OF FREDERICK COUNTY INC.
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		res	140
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or 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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		x
b	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	_ :	L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a		28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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			
31	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		_ X
72	Schedule N, Part II	32		u u
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
	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, Part II, III, or IV, and	- 30		_
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "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		
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		
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 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	_х_	
		Form	990	(2013)

## Form 990 (2013) Part V Sta Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<b>1a</b> 9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming		ĺ	
	(gambling) winnings to prize winners?	1 1	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 14			
b		•	2b	Х	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	3)			
3a	3 ,	•	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	-			
<b>L</b>	financial account in a foreign country (such as a bank account, securities account, or other financial	accounty	4a_		Х
D	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 A	\			
5a		Accounts			37
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?	ction?	5a 5b		X X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	Chorr	5c		Α
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit	30		
	any contributions that were not tax deductible as charitable contributions?	io organization sonot	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or aifts			- 43
_	were not tax deductible?	g	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	•	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di				
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter	100	1		
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	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.		]		
а	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			
¢	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		х
_ b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	e O	14b		<u> </u>
			Form	990	(2013)

Form 990 (2013) TOURISM COUNCIL OF FREDERICK COUNTY INC. Part VI Governance, Management, and Disclosure For each 'Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Х 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Х Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 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 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 Х Did the organization have a written document retention and destruction policy? 14 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website Other (explain in Schedule O) \_\_\_ Own website Lx\_ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization

JOANNE BAUM - 301-600-4043

151 S. EAST STREET FREDERICK MD 21701

Form	agan	(2013)	
• • • • • • • • • • • • • • • • • • •	330	וכועבו	

TOURISM COUNCIL OF FREDERICK COUNTY INC.

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average			(C	C) itior	1		( <b>D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week	offi	, unle cer ar					from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) SEAN QUILL PRESIDENT	2.50	x		x				0.		
(2) DAVID ZIEDELIS	2,50	^		<u> </u>	-		$\vdash$		0.	0.
1ST VICE PRESIDENT	2.30	x	İ	x				0.	0.	
(3) RANDY JONES	2.50	<u> </u>		^		<del>  -</del>	╁	1	<u> </u>	
2ND VICE PRESIDENT	2,50	x		x	ĺ			0.	0.	•
(4) MICHAEL HENNINGSEN	2.50	^		^			<del>  -</del>	·	<u> </u>	0.
TREASURER	2.50	x		x				0.	0.	0
(5) LANE FIELDS	2,50			Α.			<del>                                     </del>		υ.	0.
SECRETARY	2,30	x		x				0.	0.	0.
(6) JOHN HEALEY	2.50							<u> </u>	<b>.</b>	
PAST PRESIDENT		x						0.	0.	0.
(7) BILLY SHREVE	2.50									
DIRECTOR		x						0.	0.	0.
(8) RANDY MCCLEMENT	2,50									
DIRECTOR		х						0.	0.	0.
(9) WALT STULL	2.50						Γ_			
DIRECTOR		х	<u> </u>				L	0.	0.	0,
(10) KEVIN BRANDT	2.50					ł				
DIRECTOR		х		_				0.	0.	0.
(11) KARA NORMAN	2.50						l			•
DIRECTOR		х		ļ			_	0.	0.	0.
(12) ROBERT BLACK	2.50						l			
DIRECTOR		х			<u> </u>	_	L	0.	0.	0.
(13) ROBERT BRENEGEN	2.50									
DIRECTOR		х			ļ		<u> </u>	0.	O.	0.
(14) SHUAN BUTCHER	2.50									
DIRECTOR	<b></b>	х					<b> </b>	0.	0.	0.
(15) YOLANDA GAINEY	2.50								:	
DIRECTOR		х			_	_	ļ	0.	0.	0.
(16) MIKE IRONS	2.50									
DIRECTOR	<u> </u>	Х		<u> </u>			┞-	0.	0.	<u> </u>
(17) MICHAEL KIDDER	2.50									
DIRECTOR	<u> </u>	<u> </u>	L	L	L_	<u> </u>	<u> </u>	0.	0.	Form <b>990</b> (2013)

3	Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on		
	line 1a? If "Yes," complete Schedule J for such individual	3_	 X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization		
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	х
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services		
	rendered to the organization? If "Yes," complete Schedule J for such person	5	х

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

(A) Name and business address	(B) Description of services	(C) Compensation
JEAN PETERSON DESIGN, 6 N EAST STREET		
SUITE 200, FREDERICK, MD 21701	PRINTING AND AD PLACEMENTS	344,064
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	

Form 990 (2013)

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

TOURISM COUNCIL OF FREDERICK COUNTY INC.

		Check if Schedule O conf	tains a respons	e or note to any line	e 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 - 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b		1b					
A, G	С	Fundraising events	1c					
Gift	d	Related organizations	1d					
iğ,	е	Government grants (contribut	tions) 1e	1,547,375.		İ		
tior S	f	All other contributions, gifts, gran	its, and					
혈粪		similar amounts not included abo	ove 1f	308,682.				
d d	g	Noncash contributions included in lines	s 1a-1f \$					
<u>8 0</u>	h	Total. Add lines 1a-1f		<b>•</b>	1,856,057.			
				Business Code				-
<u>e</u>	2 a	MEMBERSHIP DUES		900099	48,496.	48,496.		
e K	b	PUBLICATIONS		541800	19,250.	-	19,250.	
Program Service Revenue	C	i , <u> </u>						
Rev	d							
Š.	е							
а.	f	All other program service reve	enue					
		Total. Add lines 2a-2f	<del></del>	<b>•</b>	67,746.			
	3	Investment income (including	i dividends, inte	rest, and				
		other similar amounts)			1,456.			1,456.
	4	Income from investment of ta	x-exempt bond	proceeds				
	5	Royalties		1 () D				· · · · · · · · · · · · · · · · · · ·
	<b>.</b>	Cross rents	(ı) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)	L	<b>_</b>				
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(II) Other				
	<i>1</i> a	assets other than inventory	(i) Securities	(ii) Other				
	h	Less: cost or other basis						
		and sales expenses						
	_	Gain or (loss)	-					
		Net gain or (loss)	L.,					
•		Gross income from fundraisin	a events (not					
nue	• •	including \$	•					
Other Reven		contributions reported on line						
r R		Part IV, line 18	•	a				
the	b	Less: direct expenses	i					
0		Net income or (loss) from fund	draising events	<b>•</b>				
		Gross income from gaming ad	_					
ĺ		Part IV, line 19		a				
	b	Less: direct expenses	ı	,				
	С	Net income or (loss) from gan	ning activities	<b>•</b>				
	10 a	Gross sales of inventory, less	returns					
		and allowances		29,601.				
	b	Less cost of goods sold	<u>.</u> 1	23,417.				
ļ	с	Net income or (loss) from sale	s of inventory	▶_	6 184	6_184		
		Miscellaneous Revenu	ie	Business Code				
	11 a							
	b							
	C							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>&gt;</b>				
33300	12_	Total revenue. See instructions.		<u> </u>	1 931 443	54 680	19 250	1 456.
33200 10-29	13							Form <b>990</b> (2013)

Form 990 (2013) TOURISM COUNCIL OF FREDERICK COUNTY INC.

Part IX Statement of Functional Expenses

Seci	Charle of School Charles of School			ompiete column (A).	
	Check if Schedule O contains a respon	(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraisıng expenses
1	Grants and other assistance to governments and		ехрепзез	general expenses	expenses
•	organizations in the United States. See Part IV, line 21	53,535.		Ì	
2	Grants and other assistance to individuals in		<del></del>		
2	the United States. See Part IV, line 22				
•	· .		<del></del>		
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,				
5	trustees, and key employees	120 122			
6	Compensation not included above, to disqualified	138,123.			
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	410 F10			_
	Pension plan accruals and contributions (include	419,518.			
8	section 401(k) and 403(b) employer contributions)	0 710			
9	Other employee benefits	8,718. 36,836.			
10	Payroll taxes	7			
11	Fees for services (non-employees)	40,757.	•		
''a					
b		283.			· · · · · · · · · · · · · · · · · · ·
	Accounting	4,650.		<del></del>	:
	Lobbying	4,050.	<del></del>		·
_	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				12
q			<del></del>		
9	column (A) amount, list line 11g expenses on Sch O.)	365,996			
12	Advertising and promotion	70,834.			
13	Office expenses	77,655.			
14	Information technology	5,572.	- · <u></u>		
15	Royalties	3,3,2,	<del></del>		<u> </u>
16	Occupancy		<del></del>		**-
17	Travel	7,826.	- ,		<del></del>
18	Payments of travel or entertainment expenses	7,025,			
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,935.			<del></del>
20	Interest	80,171.			
21	Payments to affiliates		·		
22	Depreciation, depletion, and amortization	152,633.			
23	Insurance	12,574.			
24	Other expenses Itemize expenses not covered		<del></del>		
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	SCENIC BYWAY	74,219.			
b	REGIONAL PARTNERSHIP AC	67,659.			
С	HCWHA OPERATIONS	66,171.			
d	PRINTING & PUBLICATIONS	39,644.			
e	All other expenses	190,460.			
25	Total functional expenses. Add lines 1 through 24e	1,925,769.			-
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)			1	

Form 990 (2013)
Part X Balance Sheet

Pal	T.X	Charlet School Oceaning a response or no	to to = :	w line in this Dart Y			<del></del>
		Check if Schedule O contains a response or no	te to ar	y line in this Part X	(A)	<u> </u>	. (B)
_					Beginning of year		End of year
	1	Cash - non-interest-bearing			92,136.	1	76,679.
	2	Savings and temporary cash investments			273,581.	2	255,832.
	3	Pledges and grants receivable, net	197,627.	3	313,414.		
	4	Accounts receivable, net			28,604.	4	25,716.
	5	Loans and other receivables from current and for	ormer c	fficers, directors,	<del>-</del>		
		trustees, key employees, and highest compens	ated er	nployees Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual	ified pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section	n 4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
rs.		employees' beneficiary organizations (see instr)		· · · · ·		6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use		·	8,435.	8	7,733.
	9	Prepaid expenses and deferred charges		·	8,772.	9	9,236.
	10a	Land, buildings, and equipment cost or other					
		basis. Complete Part VI of Schedule D	10a	3,159,756.			
	b	Less: accumulated depreciation	10b	505,457.	2,806,123.	10c	2,654,299.
	11	Investments - publicly traded securities				11	2,402,233,
	12	Investments - other securities See Part IV, line	11	•		12	
	13	Investments · program-related See Part IV, line		•		13	
	14	Intangible assets		•		14	<del></del>
	15	Other assets See Part IV, line 11			-, - <del>, -, -, -</del>	15	
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	3 415 278.	16	3,342,909.
	17	Accounts payable and accrued expenses			146,421.	17	209 504.
	18	Grants payable		37,219.	18	0.	
	19	Deferred revenue			35,373.	19	31,376.
	20	Tax-exempt bond liabilities	·		20		
	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to current and forme	r office	s, directors, trustees,			· · · · · · · · · · · · · · · · · · ·
ij	ļ	key employees, highest compensated employee	es, and	disqualified persons			
Liabilities	ľ	Complete Part II of Schedule L				22	
<b>=</b>	23	Secured mortgages and notes payable to unrela	ated th	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	s 17·24	Complete Part X of			
		Schedule D			2,218,139,	25	2.118.229.
	26	Total liabilities. Add lines 17 through 25			2,437,152,	26	2 359 109
		Organizations that follow SFAS 117 (ASC 958	3), ched	k here x and			
S		complete lines 27 through 29, and lines 33 ar					
nce	27	Unrestricted net assets			978 126.	27	983,800.
ala	28	Temporarily restricted net assets		ļ		28	
g p	29	Permanently restricted net assets		29			
Fund Balances		Organizations that do not follow SFAS 117 (A	SC 95	3), check here 🕨 🔲			
or F		and complete lines 30 through 34.					
its	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or ed		nt fund	<del></del>	31	
Net Assets	32	Retained earnings, endowment, accumulated in		<u> </u>	<del></del>	32	
ž	33	Total net assets or fund balances	,		978 126.	33	983,800.
	34	Total liabilities and net assets/fund balances		F	3 415 278.	34	3 342 909.

arm		2-1057866		Pag	e 12
Pai	t XI Reconciliation of Net Assets			_	
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	931	<u>443</u> .
2		2	1	925	<u>769.</u>
3	Revenue less expenses Subtract line 2 from line 1	3		5_	674.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		978	126.
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	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
		10		983.	800.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				لعا
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of	n a	1		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	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 separate by	asıs,			
	consolidated basis, or both			Ì	
	x Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	udıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	ule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	e Audıt			
	Act and OMB Circular A-133?		3a		х
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2013)

#### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

➤ See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

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 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III		<del></del>	
Nan	ne of organization			Empl	loyer identification number
D	art I-A Complete if the org	UNCIL OF FREDERICK COUNT Danization is exempt und	Y INC.	Varia a castion 507 a	52-1057866
	irt i-A Complete ii the or	gamzation is exempt uni	uer section 50 f(c	or is a section 527 o	rganization.
4	Provide a description of the organi	zation's direct and indirect politi	cal campaign activities	on Bort IV	
	Political expenditures	eation's direct and indirect point	car campaign activities		
	Volunteer hours			•	
•					
Pa	rt I-B Complete if the or	ganization is exempt und	der section 501(c	)(3).	
1	Enter the amount of any excise tax		<u>-</u>	▶\$	
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	i5 <b>▶</b> \$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				. Yes No
	If "Yes," describe in Part IV				
Pa	irt I-C Complete if the org	ganization is exempt une	der section 501(c	), except section 501(	c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for	section 527	
	exempt function activities			▶\$	
3	Total exempt function expenditures	Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	line 17b			▶\$	
	Did the filing organization file Form				
5	Enter the names, addresses and er made payments For each organiza				
	contributions received that were pr				
	political action committee (PAC) If				ic segregated fand of a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Hamo	(5) / (3)	(C) LIIV	filing organization's	contributions received and
				funds If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0-
			_		
	<del> </del>				
				1	1

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

Sonedule C (Form 990 or 990 EZ) 2013 r	rourism anizatio	COUNCIL On is exe	of frederick coumpt under section	NTY_INC. on 501(c)(3) and file	52-10 ed Form 5768	57866	Page 2
(election under sec			•				
A Check ► I If the filing organizat	ion belon	gs to an affi	liated group (and list	in Part IV each affiliated	group member's nar	ne, address	s, EIN,
expenses, and shar					•	•	
B Check > if the filing organizat	ion check	ed box A a	nd "limited control" pr	ovisions apply			
Limit	s on Lob	bying Expe			(a) Filing organization's totals	1	ited group tals
1a Total lobbying expenditures to influ	ence nub	lic opinion (	grass roots lobbying)	<del>_</del>		<del> </del>	
<b>b</b> Total lobbying expenditures to influ	-					<del>                                     </del>	
c Total lobbying expenditures (add lii		•	ay (all oot lobby ling)	ĺ			
d Other exempt purpose expenditure		<b>-</b>	•	٠ ٢	<del></del>		
e Total exempt purpose expenditures		e 1c and 1c	4/				
f Lobbying nontaxable amount Ente	•		•	th columns		+	
					<del></del>	+	
If the amount on line 1e, column (a) of	(D) IS:		bying nontaxable an				
Not over \$500,000		_	the amount on line 16				
Over \$500,000 but not over \$1,000			00 plus 15% of the ex				
Over \$1,000,000 but not over \$1,5				cess over \$1,000,000.			
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exc	ess over \$1,500,000.			
Over \$17,000,000		\$1,000,	000				
			<del></del>		·····		
g Grassroots nontaxable amount (en		-		· · ·	<del></del>		
h Subtract line 1g from line 1a. If zero				ļ		+	
i Subtract line 1f from line 1c. If zero	•			L			
j If there is an amount other than zer	o on eithe	er line 1h or	line 1i, did the organi	zation file Form 4720		_	
reporting section 4911 tax for this	/ear?					Yes	No_
		at made a s		r Section 501(h) on do not have to comp es 2a through 2f on pa			
	Lobb	oying Expe	nditures During 4-Ye	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a)	2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e)	Total
2a Lobbying nontaxable amount							
b Lobbying ceiling amount							
(150% of line 2a, column(e))						1	
						<del>                                     </del>	
c Total lobbying expenditures						_	
d Grassroots nontaxable amount							
e Grassroots ceiling amount						1	
(150% of line 2d, column (e))							
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						+	
f Grassroots lobbying expenditures							

Sohedule C (Form 990 or 990-EZ) 2013 TOURISM COUNCIL OF FREDERICK COUNTY INC. 52-1057866

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)).

r each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(	(a)		(1	<u>b)</u>
the lobbying activity.	Yes	N.	0	Am	ount
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			Ì		
or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?		<u> </u>			
d Mailings to members, legislators, or the public?		<u> </u>			
e Publications, or published or broadcast statements?	_				
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?		<u> </u>			
j Total. Add lines 1c through 1i	ļ	<u> </u>			
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ			
b if "Yes," enter the amount of any tax incurred under section 4912					
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?		<u> </u>			
art III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c	)(5), c	or se	ction	
501(c)(6).					
		_		Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		.	1	х	<u> </u>
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Department of the Treasury

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection

Internal Revenue Service Name of the organization **Employer identification number** TOURISM COUNCIL OF FREDERICK COUNTY INC. 52-1057866 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 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 2 day of the tax year. Held at the End of the Tax Year Total number of conservation easements Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 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? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Assets included in Form 990, Part X

Soned Part	tule D (Form 990) 2013 TOURISM COU	NCIL OF FREDERICK		easures or O	ther Sin	52-10578		Page 2
ь	Using the organization's acquisition, accession							
	(check all that apply)	511, 4110 011101 10001 40,	oricon uriy or the	Tollowing that the	u sigiiiiou	455 61 115 1	, one other it	CITIS
а	Public exhibition	d l	Loan or exc	hange programs				
b	Scholarly research	e	Other	go p. og				
c	Preservation for future generations							
_	Provide a description of the organization's co	ollections and explain h	ow they further t	he organization's	exempt pu	irpose in Part	XIII	
	During the year, did the organization solicit of	· ·	•	•				
	to be sold to raise funds rather than to be ma						] Yes [	No
	t IV Escrow and Custodial Arran				" to Form 9	90, Part IV, I	ne 9, or	
L	reported an amount on Form 990, Par	= '	Ŭ					
1a	Is the organization an agent, trustee, custodi	an or other intermediar	y for contribution	s or other assets	not includ	ed		
	on Form 990, Part X?		•				] Yes [	No No
ь	If "Yes," explain the arrangement in Part XIII	and complete the follow	wing table.					
	•	·	_				Amount	
С	Beginning balance				10	c		
d	Additions during the year				1	d _		
е	Distributions during the year		_		1	e		
f	Ending balance				1	f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line 21	γ .	-			Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the expla	anation has been	provided in Part	XIII			
Par	t V Endowment Funds. Complete i	f the organization answ	vered "Yes" to Fo	rm 990, Part IV, li	ne 10			
		(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Thr	ee years back	(e) Four ye	ars back
1a	Beginning of year balance		<del></del>					
b	Contributions							
C	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities			Į				
	and programs							
f	Administrative expenses							
g	End of year balance		<del></del>			·	l	
2	Provide the estimated percentage of the cur-	rent year end balance (	line 1g, column (a	a)) held as				
а	Board designated or quasi-endowment	9	6					
b	Permanent endowment >	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.						
За	Are there endowment funds not in the posse	ession of the organization	on that are held a	ind administered	for the org	anization	_	
	by						Y(	es No
	(i) unrelated organizations	-					3a(i)	
	(ii) related organizations	-		-			3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	s listed as required on S	Schedule R?	-			3b	
4	Describe in Part XIII the intended uses of the		ment funds					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere			<del></del>			<del></del>	
	Description of property	(a) Cost or other basis (investment		t or other (a (other)	<b>c)</b> Accumu depreciat		(d) Book v	alue_
1a	Land			203,970.			2	03.970.
b	Buildings			2,191,735.	1:	82,400.		09 335.
С	Leasehold improvements							
d	Equipment							
<u>е</u>	Other			764 051	3	23 057.	4	40 994.
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X,	column (B), line	10(c).)		<b>•</b>	2 6	54 299

Schedule D (Form 990) 2013

Part VIII Investments - Other Securities.	OF FREDERICK COOK	II, INC.	
Complete if the organization answered "Yes"		ne 11b See Form 990, Part X, line 1	2
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cos	st or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			· · · · · · · · · · · · · · · · · · ·
(3) Other			
(A)			
(B)	· · ·		
(C)			
(D)			<del>-</del>
(E) (F)			
(F) (G)			
(H)		<del></del>	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			<del></del>
Complete if the organization answered "Yes"	to Form 990. Part IV. II	ne 11c. See Form 990. Part X. line 13	3
(a) Description of investment	(b) Book value		st or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	-		
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			_
Complete if the organization answered "Yes"	to Form 990, Part IV, II Description	ne 11d. See Form 990, Part X, line 1	<del></del>
	Description		(b) Book value
	<del></del>		
(3)			
(4)			-
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin  Part X Other Liabilities.	e 15.)		<b>&gt;</b>
Complete if the organization answered "Yes"	to Form 990, Part IV, II	ne 11e or 11f. See Form 990, Part X,	line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) PREMIUM ON BOND		64,984.	
(3) BONDS PAYABLE TO COUNTY		2,053,245.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin		2,118,229.	
2. Liability for uncertain tax positions in Part XIII, provide			
organization's liability for uncertain tax positions under	FIN 48 (ASC 740) Ch	eck here if the text of the footnote ha	s been provided in Part XIII 🗶

	dule D (Form 990) 2013 TOURISM COUNCIL OF FREDERICK COUNTY IN		52-1057866	Page 4
Par	·	•	Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	l	<del></del>	<del></del>
1 2	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12.		1	1,931,443.
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	-	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	1 931 443.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
c	Add lines 4a and 4b		4c	0.
_5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u>.</u>	5	1 931 443
Pa	t XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses p	er Return.	-
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	l		
1	Total expenses and losses per audited financial statements		1	1,925,769.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments .	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII )	2d	_	
e	Add lines 2a through 2d		_2e	0.
3	Subtract line 2e from line 1		3	1,925,769.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIII )	4b	<b>-</b>	
С	Add lines 4a and 4b		4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u> </u>	_   5	1 925 769.
	t XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Par		ne 4; Part X, line 2;	Part XI.
iines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad-			,
		ditional information	, , ,	,
		ditional information		
		ditional information		
PART	X, LINE 2:	ditional information		
	X, LINE 2:			
EXPL	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE	TOURISM		
EXPL	X, LINE 2:	TOURISM		
COUN	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (	TOURISM		
COUN	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE	TOURISM		
COUN SECT	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES	TOURISM CODE LESS		
COUN SECT	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (	TOURISM CODE LESS		
COUN SECT	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:	TOURISM  CODE  LESS  INCOME		
COUN SECT	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES	TOURISM  CODE  LESS  INCOME		
COUN SECT APPL	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER	TOURISM  CODE  LESS  INCOME  RTISING;		
COUN SECT	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER	TOURISM  CODE  LESS  INCOME  RTISING;		
COUNT SECT APPL TAXE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S, THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER-  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTIONS.	TOURISM  CODE  LESS  INCOME  RTISING;		
COUN SECT APPL TAXE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER	TOURISM  CODE  LESS  INCOME  RTISING;		
EXPL COUN SECT APPL TAXE HOWE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER-  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTIONS  EQUENTLY, THE TOURISM COUNCIL DOES NOT HAVE ANY TAXABLE UNRELATED.	TOURISM  CODE  LESS  INCOME  RTISING;		
EXPL COUN SECT APPL TAXE HOWE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S, THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER-  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTIONS.	TOURISM  CODE  LESS  INCOME  RTISING;		
EXPL COUN SECT APPL TAXE HOWE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER-  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTIONS  EQUENTLY, THE TOURISM COUNCIL DOES NOT HAVE ANY TAXABLE UNRELATED.	TOURISM  CODE  LESS  INCOME  RTISING;		
EXPL COUN SECT APPL TAXE HOWE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER-  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTIONS  EQUENTLY, THE TOURISM COUNCIL DOES NOT HAVE ANY TAXABLE UNRELATED.	TOURISM  CODE  LESS  INCOME  RTISING;		
COUNT TAXE HOWE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER-  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTIONS  EQUENTLY, THE TOURISM COUNCIL DOES NOT HAVE ANY TAXABLE UNRELATED.	TOURISM  CODE  LESS  INCOME  RTISING;		
COUNT TAXE HOWE	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE ( ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTION  EQUENTLY, THE TOURISM COUNCIL DOES NOT HAVE ANY TAXABLE UNRELATED  NESS INCOME.	TOURISM  CODE  LESS  INCOME  RTISING;		
EXPL COUN SECT APPL TAXE HOWE CONS BUSI	X, LINE 2:  ANATION: THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE  CIL IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE (  ION 501(C)(6), INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES  ICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE:  S. THE TOURISM COUNCIL HAS UNRELATED BUSINESS INCOME FOR ADVER  VER, SUCH AMOUNTS ARE COMPLETELY OFFSET BY APPLICABLE DEDUCTION  EQUENTLY, THE TOURISM COUNCIL DOES NOT HAVE ANY TAXABLE UNRELATED  NESS INCOME.  TOURISM COUNCIL HAS ADOPTED THE PROVISIONS OF FASB ACCOUNTING  DARDS CODIFICATION, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES	TOURISM  CODE  LESS  INCOME  RTISING;  DNS.		

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 TOURISM COUNCIL OF FREDERICK COUNTY INC.  Part XIII Supplemental Information (continued)	52-1057866	Page 5
Supplemental information (continued)		
ADDRESSES THE DETERMINATION WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE		
CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS.		
UNDER THIS GUIDANCE, THE TOURISM COUNCIL MAY RECOGNIZE THE TAX BENEFIT		
FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE	<del>, , , , , , , , , , , , , , , , , , , </del>	<del></del>
TAX POSITION WOULD BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES,		
BASED ON THE TECHNICAL MERITS OF THE POSITION, THE TAX BENEFITS RECOGNIZED		
IN THE FINANCIAL STATEMENTS FROM SUCH POSITIONS ARE MEASURED BASED ON THE		
LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED		
UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAIN INCOME		
TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND		
PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS.		
MANAGEMENT HAS EVALUATED THE TOURISM COUNCIL'S TAX POSITIONS AND HAS		
CONCLUDED THAT THE TOURISM COUNCIL HAS TAKEN NO UNCERTAIN TAX POSITIONS		
THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH		
PROVISIONS OF THIS GUIDANCE. THE TOURISM COUNCIL FILES INCOME TAX RETURNS		
IN THE U.S. FEDERAL JURISDICTION, WITH FEW EXCEPTIONS, THE TOURISM COUNCIL		<del></del>
IS NO LONGER SUBJECT TO U.S. FEDERAL OR STATE AND LOCAL INCOME TAX		
EXAMINATIONS BY TAX AUTHORITIES BEFORE 2011.		

OMB No 1545-0047 Employer identification number ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. 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. Department of the Treasury Internal Revenue Service
Name of the organization SCHEDULE I (Form 990)

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I	(L)
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I	0
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Open to Public • Inspection

TOURISM COUNCIL OF FREDERICK COUNTY	IL OF FREDERIC	K COUNTY INC.					52-1057866
Part I General Information on Grants and Assistance	ind Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	sistance, and the selec	[
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use	ocedures for moni	toring the use of grant	of grant funds in the United States	d States		i I I	
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	United States. C	omplete if the orga	anization answered "\	res" to 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	\$5,000. Part II car	be duplicated if addit	onal space is need	led.	-		
1 (a) Name and address of organization or government	( <b>a)</b>	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRUNSWICK MAIN STREET							
P.O. BOX 72 BRUNSWICK, MD 21716	20-1752140	501(C)(3)	9,000.	0	саѕн	N/A	TOURISM DEVELOPMENT
HABITAT FOR HUMANITY OF FREDERICK							
. E	52-1820647	501(C)(3)	8,000.	0.	САЅН	N/A	TOURISM DEVELOPMENT
HARPS FOUNDATION							•
4200 DOVER ROAD							
RICHMOND VA 23221	31-1657824	501(C)(3)	7,500.	0.	CASH	N/A	TOURISM DEVELOPMENT
HISTORICAL SOCIETY OF FREDERICK							
COUNTY - 24 E. CHURCH STREET -							
FREDERICK, MD 21701	52-6050333	501(C)(3)	10,000.	0	САЅН	N/A	TOURISM DEVELOPMENT
MARYLAND SHAKESPEARE FESTIVAL							
501 PROSPECT BLVD #20D							
FREDERICK, MD 21701	52-2155529	501(C)(3)	13,304.	0	САЅН	N/A	TOURISM DEVELOPMENT
MIDDLETOWN MAIN STREET						_	
31 W. MAIN STREET							
MIDDLETOWN, MD 21769	26-4781800	501(C)(3)	5,150.	0	САЅН	N/A	TOURISM DEVELOPMENT
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	ganizations listed in th	e line 1 table				9
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

<b>-</b> -L	DERICK COUNTY	Y, INC.			52-1057866 Page
Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed	nited States, Con	nplete if the organiz	ation answered "Yes	' to Form 990, Part IV, line 22.	de a
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	quired in Part I, lin	e 2, Part III, column	(b), and any other ac	Iditional information	
PART I, LINE 2:					
EXPLANATION: THE ORGANIZATION REQUIRES A WRITTEN REPORT	I	FROM EACH ENTITY			
THAT IS AWARDED A GRANT OR ASSISTANCE. IT ALSO REQUIRES		COPIES OF INVOICES			
SHOWING HOW THE GRANT OR ASSISTANCE WAS USED.					
373 175 - 175		28			Schedule   (Form 990) (2013)
502.102 10-23-15		) I			/^^^

### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

# Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Inspection

Name of the organization

TOURISM COUNCIL OF FREDERICK COUNTY INC.

Employer identification number

52-1057866 FORM 990 PART VI SECTION B LINE 11: EXPLANATION: THE BOARD OF DIRECTORS REVIEW THE FORM 990 BEFORE IT IS FILED WITH THE IRS. FORM 990 PART VI SECTION B LINE 12C: EXPLANATION: THE ORGANIZATION HAS ALL BOARD OF DIRECTORS AND OFFICERS SIGN A DOCUMENT ANNUALLY THAT VERIFIES THEY ARE IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY FORM 990 PART VI SECTION B LINE 15A: EXPLANATION: KEY MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS CONDUCT AN ANNUAL REVIEW OF THE EXECUTIVE DIRECTOR. THESE MEMBERS OF THE BOARD ALSO REVIEW. AND APPROVE THE COMPENSATION AMOUNT BY USING COMPARABLE DATA AND DELIBERATION IN MAKING THE DECISION. THE DECISION IS DOCUMENTED THERE IS NO PROCESS FOR DETERMING COMPENSATION OF THE ORGANIZATION'S OFFICERS OR KEY EMPLOYEES AS THERE ARE NO INDIDIVUDALS AT THE OFFICER OR KEY EMPLOYEE LEVEL THAT UNDERGO COMPENSATION REVIEW, FORM 990 PART VI SECTION C LINE 19: EXPLANATION: FINANCIAL STATEMENTS CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D) FORM 990 PART IX LINE 11G OTHER FEES:

Schedule OvForm 990 or 990-EZ) (2013)	Page 2
Name of the organization  TOURISM COUNCIL OF FREDERICK COUNTY INC.	Employer identification number 52-1057866
TOTAL OTHER FEES ON FORM 990 PART IX, LINE 11G, COL A 365,996,	
FORM 990 PART XII, LINE 2C:	
	<del></del>
EXPLANATION: THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL	
STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE	
FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.	
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