

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



990

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

Department of the Treasury

Open to Public 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 Internal Revenue Service For the 2013 calendar year, or tax year beginning 7/1/2013 and ending 6/30/2014 C Name of organization D Employer identification number The Education Foundation of Baltimore County Public Check if applicable Doing Business As Address change Number and street (or P O box if mail is not delivered to street address) Room/suite 52-1819200 Name change Bldg 'E' E Telephone number 6901 N Charles St. Initial return City or town ZIP code 410-887-6198 MD 21204 Towson Terminated Foreign postal code Foreign country name Foreign province/state/county 816,354 Amended return G Gross receipts \$ F Name and address of principal officer Yes X No Application pending H(a) Is this a group return for subordinates? timmy Ruppers<u>berger, Pre</u>sident 105 W. Chesapeake Ave. Suite B1, T H(b) Are all subordinates included? If "No," attach a list (see instructions) X 501(c)(3) Tax-exempt status 501(c) () (insert no) 4947(a)(1) or Website: ▶ http://www.EducationFoundationBCPS.org H(c) Group exemption number ▶ X Corporation Trust Association Other > K Form of organization L Year of formation M State of legal domicile 1992 MD Part I Summary Briefly describe the organization's mission or most significant activities: 1 Governance and corporate charitable giving in support of education in Baltimore County Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . Number of independent voting members of the governing body (Part VI, line 1b) . . . 4 17 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 6 2 0 7a Net unrelated business taxable income from Form 990-T, line 34. Prior Year Contributions and grants (Part VIII, line 1h) **Current Year** 8 274,932 275,596 Program service revenue (Part VIII, line 2g) 9 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 16.570 10 95.265 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 -9,649 98,020 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 281,853 12 468,881 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 206.023 252.335 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 0 0 Professional fundraising fees (Part IX, column (A), line 11e) 16a 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 31,085 12,979 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 237,108 265,314 19 Revenue less expenses Subtract line 18 from line 12 44,745 203,567 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16). . 794,401 994.074 21 Total liabilities (Part X, line 26) . . . Net assets or fund balances. Subtract line 21 from line 20 794.401 994,074 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and Sign Signature of officer Date Here Donald L Arnold Treasurer Type or print name and title Print/Type preparer's name Preparer's signature PTIN Check **Paid** self-employed SELF-PREPARED RETURN **Preparer** Firm's name Firm's EIN ▶

Phone no

Form 990 (2013)

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address 🕨

Use Only

orm 990 (2013)		The Education Foundation of Baltimore County Public Schools, Inc	52-1819200	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
	`	Check if Schedule O contains a response or note to any line in this Part III		. X
1	Briefly	describe the organization's mission.		
•		ort enrichment of the Baltimore County Public Schools		
2	Did the	organization undertake any significant program services during the year which were not listed on	-	
4		organization undertake any significant program services during the year which were not isseed on ir Form 990 or 990-EZ?	. Tyes	X No
	•		162	[V] NO
	-	describe these new services on Schedule O.		
3		organization cease conducting, or make significant changes in how it conducts, any program		
	service		Yes	X No
		" describe these changes on Schedule O.		
4		be the organization's program service accomplishments for each of its three largest program servi		
		es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and	allocations to oth	ners,
	the tota	Il expenses, and revenue, if any, for each program service reported.		
4a	(Code.) (Expenses \$ 38,447 including grants of \$) (Revenue	e \$)
	Instruct	ional initiative grants to baltimore County public schools		
		•••••		
		••••••		
4b	(Code:) (Expenses \$ 48,649 including grants of \$) (Revenue	e \$)
	Educat	ional technology equipment for baltimore county public schools		
		•••••••••••••••••••••••••••••••••••••••		
		••••••		
4c	(Code) (Expenses \$ 40,325 including grants of \$) (Revenue		١
70		s and scholarship programs for baltimore County students	·~ •	/
	wwaids	and scholarship programs for parimore country students		
				·
			. 	
4d	Other	program services (Describe in Schedule O.)		
	(Exper	· · · · · · · · · · · · · · · · · ·	0)	
40	Total a	rogram service expenses > 252 335		

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? .	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		$\overrightarrow{}$	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		~
_		3		X
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		Х
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,			v
_	Part III	5		<u>X</u>
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		<u>X</u>
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			
3	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	×	
	· · ·	9	-^ -	
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	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			ŧ
• •	VII, VIII, IX, or X as applicable		1	4
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a		Х
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.	11b		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.	11c		Χ
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 in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Χ
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		Х
122	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>			
Lu	Schedule D, Parts XI and XII	12a	х	
L	·	12a	^	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	406	i	v
4 ^	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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 Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15]	Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	┌╌┵┤	- 	
. •	If "Yes," complete Schedule G, Part III	19		Х
20°	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		$\frac{\lambda}{X}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
<u></u> D	ii res to line 20a, did the diganization attach a copy of its addited infancial statements to this feturity	1400		

52-1819200

Part IV

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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		×
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		<u> </u>
240	\$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
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		- ^-
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	200		^
	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		x
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? <i>If "Yes," complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	**	* 3 * 2 * 2 * 2 * 2 * 2 * 2 * 2 * 2 * 2	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1200		 ^
Ū	was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
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		×
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, Part II, III, or IV, and Part V, line 1	34		x_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	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	ļ	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	1		
	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	X	<u> </u>
		Form	990	(2013)

Part V

	_
tatements Regarding Other IRS Filings and Tax Compliance	
thock if Schedule O contains a response or note to any line in this Part V	

			 i	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-	-]
2-	gaming (gambling) winnings to prize winners?	1c	_X	<u>-</u>
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		J
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			}
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? .	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Χ_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	- <u>-</u> -		
L	and services provided to the payor?	7a 7b		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	/ D		
С	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		_^
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
ь 11	Section 501(c)(12) organizations. Enter:			
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
-	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		_	
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	Į į		
С	Enter the amount of reserves on hand	ļ		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Page 6

Part VI

Sect	ion 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	17			Ì
	If there are material differences in voting rights among members of the governing body, or			1	
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
þ	Enter the number of voting members included in line 1a, above, who are independent . 1b		1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with	i		
	any other officer, director, trustee, or key employee?		2		_X_
3	Did the organization delegate control over management duties customarily performed by or under t				
	supervision of officers, directors, or trustees, or key employees to a management company or othe		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was f		4		_X_
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?	5		X
6	Did the organization have members or stockholders?		6		X
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_		_X_
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		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaker	n during			
	the year by the following:		ļ		
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	_X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	eached	!		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		_X_
Sect	ion B. Policies (This Section B requests information about policies not required by the Inte-	rnal Revenue C	<u>ode.)</u>		
				Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	•			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		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	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		12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	Yes "	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	res,	120		
40	describe in Schedule O how this was done		12c		X
13	Did the organization have a written whistleblower policy?		13	Х	_^_
14	Did the organization have a written document retention and destruction policy?		14		
15	Did the process for determining compensation of the following persons include a review and appro-				
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation.	and decision?	150		
a	The organization's CEO, Executive Director, or top management official		15a 15b		X
b	Other officers or key employees of the organization		130		
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	omont			
IOa	with a taxable entity during the year?	ement	16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	oto ito	10a		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	the organization's exempt status with respect to such arrangements?	guaru	16b		
Sec	tion C. Disclosure	· · ·	100		
17	List the states with which a copy of this Form 990 is required to be filed MD			_	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	0-T (Section 501/	c)(3)e	only	
.0	available for public inspection. Indicate how you made these available. Check all that apply	. (000	-/(0/3	Jiny)	
		in in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or			, and	l
	financial statements available to the public during the tax year.		ر ۱۰۰۰	, 4114	•
20	State the name, physical address, and telephone number of the person who possesses the books	and records of the	9		
_•	organization: ► Patrick Fannon, CPA	410-887-619	98		
	6901 Charles St Building 'E' Room 318, Towson, MD 21204				

Form 990 (2013) •	The Education Foundation of Baltimore County Public Schools, Inc.	52-1819200	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Cor	npensated	
_	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 employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

<u> </u>										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Average box, unless person officer and a director		on ore than one on is both an ector/trustee)		ıs both an or/trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) David Uhlfelder	2 00									
Director	0 00	Х						0	0	0
(2) Michael Trennery	1 00									
Director	0.00	Χ_						0	0	0
(3) John A. Hayden, III	1.00									
Director	0.00							0	0	0
(4) Douglas Eder	1 00									
Director	0 00	Х						0	0	0
(5) Stacy Walsh	1.00									
Director	0.00	X	L	L				0	0	0
(6) Dr. Gerald Feldman	1 00	1								
Director	0 00							0	0	0
(7) Larry Kamanıtz	1 00	1	l							
Director	0 00		<u>L</u>	<u> </u>			辶	0	0	0
(8) Alan Kanter	1.00	4								
Director	0.00							0	0	0
(9) Dennis Robinson	1 00	1								
Director	0 00	_						0	0	0
(10) james Sasiadek	1 00	4	ĺ			1	l			
Director	0.00	_	<u> </u>			ļ		0	0	0
(11) Steven Prumo	1.00	4		1		i		!		
Director	0.00				<u> </u>			0	.0	0
(12) George Moniodis	1.00	4			ĺ					
Director	0.00		<u> </u>		<u> </u>			0	0	0
(13) William Caltrider	1.00	4			ł					
Director	0.00			↓_	_	<u> </u>		0	0	0
(14) Jimmy Lien	1.00	4								
Director	0 00	X						0	<u> </u>	
										E 000 (0040)

Form	990 (2013)	The Education Foundation of	Baltimore Coun	ty Pu	blic	Sch	nool	ls, Inc	;		52-18°	19200 Page
Р	art VII	Section A. Officers, Directors, Tr	rustees, Key Er	nplo	yee	s, a	nd	High	est	Compensated	Employees (co	ontinued)
	•	(B) Average hours per week (list any	(C) Position (do not check more than box, unless person is bot officer and a director/trus					an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
			hours for related organizations below dotted 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)	compensation
	Donald I. A	Arnold	2.00 0.00	1		х				0	()
		:k				Ť						1
Seci	etary		0.00	<u> </u>		Х				0		
		ppersberger		1								
	president		0.00		<u> </u>	Х	ļ			0)
	Robert Ba		5 00 0 00	4			x			0	C	
		reach officer nnon	5 00		 		 ^			· · · · · ·		<u>'</u>
	troller		0 00	1			x			0	1 0	
(20)	Debbie Ph	elps	40 00	1								
Exe	cutive Direct	tor	0 00				X			0)
(21)												
(22)												
(23)												
(24)												
(25)												
1b	Sub-total				٠.	•	·	٠	>	0	(
С		n continuation sheets to Part VII,							▶	0		
d_		l lines 1b and 1c).						<u> </u>	<u> </u>	0		<u> </u>
2		ber of individuals (including but not compensation from the organizatio		listed		ove 0	e) Wl	ho red	ceiv	ved more than \$	100,000 of	
	· oportusio	omponedien nom til organizatio	••			<u> </u>	,					Yes No
3		ganization list any former officer, di on line 1a? <i>If "Yes," complete Sche</i>					yee	e, or h	igh	nest compensate	ed	3 X
4	• •	dividual listed on line 1a, is the sum					n an	d oth	er d	compensation fr	om	(1) (M. 1)
-		zation and related organizations gre										4 X
5		erson listed on line 1a receive or acc	•			-				•	ndividual	证 班 凌
Sec		es rendered to the organization? If " ependent Contractors	res, complete	Scrie	auie	<i>3 1</i>	or s	sucn p	ers	son	<u> </u>	5 X
1	Complete	this table for your five highest compation from the organization Report of										
	year	(A)		-						(B)		(C)
		Name and business add	Iress							Description of ser	rvices	Compensation
<u>Non</u>	e	·										
			-									
2		ber of independent contractors (incl \$100,000 of compensation from the		nited ►	to t	hos	e lis	sted a	bo	ve) who receive	d ;	7 · · · · · · · · · · · · · · · · · · ·

		Check if Schedule O Contains	a response or	note to any line	III IIIIS FAIL VIII.			· · L
			-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>'</u> -	12	Federated campaigns	. 1a	0		10401100		3.2 3.
Grants		· -		- 0				
ह्य ज		Membership dues						
S, G		Fundraising events		56,940				
Sift.	d	Related organizations	1d	0				
S, E	е	Government grants (contribution	is) 1e	0				Ì
อูเ เ	f	All other contributions, gifts, gra	nts, and					
t b		similar amounts not included ab		218,656				
Contributions, Gifts, Grants and Other Similar Amounts	q	Noncash contributions included in li		0				
g g	_	Total. Add lines 1a–1f	1100 10 11.		275,596			
		Total. Add lines 1a-11 .	<u></u>	Business Code	210,000			
Program Service Revenue								
š	2a				0			
Ϋ́	b				0			
vice	С				0			
Ser	d				0			
Ë	е				0			
gra	f	All other program service revenu	ле		0			
Pr	q	Total. Add lines 2a–2f.		▶	0	· ·		
	3	Investment income (including di						
					21,152			
	4	Income from investment of tax-e		ceeds	0			
	5	5 "		cccus	0			
	3	Royalties	(i) Real	(II) Personal	9			
			(1) (100)	(ii) i Giodriai	1			
	6a	Gross rents						
	b	Less. rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss)	<u> </u>		0			
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	323,972	0				
	Ь	Less: cost or other basis						
	~	and sales expenses	249,859	0				
	С	Gain or (loss)	74,113					
	ď	Net gain or (loss)	74,110		74,113			
	"	Net gain or (loss)		· · · · ·	74,110			
Φ		0					ł	
Ž	ва	Gross income from fundraising	50.040				•	
_ ✓e		events (not including \$						
æ		of contributions reported on line						
9		See Part IV, line 18		195,634	1 1			
Other Revenu		Less direct expenses		97,614				
O	С	Net income or (loss) from fundra	aising events .	<u> </u>	98,020			
	9a	Gross income from gaming active	vities					
		See Part IV, line 19		О				
	l b		. b	0				
		Net income or (loss) from gamir		•	0			
		Gross sales of inventory, less	ig activities					
	lua	returns and allowances	_	l o			1	
	١.						1	
			b	L0			ļ	
	<u>C</u>	Net income or (loss) from sales	of inventory		0		ļ <u> </u>	
		Miscellaneous Revenue		Business Code				
	11a				0			<u> </u>
	b				0		ļ <u></u>	
	С				0			
	d	All other revenue			0			
		Total. Add lines 11a-11d			0			
	12	Total revenue. See instructions		.	468,881			0
	, - -							

Part IX

Contina	E01/01/2	1 and 501/c1/41	omanizations	must complete a	ll columne	All other o	raanizatione r	ust complete co	Jumn (A)
Occion	307(0)(3	7 and 00 1(0)(1)	Organizationo	mast complete a	i columno.	in outlor o	ngamzanono n	aut complete co	74.17.

	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the United States See Part IV, line 21	252,335	252,335							
2	Grants and other assistance to individuals in the									
	United States. See Part IV, line 22	o								
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16	0								
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors,									
	trustees, and key employees	0			·					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	0								
7	Other salaries and wages	0								
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	0								
9	Other employee benefits	0								
10	Payroll taxes	0								
11	Fees for services (non-employees):									
а	Management	0								
þ	Legal	.0								
C	Accounting	0								
d	Lobbying	0			<u></u>					
е	Professional fundraising services. See Part IV, line 17.	0								
f	Investment management fees	0								
g	Other (If line 11g amount exceeds 10% of line 25, column									
	(A) amount, list line 11g expenses on Schedule O)	0								
12	Advertising and promotion	1,614		1,614						
13	Office expenses	0								
14	Information technology	280		280						
15	Royalties	0								
16	Occupancy	0								
17	Travel	0								
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	0								
19	Conferences, conventions, and meetings	5,208		5,208						
20	Interest	0								
21	Payments to affiliates	0		-						
22	Depreciation, depletion, and amortization	0	0	0	0					
23	Insurance	744		744						
24	Other expenses. Itemize expenses not covered	-								
	above (List miscellaneous expenses in line 24e. If									
	line 24e amount exceeds 10% of line 25, column									
_	(A) amount, list line 24e expenses on Schedule O.)	4 575		4 575						
a	Administrative supplies	4,575		4,575 300						
b	State registration & Filing fee	300 258		258						
٦ 0	Postage	258		∠38						
d	All other expenses	0			-					
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	265,314		12,979	0					
25 26	Joint costs. Complete this line only if the	200,314	252,335	12,879						
20	organization reported in column (B) joint costs									
	from a combined educational campaign and	1								
	fundraising solicitation Check here									
	following SOP 98-2 (ASC 958-720)	1								
	ionowing 501 30-2 (A50 350-120)	<u> </u>	<u></u>							

Part X

		Check if Schedule O contains a response or note to any line in this Part >	x		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	206,048	1	306,351
	2	Savings and temporary cash investments	57,675	2	19,701
	3	Pledges and grants receivable, net	0	3	8,000
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L	-	5	
	6	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			
sts		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
٩	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	530,678	11	660,022
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	794,401	16	994,074
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and		m	
abi		disqualified persons. Complete Part II of Schedule L		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties	0	23	
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete			
		Part X of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	0	26	0
ses		Organizations that follow SFAS 117 (ASC 958), check here ➤ X and complete lines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets	112,330	27	149,323
Bal	28	Temporarily restricted net assets	622,186		783,866
ᅙ	29	Permanently restricted net assets	59,885		60,885
Ë			00,000		00,000
٦٢		Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34.			
Ş		'			·
Se	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Žet	32	Retained earnings, endowment, accumulated income, or other funds .	704.404	32	204.674
_	33	Total net assets or fund balances	794,401		994,074
	34	Total liabilities and net assets/fund balances	794,401	34	994,074

orm s	1 The Education Foundation of Baitimore County Public Schools, Inc	52	-1819200	Pag	ge 12
Part	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		468	3,881
2	Total expenses (must equal Part IX, column (A), line 25)	2		265	5,314
3	Revenue less expenses Subtract line 2 from line 1	3		203	3,567
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		794	,401
5	Net unrealized gains (losses) on investments	5		-3	3,894
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		994	1,074
Part					
	Check if Schedule O contains a response or note to any line in this Part XII.		·	<u>. l</u>	<u></u>
				Yes	No
1	Accounting method used to prepare the Form 990.		_		i
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				i
	Schedule O.				لــــــا
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 on a separate basis, consolidated basis, or both				
	Separate basis Donsolidated basis Both consolidated and separate basis			ŀ	i
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			1	
	separate basis, consolidated basis, or both.				i l
	X Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in	1			
	Schedule O				.
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 ((2013)

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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

OMB No 1545-0047

Open to Public Inspection

	he organization							Employer	identificati		er	
			County Public Schoo				اسمح منطف	\ Coo in		19200		
Part I			arity Status (All orgation because it is (Fo						Struction	<u> </u>		
1 ne orga			ches, or association o).			
2	╡		n 170(b)(1)(A)(ii). (At			Ju J		-/(-/(-/(-/	,-			
3	=		ospital service organia			section '	170(b)(1)	(A)(iii).				
4	=	•	tion operated in conju						(b)(1)(A)	(iii). Ent	er the	
-	hospital's nar	ne, city, and sta	ite									
5	in section 17	0(b)(1)(A)(iv). (the benefit of a colleg (Complete Part II.)						mental ur	nt descr	ıbed	
6			ernment or governmer									
7			y receives a substantia (1)(A)(vi). (Complete f		its suppor	t from a g	jovernme	ntal unit o	or from the	e gener	al publ	ic
8	A community	trust described	in section 170(b)(1)((A)(vi) . (C	omplete F	Part II)						
9			y receives [.] (1) more th									
			d to its exempt function									8
			nt income and unrelated after June 30, 1975						ax) from	busines	ses	
10	_ '	•	nd operated exclusive				-		4)			
10 L	_	_	nd operated exclusive							ny out th	ι Δ	
11 <u>X</u>			olicly supported organ									on
			at describes the type o									
	a 🔲 Type	I b 🔲 Ty	ype II c X Type	III-Func	tionally int	tegrated	d 🔲 T	ype III–No	on-functio	nally in	tegrate	ed
e X	By checking	this box, I certify	y that the organization	is not co	ntrolled d	rectly or i	ndirectly	by one or	more dis	qualifie	d	
_	persons othe	r than foundation	on managers and othe	er than on	e or more	publicly s	supported	l organıza	tions des	cribed i	n secti	ion
		section 509(a)(2										
f	_		a written determination	n from the	RS that	ıt is a Typ	e I, Type	II, or Typ	e III supp	orting		
a		check this box	the organization acce	nted anv	aft or con	 Itribution 1	from any	of the		•		ш
g	following per		ino organization acco	prod arry	g 0. 00							
	(i) A pers	on who directly	or indirectly controls,					described	lın (ıı)		Yes	No
			erning body of the su		rganizatio	on?				11g(i)		X
	` '	•	person described in (i	•	· (iı) above					11g(ii) 11g(iii)		X
h	• •		y of a person describe ation about the suppor				• •	•	•	L 1 19(1117)		
	me of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	(vi)	ls the	(vii) Am	ount of mo	onetary
o	organization		(described on lines 1–9 above or IRC section		sted in your document?		nization in of your		tion in col ized in the	1	support	
			(see instructions))	9010111119			port?		S ?			
	_			Yes	No	Yes	No_	Yes	No	ļ		
(A)	. 6 5	50 0000000	2							1	22	E 725
(B)	re County Publi	52-6000886	2	X	 	X	 	X		-		25,735
(6) -										1		
(C)												
(D)												
(E)												
Total	1										22	25.735

Schedu	le A (Form 990 or 990-EZ) 2013 The Education					52-181920	
Part				, , , , ,	, , ,		
	(Complete only if you checked the				-		under
	Part III. If the organization fails to	qualify under t	<u>he tests liste</u>	d below, pleas	se complete F	Part III)	
	on A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and					}	
	membership fees received. (Do not						
	include any "unusual grants ")			j			0
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the	1					
	organization without charge						0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by each						
	person (other than a governmental unit						
	or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						0
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	o	0	0	0	o	0
8	Gross income from interest, dividends,						
_	payments received on securities loans,						
	rents, royalties and income from similar	l l					
	sources						0
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on						0
10	Other income. Do not include gain or		·				
	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10.						0
12	Gross receipts from related activities, etc. (s	see instructions)			12	
13	First five years. If the Form 990 is for the o	rganization's fir	st, second, thi	rd, fourth, or fift	th tax year as	a section 501(c)(3)
	organization, check this box and stop here		•				. ▶∐
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2013 (line 6,		ed by line 11.	column (f)) .		14	0 00%
15	Public support percentage from 2012 Scheo					15	0 00%
16a	33 1/3% support test—2013. If the organiz			n line 13, and li	ne 14 is 33 1/3	% or more, che	eck this box
	and stop here. The organization qualifies a						. ▶ 🗍
b	33 1/3% support test—2012. If the organiz						- —
	box and stop here. The organization qualifi						
17a	10%-facts-and-circumstances test—2013	· · · · · · · · · · · · · · · · · · ·		=	ine 13 16a or	16b and line 1	- <u>- </u>
114	is 10% or more, and if the organization mee						
	Part IV how the organization meets the "fac						
				-	-		
b	organization. 10%-facts-and-circumstances test—2012					 Shor 17a and	· ► L
D	15 is 10% or more, and if the organization r	_					
	Part IV how the organization meets the "fac						-Apiaiii III
	supported organization			-	•		▶□

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

18

instructions

20

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

Part III (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.) **Section A. Public Support** Calendar year (or fiscal year beginning in) (a) 2009 (f) Total **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 0 Gross receipts from admissions, merchandise 2 sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 Total. Add lines 1 through 5 0 0 0 7a Amounts included on lines 1, 2, and 3 0 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 0 c Add lines 7a and 7b 0 0 0 0 Public support (Subtract line 7c from line 6) 0 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total 0 0 0 0 9 Amounts from line 6 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 0 **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 0 O O 0 O c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 0 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12) 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) 15 0 00% Public support percentage from 2012 Schedule A, Part III, line 15 16 0 00% Section D. Computation of Investment Income Percentage 17 0 00% 17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) 18 18 Investment income percentage from 2012 Schedule A, Part III, line 17 0.00% 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form	990 or 990-EZ) 2013	The Education	Foundation of	Baltimore Cou	nty Public Schoo	ols, Inc	52-1819200	Page 4
Part IV	Supplemental	Information. F	Provide the ex	planations red	quired by Part I	I, line 10; Pa	ırt II, line 17a or	17b;
•	and Part III, line							
	and the second		<u> </u>	uning account				
- -								
								 -
								
								
								
								
								
		. 						
								
	· • • • • • • • • • • • • • • • • • • •							
	. 	. 						
								
								
				. 				

SCHEDULE D (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.

OMB No 1545-0047 2013

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name	of the organization		Employer identification number
The	Education Foundation of Baltimore County Po	ıblic Schools, Inc.	52-1819200
Par		or Advised Funds or Other Similar F	
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 6	S
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		· - - ·
2	Aggregate contributions to (during year)		,
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and d		
	funds are the organization's property, subje-	•	
6	Did the organization inform all grantees, do		
	used only for charitable purposes and not for		
	purpose conferring impermissible private be	enefit?	Yes No
Par			
		ered "Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e g , reci	eation or education) Preservatio	n of an historically important land area
	Protection of natural habitat	Preservatio	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contrib	ution in the form of a conservation
_	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation ea	sements	2b
С	Number of conservation easements on a ce		2c
d	Number of conservation easements include	, ,	
	historic structure listed in the National Regis		. 2d
3	Number of conservation easements modifie	d, transferred, released, extinguished, or	terminated by the organization
	during the tax year	_	
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written policy	regarding the periodic monitoring, inspect	tion, handling of
	violations, and enforcement of the conserva-		
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservati	on easements during the year
	•		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation e	asements during the year
_	\$		
8	Does each conservation easement reported	•	
_	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		· · · · · L Yes L No
9	In Part XIII, describe how the organization r		
	balance sheet, and include, if applicable, the		financial statements that describes
Par	the organization's accounting for conservati	on easements ections of Art, Historical Treasures,	or Other Similar Assets
· ai		ered "Yes" to Form 990, Part IV, line 8	
40			
Id	If the organization elected, as permitted und		
	works of art, historical treasures, or other si of public service, provide, in Part XIII, the te		
h	If the organization elected, as permitted und		
U	works of art, historical treasures, or other si		
	of public service, provide the following amo		ication, or research in turtificialitie
	(i) Revenues included in Form 990, Part VI		> \$
	(ii) Assets included in Form 990, Part X		▶ \$ ▶ \$
2	If the organization received or held works of	fart, historical treasures, or other similar a	ssets for financial gain, provide the
_	following amounts required to be reported u		• • •
а	Revenues included in Form 990, Part VIII, I		
	Assets included in Form 990, Part X	diam for Francisco	· · · · · · · · · · · · · · · · · · ·

		Callactions of A				Ythor S	imilar Assats	(continue	\d\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Par									<u>'u)</u>
3	Using the organization's acquisition, a		er recoras	, cneck a	ny of the folio	wing th	at are a signific	ant	
	use of its collection items (check all the	nat apply)							
а	Public exhibition		d []	Loan	or exchange	program	ns		
b	Scholarly research		е 🗌	Other					
С	Preservation for future generati	ons							
			d ovolous	how thou	further the e	raonizo	tion's avamnt n	urnoco in	
4	Provide a description of the organizat Part XIII.	ion's collections an	a explain	now they	iurmer me o	rganiza	uons exempt p	iii əsodir	
_									
5	During the year, did the organization								<u> </u>
	assets to be sold to raise funds rathe	r than to be maintai	ned as pa	art of the	organization':	s collect	tion?	Yes	∐ No
Part	IV Escrow and Custodial Arra	angements.							
•	Complete if the organization		to Form 9	990. Parl	t IV. line 9. d	or repoi	rted an amour	it on Form	า
	990, Part X, line 21.			, -		•			
1a	Is the organization an agent, trustee,	custodian or other	intormodu	any for co	ntributions or	other a	esots not		
Ia	included on Form 990, Part X?		interneur	ary for co	intributions of	Ottifet 8	193613 1101	Yes	☐ No
				طعد سالينيم			•	res	NO
b	If "Yes," explain the arrangement in F	an Alli and comple	te the foil	owing tac	ne		 	A	
						-		Amount	
С	Beginning balance				•	1c			(
d	Additions during the year				•	1d			
е	Distributions during the year					1e			
f	Ending balance		•		•	1f			(
2a	Did the organization include an amou	nt on Form 990 Pa	art X line	212				Yes	X No
_	~					:	 - Ded VIII		当 …
b	If "Yes," explain the arrangement in F	art XIII. Check here	e ii the ex	pianation	nas been pro	ovided i	n Part XIII	• • •	<u> </u>
Part									
	Complete if the organization	answered "Yes"	to Form !	990, Par	t IV, line 10				
		(a) Current year	(b) Pro	or year	(c) Two years	back	(d) Three years back	k (e) Four	years back
1a	Beginning of year balance	73,599		65,628	6	8,401	62,44	12	57,70°
b	Contributions	3,000		2,000			1,00		5,250
C	Net investment earnings, gains,			_,					
•	and losses	11,200		7,571	_	1,573	9,37	77	1,49
a	Grants or scholarships	2,850		1,600		1,200	4,41	_	2,000
d	•	2,030		1,000		1,200	4,4	-	2,000
е	Other expenditures for facilities								
_	and programs								
f	Administrative expenses								
g	End of year balance	84,949		73,599		5,628	68,40)1	62,442
2	Provide the estimated percentage of	•	d balance	(line 1g,	column (a)) l	held as.			
а	Board designated or quasi-endowme	nt 🕨	<u>%</u>						
b	Permanent endowment	72%							
С	Temporarily restricted endowment	▶ 28%							
	The percentages in lines 2a, 2b, and	2c should equal 10	0%						
3a	Are there endowment funds not in the			tion that a	re held and	adminis	tered for the		
	organization by:	•	Ū					T	res No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations		•	• •		• •		3a(ii)	X
ь	If "Yes" to 3a(ıı), are the related organ		-		 la P2	•	•	3b	- ^`
4	· · ·		-			• •		<u> </u>	
4	Describe in Part XIII the intended use		on's endo	winent iui	ius				
Part		•				_			
	Complete if the organization	answered "Yes"	to Form			a. See	<u>Form 990, Pa</u>	rt X, line 1	10
	Description of property	(a) Cost or of			st or other		Accumulated	(d) Book	k value
		(investr	nent)	basi	s (other)	de	epreciation		
1a	Land		0		0				
b	Buildings		0		0		0		
С	Leasehold improvements		0		0		0		- 1
d	Equipment		0		0		0		
e	Other		0		n		0		
$\overline{}$	I. Add lines 1a through 1e. (Column (d) must eaual Form		X, colum	n (B), line 10	(c).)	. ▶		
		,		,		/ /			

(4)	Description of security or category		Part IV, line 11b See Form (c) Method of va	
• •	(including name of security)	(b) Book value	Cost or end-of-year n	
(1) Financial	derivatives	0	_	
(2) Closely-he	eld equity interests	0		
(3) Other	·			
		I I		
(D)				
(E)				
(F)				
(G)				
(H)				
Total (Column (b)	must equal Form 990, Part X, col (B) line 12)	▶ 0		
Part VIII	Investments—Program Rel	lated.		
		answered "Yes" to Form 990,	Part IV. line 11c. See Form	990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of va	
	(a) Description of investment	(b) book value	Cost or end-of-year r	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b)	must equal Form 990, Part X, col (B) line 13)	• 0		
Part IX	Other Assets.			
	Complete if the organization	answered "Yes" to Form 990,	Part IV, line 11d See Form	n 990, Part X, line 15
			,	(b) Book value
		(a) Description		(b) book value
(1)		(a) Description		(b) Book value
(1) (2)		(a) Description		(b) Book Value
(2)		(a) Description		(b) Book Value
(2)		(a) Description		(b) Book Value
(2) (3) (4)		(a) Description		(b) Book value
(2) (3) (4) (5)		(a) Description		(b) Book Value
(2) (3) (4)		(a) Description		(b) Book Value
(2) (3) (4) (5) (6) (7)		(a) Description		(b) Book Value
(2) (3) (4) (5) (6)		(a) Description		(b) Book Value
(2) (3) (4) (5) (6) (7) (8) (9)	mn (b) must equal Form 990, Part X			
(2) (3) (4) (5) (6) (7) (8) (9)	mn (b) must equal Form 990, Part X Other Liabilities.			
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Liabilities.	X, col (B) line 15)		C
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Liabilities.			C
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Liabilities. Complete if the organization	X, col (B) line 15)		C
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		C
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Liabilities. Complete if the organization line 25.	X, col (B) line 15)		C
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3)	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4)	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5)	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		C
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization line 25. (a) Description of liability	X, col (B) line 15)		0

Schedule D (Form 990) 2013 The Education Foundation of Baltimore County Public Schools, Inc.

52-1819200

Schedule D (Form	990) 2013	The Education Foundation of Baltimore County Public Schools, Inc	52-1819200	Page 5
Part XIII	Supple	mental Information (continued)		
				.
				
				
. 				
· 				
				
				

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Employer identification number Name of the organization The Education Foundation of Baltimore County Public Schools, Inc. 52-1819200 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants е а Internet and email solicitations f b Solicitation of government grants Phone solicitations Special fundraising events C d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity from activity fundraiser listed in or entity (fundraiser) contributions? organization col (I) Yes No 1 0 0 0 n 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 9 0 0 0 10 0 Total 0 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing

Pa	rt II		Complete if the organize			
			fundraising event contrepts greater than \$5,00		come on Form 990-EZ,	lines 1 and 6b. List
		events war gross rece	(a) Event #1 te of Schools Lunch	(b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through
اه			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	195,634		0	195,634
	2	Less Contributions			0	0
	3	Gross income (line 1 minus line 2)	195,634		0	195,634
	4	Cash prizes			0	0
S	5	Noncash prizes			0	0
Direct Expenses	6	Rent/facility costs	12,000		0	12,000
ţ	7	Food and beverages .	43,770		0	43,770
Direc	8	Entertainment .	600		0	600
	9	Other direct expenses	41,244		0	41,244
	10	Direct expense summary Ad				(97,614)
Pa	11	Net income summary. Subtra	act line 10 from line 3, col	umn (d)		98,020
Pa		Net income summary. Subtra	act line 10 from line 3, col the organization answe	umn (d)	D, Part IV, line 19, or re	98,020
	11	Net income summary. Subtra Gaming. Complete if the	act line 10 from line 3, col the organization answe	umn (d)	O, Part IV, line 19, or re	98,020
Revenue	11	Net income summary. Subtra Gaming. Complete if the	act line 10 from line 3, col the organization answe ı 990-EZ, line 6a.	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant	· · · · · · · · · · · · · · · · · · ·	98,020 ported more (d) Total gaming (add
Revenue	11	Net income summary. Subtra Gaming. Complete if than \$15,000 on Form	act line 10 from line 3, col the organization answe ı 990-EZ, line 6a.	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant	· · · · · · · · · · · · · · · · · · ·	98,020 eported more (d) Total gaming (add col (a) through col (c))
Revenue	11 rt III	Gaming. Complete if than \$15,000 on Form	act line 10 from line 3, col the organization answe ı 990-EZ, line 6a.	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant	· · · · · · · · · · · · · · · · · · ·	98,020 eported more (d) Total gaming (add col (a) through col (c))
	11 rt III 1	Gross revenue Cash prizes	act line 10 from line 3, col the organization answe ı 990-EZ, line 6a.	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant	· · · · · · · · · · · · · · · · · · ·	98,020 eported more (d) Total gaming (add col (a) through col (c)) 0
Revenue	11 rt III 1 2 3	Gaming. Complete if than \$15,000 on Form Gross revenue Cash prizes Noncash prizes	act line 10 from line 3, col the organization answe 1 990-EZ, line 6a. (a) Bingo	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	98,020 eported more (d) Total gaming (add col (a) through col (c)) 0
Revenue	11 rt III 1 2 3 4	Gaming. Complete if than \$15,000 on Form Gross revenue Cash prizes Noncash prizes Rent/facility costs	act line 10 from line 3, col the organization answe ı 990-EZ, line 6a.	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant	· · · · · · · · · · · · · · · · · · ·	98,020 eported more (d) Total gaming (add col (a) through col (c)) 0 0 0
Revenue	11 rt III	Gaming. Complete if than \$15,000 on Form Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	act line 10 from line 3, col the organization answe 1 990-EZ, line 6a. (a) Bingo Yes	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes % No	(c) Other gaming	98,020 eported more (d) Total gaming (add col (a) through col (c)) 0 0 0
Revenue	11 rt III 2 3 4 5 6	Gaming. Complete if than \$15,000 on Form Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Acceptage in the summary of the summary.	Yes% No No	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes % No umn (d) .	(c) Other gaming Yes % No	98,020 eported more (d) Total gaming (add col (a) through col (c)) 0 0 0 0 0 0
Revenue	11 rt III 2	Gaming. Complete if than \$15,000 on Form Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes% No Subtract line 7 from line 3, column the organization answers a 990-EZ, line 6a. (a) Bingo	umn (d) red "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes % No umn (d) .	(c) Other gaming Yes % No	98,020 eported more (d) Total gaming (add col (a) through col (c)) 0 0 0

b If "Yes," explain:

Sched	ule G (Form 990 or 990-EZ) 2013 The Education Foundation of Baltimore County Public Schools, Inc. 52-1819200 Page 3
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books
	and records:
	Name ▶
	Address ▶
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$0 and the
	amount of gaming revenue retained by the third party ▶ \$0
С	If "Yes," enter name and address of the third party
	Name ▶
	Address ▶
16	Gaming manager information
	Name ▶
	Gaming manager compensation ► \$0
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandatory distributions:
	Is the organization required under state law to make charitable distributions from the gaming proceeds to
-	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
-	or spent in the organization's own exempt activities during the tax year > \$
Part	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization General Information on Grants and Assistance

Part I

The Education Foundation of Baltimore County Public Schools, Inc.

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

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

▶ Attach to Form 990.

	ı
	l
9	l
99	l
Ë	ı
5	ı
₹	ı
3	Ĭ
ŏ	ı
Ś	ı
3	ı
ξ	ı
ξ	ı
2	ı
ā	ı
<u>.s</u>	۱
Ø	۱
돗	ı
≆	ı
3	ı
₽	ı
S	ı
=	ı
₽	ı
p	ı
듩	l
~	1
990	1
9	ı
Ę	l
ō	ł
F)	ł
_	١
Ĭ	ı
ğ	ı
ž	ı
Š	ı
7	ı
×	ı
چ	١
a	١
6	١
盖	١
Ë	١
Ē	١
¥	١
=	۱
	ı

2013	Open to Public Inspection
------	------------------------------

OMB No 1545-0047

Employer identification number 52-1819200

[
[
stantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and
ದಿ

the selection criteria used to award the grants or assistance? . 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	award the gran	ts or assistance? . dures for monitorinc	the use of grant fund	s in the United States			X Yes No
art	Assistance to	Governments ar	nd Organizations in	the United States	s and Organizations in the United States. Complete if the organization ore than \$5,000. Part II can be directed if additional snace is needed	janization answere	d "Yes" to Form 990
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash	(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) Baltimore County Public Schools 6901 N Charles St towson. MD 2120	52-6000886		223,535				various school-based projects
(2)							
(3)							
(4)							
(9)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
	า 501(c)(3) and	government organiz	zations listed in the lin	e 1 table			
3 Enter total number of other organizations listed in the line 1	organizations lis	ted in the line 1 table	le)

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

Schedule I (Form 990) (2013)

Page 2

The Education Foundation of Baltimore County Public Schools, Inc

Schedule I (Form 990) (2013)

(f) 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 22. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Part IV Part III သ 9

SCHEDULE O (Form 990 or 990-EZ)

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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

The Education Foundation of Baltimore County Public Schools, Inc	52-1819200
Form 990, Part III, Line 4d. Program Service Expenses: 124,914, Grants and allocations 0,	
Revenue: 0 Grants for various small school projects	
Form 990, Part VI, Line 11b All director/officers are made aware of the completion of the	
form 990 and offered an opportuunity to review it.	
Form 990, Part VI, Line 19. The audited financial statements and form 990 are available upon	
request for viewing. This information is onn the organizations web site.	
	•
	·
	••••

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

)	Cash	Noncash
1 Federated Campaigns		
2 Membership dues		
3 Fundraising events	56,940	
4 Related organizations	<u> </u>	
5 Government grants (contributions)		
6 All other contributions, gifts, grants, and similar amounts not included above:		
Various small contributions to donor specified projects	218,656	
	<u> </u>	·
Other contributions total	218,656	0
7 Total	275,596	0

The Education Foundation of Baltimore County Public Schools, Inc

2
ō
뒴
ᅙ
≥
=
Other than
<u>ख</u> ∣
#=
-
읟
포
o_{\parallel}
23
اية
Š
انك
<u></u>
e of Ass
<u>a</u>
ਕ
တ
s from Sale
ō∣
#
S
S
Los
5
٠ <u>≒</u> ١
ž
٠,
_
2
6
ne 7 (990)
9
-=
tVII,
>
ť
ਰ
ᅀ

Total Non-Pub	Purchaser	Total		323,972 Dasis at the control of	249,859 249,	Description of
Check if purchaser Date A business Purchaser 2/2/2010 pur 2/2/2/2010 pur 2/2/2/2/2010 pur 2/2/2/2/2010 pur 2/2/2/2/2010 pur 2/2/2/2/2010 pur 2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/	Purchaser	Total Pul		Cost or othe (Enter one fig	Expense of sate and cost of mprove-ments Depreciation	Description of
Check if purchaser Is a Business Date Acquisi 2/2/2010 purchase	Purchaser	Acquisi methr	' 	Cost or othe (Enter one field Cost Cost Cost Cost Cost Cost Cost Cost	Expense of sale and cost of mprove-ments Depreciation	Description of
Check if purchaser Is a business Date 2/2/2010 2/2/20	Purchaser			Cost or othe (Enter one fic	Expense of sale and cost of improve- ments Depreciation	Description of
Check if purchaser Is a business Date 12/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010	Purchaser			Cost or othe (Enter one fig. Cost 24 910	of sale and cost of improve-ments Depreciation	Description of
business Date 18 a business Purchaser acquired 2/2/2010 p 2/2/2010 p 2/2/2010 p 2/2/2010 p 2/2/2011 p 2/2/2011 p 2/2/2011 p 2/2/2011 p 2/2/2010 p 2/2/2010 p	Purchaser			Cost 24.910	cost of improve- ments Depreciation	Description of
business Purchaser acquired 2/2/2010 p 2/2/2/2010 p 2/2/2/2/2010 p 2/2/2/2/2010 p 2/2/2/2/2/	Purchaser			Cost 24 910	ımprove- ments Depreciation	Description of
business Purchaser acquired 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010 2/2/2010	Purchaser			Cost 24.910	ments Depreciation	Docto Mothod
2/2/2010 purchase 2/2/2010 purchase 2/2/2010 purchase 2/2/2010 purchase 5/14/2010 Purchase 2/2/2010 Purchase			11/21/2013		cost	Dasis Meniou
2/2/2010 purchase 2/2/2010 purchase 5/14/2010 Purchase 5/14/2010 Purchase 2/2/2011 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/24/2010 Purchase 5/14/2010 Purchase						
2/2/2010 purchase 5/14/2010 Purchase 2/2/2010 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/2/2010 Purchase 2/2/2010 Purchase 5/14/2010 Purchase			11/21/2013	59,390 47,100	cost	
5/14/2010 Purchase 2/2/2010 Purchase 2/24/2011 Purchase 2/24/2011 Purchase 2/2/2010 Purchase 2/2/2010 Purchase 2/2/2010 Purchase 2/2/2010 Purchase		2/2/2010 purchase	11/21/2013	10,000	cost	
2/2/2010 Purchase 2/24/2011 Purchase 2/2/2010 Purchase 2/2/2010 Purchase 2/2/2010 Purchase 5/4/2010 Purchase		5/14/2010 Purchase	2/10/2014	10,000 6,555	cost	
2/24/2011 Purchase 2/2/2010 Purchase 2/2/2010 Purchase 5/3/2010 Purchase 5/3/4/2010 Purchase			2/10/2014	19,043 11,695	cost	
2/2/2010 Purchase 2/2/2010 Purchase 5/4/2010 Purchase 5/4/2010 Purchase		2/24/2011 Purchase	2/10/2014	11,764 15,005	cost	
2/2/2010 Purchase 5/14/2010 Purchase		2/2/2010 Purchase	2/10/2014	7,886	cost	
5/14/2010 Purchase		2/2/2010 Purchase	6/9/2014	99,369 63,183	cost	
44/4/2000		5/14/2010 Purchase	6/9/2014	22,612 22,789	cost	
וויאיצטטס ורעוכוומצפ		11/4/2006 Purchase	6/9/2014	25,000 24,523	cost	
2/2/2010 Purchase		2/2/2010 Purchase	6/9/2014	28,932 19,633	cost	

Part X, Line 3 (990) - Pledges and Grants Receivable

· · · · · · · · · · · · · · · · · · ·		Pledges and gra		Allowance for dou	ibtful accounts
	Ī	Beginning	End	Beginning	End
1 McGraw Hill	1	0	4,000	0	
2 Discovery education	2	0	4,000	0	
3	3		-		•
4	4				
5	5				
6	6				
7	7				
8	8				
9	9				
10	10				
11 Total pledges and grants receivable	11 [0	8,000	0	0

Part X, Lines 11 and 12 (990) - Investments - Securities

					_Total:	0	530,678	660,022
L		Check if		Check If			Beginning	Ending
		Publicly	Check If	Closely-Held	Number	Value	Balance	Balance
_		Traded	Financial	Equity	of Shares/	at Time of	Book Value	Book Value
	Description	Securities?	Derivatives	Interests	Face Value	Donation	FMV	FMV
_	Europacific Growth fund	×			1,244.28	0	52,310	0
7	Gabelli Equity Income Fund	×			2,853.25	0	53,301	86,824
ო	American funds growth	×			2,056 00	0	79,076	0
4	PIMCO Total return Fund	X			2,022.87	0	21,766	0
က	PIMCO Low Duration	×			3,062 77	0	55,416	31,792
ဖ	Smallcap world fund	×			779 16	0	34,291	0
7	Ariel Investment trust	×			519.31	0	41,181	30,037
∞	PIMCO All Asset Fund	×			4,029.57	0	46,405	51,417
თ	Templeton Global Fund	×			2,374.90	0	29,450	31,610
9	$\overline{}$	X			1,044.59	0	31,863	18,844
7		×			00 0	0	26,098	0
12		×			104 31	0	24,682	24,835
13	Г	×			729 00	0	24,262	29,030
14	I	X			242 92	0	10,577	0
15	Onmega healthcare REIT	X			320 00			11,795
16		X			300.00			16,218
17		×			235.00		v	15,415
18	1	×			860 00			19,995
19	Technology Select Sector SPDR	X			420.00			16,107
20		X			350.00			15,491
21	Dodge & Cox Income fund	×			2,172.28			30,173
22	Dodge & Cox Intl stocl	X			1,198.55			55,661
23		X			2,278.94			25,046
24	Fairholme FDS fund	X			1,165.50			49,674
25		X			852.00			20,398
5 6	_	X			1,685 89			30,464
27	IVY High income fund	×			1,809 95			15,855
28		×			521.36			33,341
29								0
30								0

Total:	252,574
1	195,634
2	35,155
3	21,785
4	
5	
	Total: 1

PtVII1	f	Total:	218,656
1	unrestricted	1	10,952
2	Rodgers Forge	2	7,462
3	Jacksonville	3	10,100
4	Gen scholarships	4	1,220
5	Riderwood	5	20,000
6	24 Tournament	6	5,000
7	Marchione Scholarship	7	5,700
8	Passthrough	8	2,500
9	Hampton Elementary	9	9,507
10	digital Conversion	10	33,000
11	Nottingham Properties	11	1,000
12	Teacher of the year	12	10,000
13	Alt ed Scholarship	13	1,500
14	Pıkesville Hıgh	14	2,215
15	West Towson	15	22,386
16	Pikesville Middle	16	100
17	Holabird Middle	17	2,000
18	world languages china exchange	18	2,069
19	Phelps Scholarship	19	10,685
20	woodholme Scholarship	20	760
21	STEM Collaborative	21	50,000
22	Save-a-limb	22	1,500
23	Clean green Initiative	23	6,000
24	Towson High Shock Scholarship	24	2,000
25	Relay Elementary Skarbek Library	25	1,000
26		26	
27		27	

ptlXIn	1	Total:	252,335
1	Competetive initiative grants to schools	1	38,447
2	Johns Hopkins childrens center	2	700
3	Teacher of the year and Principal of the year awards	3	8,985
4	Training for students '	4	3,111
5	Educational supplies for elementary schools	5	8,509
6	Educational supplies and equipment for STEM programs at 5 elementary schools	6	10,312
7	Stage curtains for patapsco High	7	8,671
8	Technology equipment for 4 elementary schools	8	44,197
9	scholarships	9	26,600
10	Math tournament awards	10	7,500
11	professional development for teachers on new STAT technology	11	8,080
12	Athletic equipment for kenwood High School	12	4,499
13	New school sign and flagpole	13	17,320
14	Rental of facilities for fundraising walks	14 _	3,296
15	Various school field trips	15	10,608
16	Save-a-limb awards to schools	16	1,500
17	Capital Improvements - Glenmar elementary	17	50,000
18		18	
19		19	