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Form 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

nent of the Treasury Internal Revenue Service

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

Open to Public

Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection 7/1/2013 and ending 6/30/2014 For the 2013 calendar year, or tax year beginning D Employer identification number C Name of organization University of Maryland College Pk Fdn Inc Check if applicable Doing Business As Address change Number and street (or P O box if mail is not delivered to street address) 52-2197313 Name change 4603 CALVERT ROAD Telephone number Initial return ZIP code City or town (301) 955-1265 20740 ollege Park Terminated Foreign postal code Foreign country name Foreign province/state/county Gross receipts \$ 67,338,571 Amended return F Name and address of principal officer H(a) Is this a group return for subordinates? Yes X No Application pending Peter Weiler, Pres 1132 Main Adm Bldg, College Pk, MD 20742 H(b) Are all subordinates included? If "No." attach a list (see instructions) X 501(c)(3) 4947(a)(1) or 501(c) () **(**insert no) Tax-exempt status Website: ► www.foundation umd edu H(c) Group exemption number X Corporation Trust Association Other > L Year of formation M State of legal domicile K Form of organization 1999 MD Part I Summary Briefly describe the organization's mission or most significant activities To, receive, hold, invest, manage, use, Activities & Governance dispose of and administer property of all kinds whether absolute or in trust or by way of agency or otherwise, and to make expenditures, to or for the benefit of the University of 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) 60 Number of independent voting members of the governing body (Part VI, line 1b). 60 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total unrelated business revenue from Part VIII, column (C), line 12 6 7a 0 Net unrelated business taxable income from Form 990-T line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h). . 34,974,673 38,917,612 Revenue Program service revenue (Part VIII, line 2g) . 729,484 783,221 Investment income (Part VIII, column (A), lines 3, 4, and 7d) OGDEN, 10 17.318.318 25,556,830 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 11e). 399,516 2,080,908 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 53,421,991 12 67,338,571 33,667,856 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 38,340,370 13 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 Professional fundraising fees (Part IX, column (A), line 11e) 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). 9,297,929 7,974,462 17 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 47,638,299 41,642,318 19 Revenue less expenses Subtract line 18 from line 12. 5,783,692 25,696,253 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) . . 372,826,938 408,115,053 21 Total liabilities (Part X, line 26). 12,272,005 14,710,237 393,404,816 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have exampled this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian Signature of officer Here VP, CFO & Treasurer Michael King Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Check Paid self-employed Preparer Firm's EIN Firm's name **Use Only** Firm's address Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes

For Paperwork Reduction Act Notice, see the separate instructions.

HTA

919-22

Form 990 (2013)

	90 (2013)	University of Maryland College Pk Fdn Inc	52-2197313	Page 2
Pai	rt III	Statement of Program Service Accomplishments		_
		Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	X
1	Briefly de	escribe the organization's mission		
	To, recei	ve, hold, invest, manage, use, dispose of and administer property of all kinds		
	whether	absolute or in trust or by way of agency or otherwise, and to make expenditures,		
	to or for	the benefit of the University of Maryland College Park, its mission, goals, and		
	program	s, or for any or all of the educational support activities that may be conducted by		
2	Did the d	rganization 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 d	rganization cease conducting, or make significant changes in how it conducts, any program		
	services	7	🗌 Yes	X No
	If "Yes,"	describe these changes on Schedule O.	<u> </u>	_
4	Describe	the organization's program service accomplishments for each of its three largest program services,	as measured by	
	expense	s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo	cations to others.	1
	the total	expenses, and revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 13,656,090 including grants of \$ 13,257,303) (Revenue	\$ 26,552	,912)
	Scholars	hip / Fellowship Support - To support outright scholarships and fellowships to students		
	and fello	ws selected by the University of Maryland College Park.		
			• • • • • • • • • • • • • • • • • • • •	
4b	(Code) (Expenses \$ 11,430,340 including grants of \$ 10,240,073) (Revenue	s 19,25 <i>5</i>	5,910)
		c Program Support - To support academic programs of the University of Maryland College Park		
	through	payments for salaries and benefits, operating expenses, conferences, workshops,		
		ums, equipment, and academic memberships		
		•		
4c	(Code) (Expenses \$ 2,838,652 including grants of \$ 2,432,425) (Revenue	\$ 3.65E	040)
40	•	Advancement - To provide funds for services and maintenance of related grounds and	, 4	,,040)
		of the University of Maryland College Park.		
	iacilities	of the officersity of iwalytatio conlege rain.		
4d		ogram services. (Describe in Schedule O)		
	(Expens		95,125)	
_ 4e	Total pro	gram service expenses 40,055,091		

Part	V Checklist of Required Schedules			
			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			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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,			
	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			ŀ
	"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	۰	-:-	
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt	1		
	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	<u> </u>		
	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,	_		-2-1
••	VII, VIII, IX, or X as applicable		30	3075
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° if "Yes," complete		72.20	
-	Schedule D, Part VI	11a	x	
h	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		x
Ь	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		x
e	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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a	Ιx	
ь	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	-	Х
14a		14a		х
	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	l _		
	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		х
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		x
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	x	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		T -	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	l
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	<u> </u>		
	If "Yes," complete Schedule G, Part III.	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Гаі	Checklist of Required Schedules (Communed)			
04	Did the account of a control of 000 of according to the control of a c		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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١		
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	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			
		254		v
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	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)	:		ľ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
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 contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
24	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	24	х	
350	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	^	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	33a		
U	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	220		
-	organization? If "Yes," complete Schedule R, Part V, line 2	36	х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		-	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
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	

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				_				

University of Maryland College Pk Fdn Inc
Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V						X
_						Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a		164			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0	i:		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	repor	table				ţ
	gaming (gambling) winnings to prize winners?				1c	Х	<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	2a		0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re		·		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction)	ons)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?.				3a	X	↓
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu		•		3b	X	╙
4a	At any time during the calendar year, did the organization have an interest in, or a signature or oth						
	over, a financial account in a foreign country (such as a bank account, securities account, or other	financ	ial				١
_	account)?			•	4a	يستند	X
b	If "Yes," enter the name of the foreign country	(FC					
_	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accou		SAR)		-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year				5a	-	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	sactio	17		5b		┝
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did	 I tha	•	•	5c		├
6a	organization solicit any contributions that were not tax deductible as charitable contributions? .	ııne			6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions.	itione	٠.	•	Ua_		┢
U	gifts were not tax deductible?	100115	OI .		6b		
7	Organizations that may receive deductible contributions under section 170(c).		•		05		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or ann	ds				
_	and services provided to the payor?	J. goo			7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	X	\vdash
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it						
	required to file Form 8282?				7c		x
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	t cont	ract?		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ntract	7		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8				7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	file a F	om 1098-0	2?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	-					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor	ng					
	organization, have excess business holdings at any time during the year?	•			8_		
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	•			9a	_	├—
ь	Did the organization make a distribution to a donor, donor advisor, or related person?		•	•	9b	_	
10	Section 501(c)(7) organizations. Enter	ا ۔مدا	1				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b					
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	100					
a	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources	110					
U	against 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 Fo	$\overline{}$	412		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.	,				; :	-
ь	Enter the amount of reserves the organization is required to maintain by the states in which						
	<u>-</u>	13b					
c	Enter the amount of reserves on hand	13c					انــــــــــــــــــــــــــــــــــــ
14a	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 School	ule O			14b	l	1

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

Sect	on 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 60		310			
	If there are material differences in voting rights among members of the governing body, or		鳗		Y		
	if the governing body delegated broad authority to an executive committee or similar			靐	£ -		
	committee, explain in Schedule O				3		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 60					
2	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	2420, 112		
3	Did the organization delegate control over management duties customarily performed by or under	the direct	┝┋┪	^			
3	supervision of officers, directors, or trustees, or key employees to a management company or other		3		v		
			4		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		 				
5	Did the organization become aware during the year of a significant diversion of the organization's a	issets?.	5		X		
6	Did the organization have members or stockholders?	• • •	6		<u> </u>		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or						
	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	1					
	stockholders, or persons other than the governing body?		7b		X		
8	Did the organization contemporaneously document the meetings held or written actions undertake	n during	空		惠州		
	the year by the following		污污	瓕			
а	The governing body?		8a	Χ			
b	Each committee with authority to act on behalf of the governing body?		8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be r	eached					
_	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		9		Х		
Sect	ion B. Policies (This Section B requests information about policies not required by the		inde	}			
OCCC	on b. I dicies (This accion b requests information about policies not required by the	momai Novonao e	7000.	Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?		10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such	chantere	100		<u>~</u>		
U	affiliates, and branches to ensure their operations are consistent with the organization's exempt put		10b				
44.	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of		11a	Х			
11a		ie ming me lomir.	Tia		ŧ:		
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				<i>E</i> .		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	oli in along to another the	12a	<u>X</u>			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes,"	ا ۔ ا				
	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	X	31		
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?		製作制			
а	The organization's CEO, Executive Director, or top management official		15a		X		
b	Other officers or key employees of the organization		15b		Х		
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			ਰ 1 ਤ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement		i e	₽		
	with a taxable entity during the year?		16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	*	4			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe			15.5			
	the organization's exempt status with respect to such arrangements?		16b				
Sect	ion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed See Attached Sta	atement					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99		s only	·)			
	available for public inspection. Indicate how you made these available. Check all that apply	- (CCCCCCC CC ((C)(C)		′			
		inlain in Sahadula (1)					
40		plain in Schedule O)		_			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents,	conflict of interest poli	cy, an	u			
••	financial statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books						
	organization Michael King 4603 Calvert Road, College Park, MD 20740	(301) 955-12	65		-		
	4603 Calvert Road, College Park, MD 20740						

Form 990 (2013)	University of Maryland College Pk	Fdn Inc								52-21973	13 Page 7
Part VII	Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
	Employees, and Independent C	ontractors		-							
	Check if Schedule O contains a re										📙
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees											
•	his table for all persons required to be I	isted. Report co	mpen	sati	on f	or t	he ca	lend	lar year ending v	with or within the	
organization's	· ·										
 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 										
organization, r	of the organization's former directors o nore than \$10,000 of reportable compe	nsation from the	orga	ınıza	atıor	n an	d any	rel	ated organizatio	ns	the
compensated	ithe following order individual trustees employees, and former such persons									_	
Check this	s box if neither the organization nor any	related organiz	ation	con	npe	nsa	ted ar	ny c	urrent officer, dir	ector, or trustee.	
						2)					
	(A)	(B)	(do r	not ch	Pos neck		than c	ne	(D)	(E)	(F)
	Name and Title	Average hours per					is both or/truste		Reportable compensation	Reportable compensation	Estimated amount of
		week (list any		_	_				from	from related	other
		hours for related	Individual t or director	럁	Officer	y en	hest	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
		organizations below dotted	tor tr	na.		employee	6 CQ		(W-2/1099-MISC)		organization and related
		line)	Individual trustee or director	Institutional trustee		8	pen				organizations
				6			Highest compensated employee				
(1) John L.	Lauer	1.00		┢			-				
Board Chair	Lado	0 00	x								
(2) Harvey	L. Sanders	1 00							-		
Immed Past C	hair	0 00	Х								
1-6	H. Rabovsky	1.00	l				İ	l			
Chair Exec Co		0.00	X	_	<u> </u>	<u> </u>	<u> </u>	<u> </u>		_	
(4) V Rayn		1.00									
Chair Investme		0.00 1 00		⊢		-		\vdash			
(5) Timothy Chair Board A		0 00									
	plas Dollenberg	1 00				\vdash		\vdash			
Chair Real Es		0 00	1								
(7) Debora		1.00				Τ					
Chair Comm o		0.00	x								
(8) Geoff J.	Gonella	1.00									
Chair Gvpt Re	lations	0 00	X	L	L	<u> </u>					
	A. Bedingfield	1.00	ı								
Chair Budget		0.00			_		-	_			
(10) Murray	P. Abrams	1.00									
Trustee Charan	1 Akom	0.00		\vdash	\vdash	-		├			. <u> </u>
	(11) Sharon L. Akers 1.00 Trustee 0.00 X										
Trustee (12) Carlton	M Arrendell	1,00		 	\vdash	\vdash		\vdash	 	 	
Trustee		0.00						ĺ			
(13) David N	1. Baggett	1.00		T		\vdash		\vdash			
Trustee	M. F. TORTY	0.00									
(14) Gail Be	man-Masters	1.00									-
Trustee		0 00	Х				1	L_	<u> </u>	L	

Apollo Jets, Inc.

Riddel/All American Sports

Par	t VII Section A. Officers, Directors, Tr	ustees, Key Em	ploye	es,	and	d Hi	ghes	t C	ompensated Em	ployees (contin	ued)	
	(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than o box, unless person is both officer and a director/truste						(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	Micer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensa from th organiza and rela organizat	ie tron ted
	Thomas C. Bırnbach	1 00	1									
Truste	e John M. Brophy	0 00 1 00	† 					\vdash				
Truste		0 00	1			ŀ						
	Albert P. Carey	1 00								-		
Truste		0 00	X									
	Mark T Cıardı	1 00	1	İ		ŀ						
Truste		0 00	_			_		_				
	Nancy Clarvit	1 00	1					ĺ				
Truste		0 00		-	-	┢┈	-	-				
Truste	John P. "Jack" Cullen	1.00 0.00					•		ŀ			
	Michael S Dana	1 00		\vdash	\vdash	t		\vdash				
Truste		0.00	1									
	Ryan L Dearborn											
Truste		0.00										
(23) I	awrence K Doll	1.00										
Truste		0.00		_		Ļ.,		<u> </u>				
	Gordon R. England	1 00		l	İ				:			
Truste		0 00	_	\vdash	┝	₩	-	├				
Truste	Emilio A. Fernandez, Jr.	1 00										
	Sub-total	1 000			1			┢	0	0		
	Total from continuation sheets to Part VII, S	ection A			•	_	•	•	0	943,823		
	Fotal (add lines 1b and 1c)						•	•	0	943,823		<u>-</u>
	Total number of individuals (including but not li							ivec	more than \$100			_
	eportable compensation from the organization	•			4							
											Yes	No
	Did the organization list any former officer, dire							hes	t compensated			
	employee on line 1a? If "Yes," complete Sched										3 X	
	For any individual listed on line 1a, is the sum									,		
	the organization and related organizations great Individual	ater than \$150,00		' "Υ <i>ϵ</i>	es, "	con	npiete	· Sc	chedule J for suc	n 	4 X	
	Did any person listed on line 1a receive or accifor services rendered to the organization? If "Y									/idual	5	X
	on B. Independent Contractors											
(Complete this table for your five highest compe compensation from the organization. Report co year.	•									ax	
	(A)								(B)	1	(C)	-
	Name and business add	Iress							Description of ser	vices (Compensation	1
		n Drive, Rockvill						_	sign Build Servic	es		4,771
		mpus Drive, Col					0742	_	tering Services			8,850
Prozoi	ne Lockers 3 Sam Stratton	Road, Amsterda	am, N	IY 1:	201	0		Cu	istom wood locke	ers	21	3,801

247 W. 30th Street, New York, NY 10001

Total number of independent contractors (including but not limited to those listed above) who received

more than \$100,000 of compensation from the organization

4230 Paysphere Circle, Chicago, IL 60674

Jet Charter Servies

Sporting goods

169,336

132,647

GIII 950 (2010)	Offiversity of Maryland College FK1 diffin
Part VIII	Statement of Revenue

		Check if Schedule O contains	a response or n	ote to any line 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
29 eq	1a	Federated campaigns .	<u>1a</u>	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	0				
S, G	С	Fundraising events	<u>1c</u>	0]		ĺ
Suffe lar /	d	Related organizations	<u>1d</u>	0		1		
S, E	е	Government grants (contributions	s) 1e	0				
itior er S	f	All other contributions, gifts, gran	ts, and					İ
년 등		sımılar amounts not ıncluded abo		38,917,612	<u> </u>			
ont	g	Noncash contributions included in li	nes 1a-1f \$	3,434,468		1		
0	h	Total. Add lines 1a-1f .		•	38,917,612			
9				Business Code				
Program Service Revenue	2a	EDUCATIONAL PROGRAMS			139,294	139,294		
Re	b	MEMBERSHIP DUES & ASSES	SMENTS		29,995			29,995
/ice	С	CONFERENCES & SEMINARS			45,841	45,841		<u> </u>
Sen	d	JOURNALISM NEWS SVC			5,100	5,100		
E	е	SALES AND SUITE PREMIUMS			562,991	562,994		
ogr	f	All other program service revenue			0			
Pr	g	Total. Add lines 2a-2f			783,221			
	3	Investment income (including div	idends, interest,	and	ĺ			
		other similar amounts)	•	▶	25,556,830			25,556,830
	4	Income from investment of tax-ex	cempt bond proc	eeds 🕨				
	5	Royalties		🕨	1,665,000			1,665,000
			(ı) Real	(II) Personal				
	6a	Gross rents	116,200			1		ļ
	b	Less rental expenses						1
	С	Rental income or (loss) .	116,200					ļ
	d	Net rental income or (loss) .		▶	116,200			116,200
	7a	Gross amount from sales of	(i) Secunties	(II) Other				I
		assets other than inventory .	0	0	Ì			
	b	Less cost or other basis						
		and sales expenses .	0	0				
	С	Gain or (loss)	0	0				
	d	Net gain or (loss)		<u></u> ▶				_
<u>e</u>	8a	Gross income from fundraising						
evenue	-	events (not including \$	0			1		ł
eve		of contributions reported on line	<u>-</u>					
r R		See Part IV, line 18		299,708		1		
Other R	b		b	0		1		
δ	c	Net income or (loss) from fundral			299,708	T		299,708
	9a	Gross income from gaming activi	_		200,100			200,100
		See Part IV, line 19		l ol		į		
	ь	Less direct expenses		Ō	į	İ		İ
		Net income or (loss) from gaming		. ▶	0			
		Gross sales of inventory, less	,					
		returns and allowances	a	l ol				
	ь	Less cost of goods sold		0	!	ļ		
	С	Net income or (loss) from sales of		▶	0			
		Miscellaneous Revenue		Business Code	-		-	
	11a				0			
	b				0			
	С				0			
	d	4.14 .1			0			
	е	Total. Add lines 11a-11d .			0			
_	12	Total revenue. See instructions.		. •	67,338,571	753,229		27,667,733

Part IX Statement of Functional Expenses

University of Maryland College Pk Fdn Inc

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all	columns All other or	ganızatıons must c	omplete column (A)	
	Check if Schedule O contains a response or note	to any line in this Pa	rt 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	33,667,856	33,667,856		
2	Grants and other assistance to individuals in the				
	United States. See Part IV, line 22	0		<u> </u>	
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	ا			
-	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages . Pension plan accruals and contributions (include	- U		-	
8	1 101(1) 1100(1) 1 1 1 1 1 1	اه			
9	, , , , <u>-</u>	0			
10	Other employee benefits	0		-	
11	Payroll taxes	U U	-		
''a	Management	ا			
b	Legal	84,089	9,947	74,142	
C	Accounting	147,708	3,347	147,708	
d	Lobbying	147,700		147,700	
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	-01			
ġ	Other (If line 11g amount exceeds 10% of line 25, column	-			
9	(A) amount, list line 11g expenses on Schedule O.)	ا			
12	Advertising and promotion	0			
13	Office expenses	453,789	418,037	35.752	
14	Information technology	201,226	183,813	17,413	· · · · · · · · · · · · · · · · · · ·
15	Royalties	0		,,,,,,	
16	Occupancy	114,566	18,732	95,834	
17	Travel	400,911	400,899	12	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	146,944	146,944		
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	16,701	0	16,701	0
23	Insurance	70,142	23,398	46,744	
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.)		<u> </u>		·
а	Repairs / Renovations / Maintenance	384,605	378,579	6,026	
þ	Reimbursement to UMCP	645,104		645,104	
C	Public Relations & Promotions	3,167,082	2,931,059	236,023	
d	Outside Services	1,465,435	1,425,754	39,681	722
е	All other expenses	676,160	450,073	53,370	172,717
25	Total functional expenses. Add lines 1 through 24e	41,642,318	40,055,091	1,414,510	172,717
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs			1	
	from a combined educational campaign and fundraising solicitation. Check here				
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

Total liabilities and net assets/fund balances

Page **11**

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest-bearing 2 Savings and temporary cash investments . 17,426,872 2 25,930,022 Pledges and grants receivable, net . . 3 54,152,980 3 50,136,360 4 Accounts receivable, net . . . 4 244,507 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 797,236 716,771 Inventories for sale or use 8 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D **b** Less accumulated depreciation . . . 100,000 10b 10c 1,528,517 11 Investments—publicly traded securities 16,075,094 11 16,609,347 12 284,105,819 12 Investments—other securities. See Part IV, line 11 312,210,776 13 Investments—program-related. See Part IV, line 11. 13 0 14 Intangible assets ol 14 0 168,937 15 Other assets See Part IV, line 11. . 15 738,753 16 372,826,938 Total assets. Add lines 1 through 15 (must equal line 34) . 16 408,115,053 4,880,957 9,770,069 17 17 18 18 19 Deferred revenue 2,158,683 19 1,856,118 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties . 0 23 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 5.232,365 25 3,084,050 26 Total liabilities. Add lines 17 through 25 12,272,005 14,710,237 26 Organizations that follow SFAS 117 (ASC 958), check here | X | and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . . . 10,265,864 13,188,346 Temporarily restricted net assets . 28 139,127,328 28 156,376,864 Permanently restricted net assets . . . 211,161,741 29 223,839,606 Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 360,554,933 393,404,816 33

372,826,938

Form 9	190 (2013) University of Maryland College Pk Edn Inc	52-219/	<u>313</u>	Page 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	67,3	38,571
2	Total expenses (must equal Part IX, column (A), line 25)	2	41,6	42,318
3	Revenue less expenses Subtract line 2 from line 1	3	25,€	96,253
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	360,5	54,933
5	Net unrealized gains (losses) on investments	5	7,3	26,840
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Pnor period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1	73,210
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	393,4	04,816
Part	<u> </u>			_
	Check if Schedule O contains a response or note to any line in this Part XII			
_	A		Y	s No
1	Accounting method used to prepare the Form 990		-	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O	ŀ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	-	2a	X
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		Za	
	reviewed on a separate basis, consolidated basis, or both	1		}
				li:
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b >	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		H	l (
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis X Both consolidated and separate basis		į	
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?	. L	2c >	
	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?	<u>L</u>	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	
		-	orm 99	0 (2013)

Continuation Sheet for Form 990

Page 1

Name of the Organization

Employer identification number

University of Maryland Coll	ege Pk Fdn Inc						52	2-21	97313		
Part VII Section A	Continuation of Off		rs, 1	Trus	stee	es,	Key	En	ployees, and	Highest	
(A	Compensated Emp	Oyees (B)	_			C)			(D)	(E)	(F)
Name a		Average	Posi	tion (k all 1	that ap		Reportable	Reportable	Estimated
		hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(26) Richard M. Finkelster Trustee	n	1 00 0 00	x								
(27) Eric S. Francis		1.00									
Trustee		0 00	Х	$oxed{oxed}$			<u> </u>				
(28) Andrew J. Gessow		1.00									
Trustee		0.00		<u> </u>	<u> </u>	<u> </u>	<u> </u>				
(29) Suzanne D Hillman	·	1.00									
Trustee (30) All Hiros		0 00 1.00		┢	⊢	-	 	-			
(30) Ali Hirsa Trustee		0.00				1					
(31) Clifford M. Kendall		1.00	_	├		 					
Trustee		0 00				1					
(32) Christopher E. Kubas	sik	1 00									
Trustee		0 00	Х								
(33) Ralph L. Lary		1.00	•				1				
Trustee		0 00	X	<u> </u>	_	ļ.,	ļ	ļ			
(34) Karen B. Levenson		1 00									
Trustee (35) Paul S. Mandell	 .	0 00 1 00	-	┢	\vdash	-	╁	 			
Trustee		0 00	1								
(0.0) December 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 00	 ^	\vdash	\vdash	 	 				
Trustee		0 00	Х								
(37) Neil Moskowitz		1 00									
Trustee		0 00		<u> </u>		L	<u> </u>				
(38) Shelley Mulitz		1 00	1		l						
Trustee		0 00		-		-	<u> </u>				
		1 00 0 00	1								
Trustee (40) Karabelle Pızzıgatı		1 00								-	
Trustee		0.00									
(44) Karan A Diamir		1 00		T			 			_	
Trustee		0 00	Х			L			_		
		1.00									
Trustee		0.00		<u> </u>	_	_	<u> </u>	<u> </u>			
Trustee		1.00 0.00									
(44) Jeffrey A Rivest Trustee		1.00 0.00									
(45) Steven M. Rotter		1 00		T	 	T	†				
Trustee		0 00									
(46) Paul L Saval		1.00									
Trustee		0 00	X				<u> </u>		<u> </u>		

Continuation Sheet for Form 990

Page 2 of 2

Name of the Organization

Employer Identification number

University of Maryland College Pk Fdn Inc 52-2197313

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest

(A)	(B) Average	Poer	tion /		C) kalli	that ap	nlv)	(D)	(E)	(F)
Name and title	hours per week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	т —	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(47) Margaret Scott Schiff	1.00				<u> </u>					
Trustee	0.00	х								
(48) Phillip L Schneider	1.00									
Trustee	0.00	х					1			
(49) Michelle Smith	1 00							-		
Trustee	0.00	х		l					i i	
(50) Robert W "Turtle" Smith	1 00		Г		Г			_		•
Trustee	0 00	х								
(51) Charles D "Chip" Sollins	1 00		Τ		T	i			 	
Trustee	0.00	Х								
(52) Craig A. Thompson	1.00		T					v=		
Trustee	0.00	х				1				
(53) Pedro E Wasmer	1.00									
Trustee	0.00	х								
(54) John Alahouzos	1 00		┢	\vdash			Г			
Trustee	0.00	Х					i			
(55) Alma Gildenhorn	1 00		t							
Trustee	0.00	Х					!			
(56) Phillip Horvitz	1.00		t							
Trustee	0.00	Х					1			
(57) Matthew Mendis	1 00									
Trustee	0 00	Х								
(58) Timmy Ruppersberger	1 00							•		
Trustee	0 00	Х								
(59) Thomas Scholl	1.00	Ť	T	Г	<u> </u>					
Trustee	0.00	Х								
(60) Michael Schwab	1 00		T		Г		T			
Trustee	0 00	Х								
(64) Deter Meiler	4 00									
President	36 00			x					409,244	
(62) Barbara Quinn	8 00			Ť						
VP / Secretary	32 00			х			x		188,593	
(63) Michael King	12.00								1	
VP / Treasurer	28.00			x					198,610	
(64) David Silver	36 00		T	<u> </u>	П				122,2.3	<u> </u>
Finance Director	4 00			x	l				147,376	
(65)				Ť					,	
(66)				_	-	<u> </u>				
(67)	 	_	\vdash	\vdash	\vdash		-		 	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

		College Pk Fdn I						<u> </u>		<u> 19/313</u>		
Part I			narity Status (All org						<u>nstructio</u>	ns.		
The orga	•	•	tion because it is (For		_		-	•				
1 崖	A church, co	nvention of chur	ches, or association of	churches	described	d in sectio	n 170(b)((1)(A)(i).				
2	A school des	cribed in section	n 170(b)(1)(A)(ii). (Atta	ch Sched	ule E.)							
3	A hospital or	a cooperative h	ospital service organiza	ation desc	cribed in s	ection 17	0(b)(1)(A))(iii).				
4	•	search organiza me, city, and sta	tion operated in conjunte	ction with	a hospita	l describe	d ın secti	on 170(b)	(1)(A)(iii)	. Enter t	he 	
5 X			the benefit of a college Complete Part II.)	e or univei	rsity owne	d or opera	ated by a	governme	ental unit d	describe	d	
6	A federal, sta	ate, or local gove	ernment or government	tal unit de:	scribed in	section 1	70(b)(1)(A)(v).				
7 🗀			receives a substantia 1)(A)(vi). (Complete Pa		s support f	from a gov	vernmenta	al unit or f	rom the g	eneral p	ublic	
8	•		in section 170(b)(1)(A		mplete Pa	rt II)						
9	An organizat receipts from support from	tion that normally activities related gross investment	receives (1) more that d to its exempt function it income and unrelate after June 30, 1975. S	an 33 1/39 ns—subje ed busines	% of its suj ct to certa ss taxable	pport from in exception	ons, and ((2) no moi on 511 tax	re than 33	1/3% c	f its	;
10	An organizat	ion organized ar	nd operated exclusively	to test fo	r public sa	afety See	section 5	509(a)(4).				
11 e	purposes of 509(a)(3). Clab Type By checking persons other	one or more pub neck the box tha I b T this box, I certify	that the organization in managers and other	eations des supporting lII–Func s not cont	scribed in g organiza tionally int trolled dire	section 56 ation and 6 egrated ectly or inc	09(a)(1) ocomplete d	r section in section i	509(a)(2) through 1 on-function ore disqui	See se 1h. nally in alified	tegrate	d
f			written determination	from the I	RS that it	ıs a Type	I. Type II.	or Type I	II support	ına		
•	_	check this box				.с с . , рс	., . , po,			.		
g	_	•	he organization accept	ted any gi	ft or contri	bution fro	m any of	the				
	following per	sons?										
	(i) A pers	on who directly	or indirectly controls, e	ither alone	e or togeth	ner with pe	ersons de	scribed in	(II)		Yes	No
			erning body of the sup			?				11g(i)		
			person described in (i)							11g(iı)		
_		-	y of a person described					• •		11g(III)	l	
<u>h</u>		T	tion about the support	T		1		 .		1		
	e of supported ganization	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	ou notify nization in of your port?	organiza (i) organ	Is the ition in col ized in the S ?	(VII) An	ount of ma support	inetary
				Yes	No	Yes	No	Yes	No			
(A)												
					ļ			-	<u> </u>	<u> </u>		
(B)												
(C)												
(D)												
(E)												
				F						+		
Total				i				ii.		ļ		0

Total

Schedule A (Form 990 or 990-EZ) 2013 University of Maryland College Pk Fdn Inc. Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Gifts, grants, contributions, and membership fees received (Do not 41,768,190 43,520,026 42,876,925 34,974,673 202,057,426 include any "unusual grants"). 38,917,612 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 41,768,190 43.520.026 42.876.925 34,974,673 38,917,612 202,057,426 Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 202,057,426 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Amounts from line 4 41,768,190 43,520,026 42,876,925 34,974,673 38,917,612 202,057,426 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 8,837,093 sources 7,355,535 11,787,226 17,318,318 25,556,830 70,855,002 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.) 11 Total support. Add lines 7 through 10. . 272.912.428 Gross receipts from related activities, etc. (see instructions) . . . 12 13 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) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) . . . 14 74 04% 15 Public support percentage from 2012 Schedule A, Part II, line 14. . . . 15 84 19% 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ► X 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

supported organization

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	in the organization land to qualify a			F			
	tion A. Public Support						
Cale	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						0
_	received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise	-					
	sold or services performed, or facilities furnished						
	in any activity that is related to the						_
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						_
	unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						<u>0</u>
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons				<u> </u>		0
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
С	Add lines 7a and 7b	0	_0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6)					L	0
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	o	0	o	0	اه	0
э 10а	Gross income from interest, dividends,	<u></u>					
IUa	payments received on securities loans,						
	rents, royalties and income from similar sources						0
_	· •					·	
O	Unrelated business taxable income (less						
	section 511 taxes) from businesses						0
	acquired after June 30, 1975					0	0
C	Add lines 10a and 10b	0	0	0	0		0
11	Net income from unrelated business						
	activities not included in line 10b, whether						•
	or not the business is regularly carned on						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV)						^
40	•						0
13	Total support. (Add lines 9, 10c, 11, and 12.)	o	o	0	0	o	0
14	First five years. If the Form 990 is for the organization						
14							▶□
0				 <u>.</u>	<u> </u>	· · · · · ·	
	tion C. Computation of Public Support		- 401 (5)			45	0.000/
15	Public support percentage for 2013 (line 8, column	• •				15	0.00%
16 Soo	Public support percentage from 2012 Schedule A,				· · ·	16	0.00%
	tion D. Computation of Investment Inco			mn (6)	_	17	0 00%
17 18	Investment income percentage for 2013 (line 10c, or investment income percentage from 2012 Schedul	• • •	•		• •	18	0.00%
10 19a	33 1/3% support tests—2013. If the organization			and line 15 is mo			0,0078
ısa	not more than 33 1/3%, check this box and stop he						▶□
b	33 1/3% support tests—2012. If the organization	-	•		-		. 🟲 🗀
	line 18 is not more than 33 1/3%, check this box ar					•	
20	Private foundation. If the organization did not che					•	H

Schedule A (Form	990 or 990-EZ) 2013	University of	Maryland College	Pk Fdn Inc			52-2197313	Page 4
Part IV	990 or 990-EZ) 2013 Supplemental	Information.	Provide the exp	planations requ	iired by Part II,	line 10, Pa	art II, line 17a c	r 17b,
	and Part III, line	12. Also con	nplete this part t	for any addition	nal information.	(See instr	uctions).	
				-				
·								
					·			
					,			
								·

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) ► See separate instructions.

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

and its instructions is at www.irs.gov/form990. 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.

		# NOT EI F F700 /-I		(/L)\	D. Dt
	, ,, , •	ns that have NOT filed Form 5768 (elections) Yes," to Form 990, Part IV, line 5 (Pro		, .,	•
	-	res, to Form 990, Fact tv, line 5 (Froz	ky rax) or Form 99	U-EZ, Part V, line 35	c (Proxy Tax), then
	ection 301(c)(4), (3), or (6) o	iganizations Complete Part III			mployer identification number
	ersity of Maryland College	Pk Fdn Inc			52-2197313
		the organization is exempt und	ler section 501	(c) or is a section	
1		he organization's direct and indirect p			
2	Political expenditures				▶ \$
3	Volunteer hours				
Par	1 LB Complete if t	the organization is exempt und	ler section 501	(c)(3).	
1		excise tax incurred by the organization			▶ \$
2		excise tax incurred by organization m			
3		ed a section 4955 tax, did it file Form			
4a	Was a correction made?		-		Yes No
b	If "Yes," describe in Part				
		the organization is exempt und	ler section 501	(c), except section	on 501(c)(3).
1		expended by the filing organization f			
	activities				. ▶ \$
2	Enter the amount of the f	iling organization's funds contributed	to other organizati		•
	for section 527 exempt fu	inction activities			> \$
3		penditures. Add lines 1 and 2 Enter h			
					·
4		file Form 1120-POL for this year?			
5		ses and employer identification numb			
		ents For each organization listed, en ntributions received that were prompt			
		fund or a political action committee			
	 	<u> </u>		l	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr filing organization	
				funds If none, enter	-0- promptly and directly delivered to a separate
		'			political organization If
					none, enter -0-
(1)	-				
'''					
(2)					
(3)					
(4)					
(5)					
(6)					

			_				
P	art II-A Complete if the organi	zation	is exempt	under section 5	01(c)(3) and file	d Form 5768 (elec	ction
_	under section 501(h)).				nd link in Dowl IV	and affiliated and	
Α	Check ▶ if the filing organization		•			_	up member's
В	name, address, EIN, Check ▶ if the filing organization						
	Limits or (The term "expenditure		ing Expendi			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influen-	ce publi	c opinion (gra	ass roots lobbying).			0
b	Total lobbying expenditures to influen	ce a leg	slative body	(direct lobbying)			0
С	Total lobbying expenditures (add lines	1a and	l 1b)			0	0
d	Other exempt purpose expenditures.						0
е	Total exempt purpose expenditures (a	idd lines	s 1c and 1d) .		•	0	0
f	Lobbying nontaxable amount. Enter the	ne amou	int from the fo	ollowing table in bot	h		
_	columns					0	0
- {	If the amount on line 1e, column (a) or	(b) is:	The lobbying	ng nontaxable amou	ınt is:		
	Not over \$500,000 '		20% of the a	amount on line 1e.			
[Over \$500,000 but not over \$1,000,000		\$100,000 pl	us 15% of the excess	over \$500,000		
ļ	Over \$1,000,000 but not over \$1,500,000			us 10% of the excess		4. The state of th	
ļ	Over \$1,500,000 but not over \$17,000,000			us 5% of the excess of	over \$1,500,000		
\Box	Over \$17,000,000		\$1,000,000	·			ANY STATE OF THE S
g	Grassroots nontaxable amount (enter					0	<u> </u>
h	Subtract line 1g from line 1a. If zero o	•			•	0	0
i	Subtract line 1f from line 1c. If zero or					0	0
j	If there is an amount other than zero of	on eithei	r line 1h or lin	ie 1i, did the organiz	zation file Form 472	:0 reporting	
	section 4911 tax for this year? .	• •		· · · · · ·	· · · · · ·	· · · ·	Yes No
	(Some organizations columns	that ma	de a section	g Period Under Seo 501(h) election do ructions for lines 2	not have to comp		
	Lo	bbying	Expenditur	es During 4-Year A	veraging Period	, ·- ·	
	Calendar year (or fiscal year beginning in)		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount		0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))						0
_c	Total lobbying expenditures		0	0	0	0	0
_d	Grassroots nontaxable amount		0	0	0	0	0
_ <u>e</u>	Grassroots ceiling amount (150% of line 2d, column (e))				<u>.</u>		0
f	Grassroots lobbying expenditures		_	_			

Schedule C (Form 990 or 990-EZ) 2013

University of Maryland College Pk Fdn Inc 52-2197313 Schedule C (Form 990 or 990-EZ) 2013 Page 3 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)). (b) For each "Yes," response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying activity. No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers?.... b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Х Х d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? Χ f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? . Х h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? . . . j Total. Add lines 1c through 1i. . 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? **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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? . . . Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year. 2a **b** Carryover from last year 2b 2c 0 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 0 Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Unive	ersity of Maryland College Pk Fdn Inc orm 990 or 990-EZ) 2013	52-2197313
	Supplemental Information (continued)	Page 4
Part IV	Supplemental information (continued)	····
·		
	•	
		·
		·

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

Department of the Treasury Internal Revenue Service

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

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Name	of the organization	Employer identification number
Univ	ersity of Maryland College Pk Fdn Inc	52-2197313
Par		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year) .	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	donor advised
5	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fu	
•	used only for charitable purposes and not for the benefit of the donor or donor advisor, or i	
	purpose conferring impermissible private benefit?	
_		· · · · · · · · · · · · · · · · · · ·
Par		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	<u>.</u>
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	of an historically important land area
	Protection of natural habitat Preservation of	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	in the form of a conservation
-	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	. 2a
b	Total acreage restricted by conservation easements	. 2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
•	historic structure listed in the National Register	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or termi	· • • • • • • • • • • • • • • • • • • •
•	during the tax year	mater by the organization
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, l	handling of
-	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ea	
_	>	3 ,
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easem	nents during the year
	▶ \$	3 1,11
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	section
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue a	and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's finan	
	the organization's accounting for conservation easements	
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, o	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 re-	venue statement and halance sheet
10	works of art, historical treasures, or other similar assets held for public exhibition, education	
	of public service, provide, in Part XIII, the text of the footnote to its financial statements that	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue.	
D	works of art, historical treasures, or other similar assets held for public exhibition, education	
	of public service, provide the following amounts relating to these items	m, or research in futilierance
	(i) Revenues included in Form 990, Part VIII, line 1	▶ ¢
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets	
2		
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these ite	
a	Revenues included in Form 990, Part VIII, line 1	

.		- 1 O - II Dia Fila i					52.240	7242	_	
	ule D (Form 990) 2013 University of Maryla III Organizations Maintaining			rical Ta	00011800 0	r Oth	52-2197			age 2
Part	Using the organization's acquisition, ac							is (con	muea	
3	use of its collection items (check all that		ecolos, c	neck any	or the followi	ng ma	i are a significant			
_	Public exhibition	(арріу)	aП	Loon	or exchange	orograi	me			
a	=		_ =		_	-			11	
b	Scholarly research		e X	Other	Statue do	nated	by artist for sale t	o benefit	gallery	<u></u>
C	Preservation for future generation									
4	Provide a description of the organizatio Part XIII.	n's collections and e	explain ho	w they fu	rther the orga	anızatı	on's exempt purpo	se in		
5	During the year, did the organization so assets to be sold to raise funds rather t							Ye	s X	No
Part	Escrow and Custodial Arra Complete if the organization 990, Part X, line 21.		o Form	990, Par	t IV, line 9,	or rep	orted an amou	nt on Fo	rm	_
1a	Is the organization an agent, trustee, cuincluded on Form 990, Part X?					her as	sets not	Ye	s 🔲	No
b	If "Yes," explain the arrangement in Pa	rt XIII and complete	the follow	ving table		_				
							<u> </u>	Amount		
С	Beginning balance					10				0
d	Additions during the year					10			_	
е	Distributions during the year					10				
f	Ending balance			•		1	<u>f</u>		_	0
2a	Did the organization include an amount	on Form 990, Part	X, line 21	?.				Ye	s 🔼	No
b	If "Yes," explain the arrangement in Pa	rt XIII Check here if	the expla	anation ha	as been provi	ded ın	Part XIII			
Part	V Endowment Funds.									
	Complete if the organization	answered "Yes" t	o Form	990, Par	t IV, line 10	١.				
		(a) Current year	(b) Pno		(c) Two years		(d) Three years back	(e) Fou	ır years	back
1a	Beginning of year balance	248,197,000	250	,503,000	250,63	9,000	214,421,00	0 1	89,504	4,000
b	Contributions	12,700,000	7	,048,000	10,26	1,000	7,351,00	0	5,77	5,000
С	Net investment earnings, gains,									
	and losses	27,756,0 <u>00</u>	13	,919,000	1,70	9,000	35,041,00	0	21,158	8,000
d	Grants or scholarships	6,283,000	13	,736,000	8,41	6,000	3,57 <u>4,00</u>	0		
е	Other expenditures for facilities									
	and programs	0		,281,000						
f	Administrative expenses	4,107,000	3	,256,000		0,000	2,600,00			6,000
g	End of year balance [278,263,000		,197,000	250,50		250,639,00	0 2	14,42	<u>1,000</u>
2	Provide the estimated percentage of the	e current year end b	oalance (l	ine 1g, co	olumn (a)) hel	d as				
а	Board designated or quasi-endowment		4%							
b	Permanent endowment	76%								
С	Temporarily restricted endowment	20%	_							
	The percentages in lines 2a, 2b, and 2c									
3a	Are there endowment funds not in the p	possession of the or	ganızatıo	n that are	held and ad	ministe	red for the	г		
	organization by							- m	Yes	No
	(i) unrelated organizations							3a(i)	.	_ X
	(ii) related organizations							3a(ii)	X	
b	If "Yes" to 3a(II), are the related organiz					•		3b	Χ _	
4	Describe in Part XIII the intended uses		s endown	nent fund	S			_		
Part	VI Land, Buildings, and Equip Complete if the organization		to Form	990, Pai	rt IV, line 11	a. Se	e Form 990, Pa	rt X, lıne	10	
	Description of property	(a) Cost or oth		(b) Co	ost or other	(с) Accumulated	(d) Bo	ok value	;

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	789,782	L	789,782
b	Buildings	0	446,918	8,595	438,323
С	Leasehold improvements	0	208,518	8,106	200,412
d	Equipment	0	0	0	0
е	Other	0	100,000	0	100,000
Tota	I. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X,	column (B), line 10(c)) <u> </u>	1,528,517

Schedule D (Fon	m 990) 2013 University of Maryland Coll	lege Pk Fdn Inc		52-2197313	Page 3
Part VII	Investments—Other Securities				
	Complete if the organization ans	swered "Yes" to Form 99	0, Part IV, line 11b. See Forr	m 990, Part X	<u>, l</u> ine 12.
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r		
(1) Financial	derivatives	0			
(2) Closely-h	eld equity interests	0			
	oney Market & ST Investments	40,351,066	F		
(A) Fixed	ncome Investments	31,419,121	F		
(B) Private	Eguity Investments	39,888,660	F		
(C) Real E	state Investments	24,735,369	F		
	te Return Investments	77,055,233			
	d Global & US Equity	92,761,327			
	nd Proton Treatment LLC - Equity	1,000,000			
(G) Maryla (H)	nd Proton Treatment LLC - Fixed Inco	5,000,000	F 		
Total. (Column (b)	must equal Form 990, Part X, col (B) line 12)	312,210,776			
Part VIII	Investments—Program Relate	d.			_
	Complete if the organization ans		0, Part IV, line 11c. See Forr	n 990, Part X	, line 13.
-	(a) Description of investment	(b) Book value	(c) Method of va 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 ans	swered "Yes" to Form 99	0, Part IV, line 11d. See Forr	m 990, Part X	, line 15.
	(a)	Description	-	(b) Book v	/alue
<u>(1)</u>					
(2)					
_(3)	<u></u>				
(4)					
(5)					
(6)					
(7)		 			
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col	(B) line 15)	<u>.</u>		0
Part X	Other Liabilities.			_	
	Complete if the organization and line 25.	swered "Yes" to Form 99	0, Part IV, line 11e or 11f. Se	ee Form 990,	Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal	income taxes	0	1		
(2) Funds F	leld for M-Club	0	1		
(3) Annuitie		3,080,448	Į		
	nds Held for Others	3,602	1		
_(5)		-	ļ		
(6)			1		
<u>(7)</u>		·	1		
(8)		· -	1		

Schedule D (Form 990) 2013 University of Maryland College Pk Fdn Inc

52-2197313

Page 4

Schedule D (Form		52-2197313 Page 5
Part XIII	Supplemental Information (continued)	
	- Cappione national and Continuous	
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	•••••••••••••••••••••••••••••••••••••••	
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SCHEDULE G (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization					Employer Identificati	on number
University of Maryland College Pk Fdn					52-21	
Part I Fundraising Activities Form 990-EZ filers are				ered "Yes" to For	m 990, Part IV, lır	ne 17.
1 Indicate whether the organizatio				ng activities. Check	all that apply	
a X Mail solicitations	manood ramas amou			of non-government of		
b X Internet and email solicitation	ns	=		of government grant		
c X Phone solicitations		_		raising events	•	
d X In-person solicitations		g [X] S	pecial lund	raising events		
2a Did the organization have a writt	ten or oral agreeme	nt with any	ındıvidual	(including officers, o	directors, trustees o	г
key employees listed in Form 99						X Yes No
b If "Yes," list the ten highest paid	individuals or entitle	es (fundrais	sers) pursu	ant to agreements ι	under which the fun	draiser is
to be compensated at least \$5,0	00 by the organizati	ion.		_		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody or	draiser have r control of utions?	(IV) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
		<u> </u>	ullulis.		col (i)	organization
		Yes	No			
Washburn & McGoldrick Inc Step 10 New Loudon Road Ste 210 Latham	Fundraising NY Counsel		x	0	44,075	0
2				0	0	0
3	 					U
4				0	0	0
				0	0	0
5				0	0	0
6			;	0	0	0
7						
8				0	0:	0
9	-	<u> </u>		0	0	0
40				0	. 0	0
10				0	0	0
Total			•	٥	44,075	0
3 List all states in which the organ	ization is registered	or licensed	to solicit	contributions or has	been notified it is e	xempt from
registration or licensing.					-	
AK, AL, AR, AZ, CA, CO, CT, DC, FL, (, NM, NY, OH, OK, OR, PA, RI, SC, TN	J, UT, WA, WI, WV	LA, MA, MI		NIO, MIS, NO, I		
					·	
					·	
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				·		
•						

P	art II		Complete if the organi			
		more than \$15,000 of events with gross rece	-	=	come on Form 990-EZ	, lines 1 and 6b. List
		events with gross rece	(a) Event #1 ien's Lacrosse Golf E (event type)	(b) Event #2 SOCIATON/Initiative Sile (event type)	(c) Other events 18 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	30,020	57,811	211,877	299,708
ď	2	Less Contributions			0	0
	3	Gross income (line 1 minus line 2)	30,020	57,811	211,877	299,708
	4	Cash prizes .			0	0
	5	Noncash prizes			0	0
Oirect Expenses	6	Rent/facility costs			0	0
ot Exp	7	Food and beverages			0	0
Dire	8	Entertainment			0	0
	9	Other direct expenses .			0	0
	10 11	Direct expense summary Add Net income summary. Subtra	ct line 10 from line 3, colu	mn (d)		(0) 299,708
Pa	rt III	Gaming. Complete if than \$15,000 on Form		ered "Yes" to Form 990	D, Part IV, line 19, or re	eported more
Revenue		11an 410,000 0111 01111	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue .				0
ses	2	Cash prizes				0
Direct Expenses	3	Noncash prizes				0
Direct	4	Rent/facility costs				0
_	5	Other direct expenses				0
	6	Volunteer labor	Yes <u>%</u> No	Yes % No	Yes <u>%</u> No	
	7	Direct expense summary. Add	d lines 2 through 5 in colu	mn (d)	•	(0)
	8	Net gaming income summary	Subtract line 7 from line	1, column (d)		0
9		nter the state(s) in which the or	= = =	each of these states?.		Tyes No

Schedule G (Form 990 or 990-EZ) 2013 University of Maryland College Pk Fdn Inc

52-2197313 Page 2

Sched	tile G (Form 990 or 990-EZ) 2013 University of Maryland College Pk Edn Inc 52-2197313 Page 3	<u> </u>
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	2
b	An outside facility	<u>,</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name ▶	-
	Address ►	-
15a	Does the organization have a contract with a third party from whom the organization receives gaming	
	revenue?	
b	If "Yes," enter the amount of gaming revenue received by the organization \$\bigselow\$ \$ 0 and the amount of gaming revenue retained by the third party \$\bigselow\$ \$ 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	
а	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	
D	or spent in the organization's own exempt activities during the tax year \$ \$ 0)
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	
	additional intollination (acc instructions).	-
		-
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		-
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		_
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		-
-		-
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SCHEDULE (Form 990)

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

Comple

▶ Attach to Form 990.

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lete If the organization answered "Yes" to Form 990, Part IV, Ilne 21 or 22.	
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梊	

OMB No 1545-0047

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

General Information on Grants and Assistance

University of Maryland College Pk Fdn Inc

Part I

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer Identification number

52-2197313

December to Dark IV the community in proceedings for monitoring the use of grant finds in the United States.	an records to sut award the grants	bstantiate the amouston assistance?	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ance?.	stance, the grantees' e	eligibility for the grants or	or assistance, and	. X Yes No
art	Assistance to	Governments a	nments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990.	n the United States	5. Complete if the orc	ganization answere	d "Yes" to Form 990
	any recipient th	nat received more	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	can be duplicated	if additional space is	needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) University of Maryland College Par 2119 Main Administration Building Coll	52-6002033	170 (c) (1)	33,667,856				Scholarship/Fellowship
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)						:	
(12)	-						
	1 501(c)(3) and ge	. =	nt organizations listed in the line 1 table.	table			
3 Enter total number of other organizations listed in the	rganizations liste	ed in the line 1 table				▲ .	1

For Paperwork Reduction Act Notice, see the instructions for Form 990. $_{\rm HTA}$

Schedule I (Form 990) (2013)

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) Schools, Colleges and the Office of Student Financial Aid The committees apply criteria in each agreement and make scholarship award appropriate paperwork is provided to the Foundation to process a reimbursement to the University for the scholarship awarded. Other decisions based on the qualifications of the candidate. The University pays for the award based on the award letter. Afterwards, the Part I Line 2 The University of Maryland College Park awards scholarships per review by Scholarship Committees in the individual University of Maryland College Park expenses (salary, benefits, facility, operating expenses, etc.) are paid through the University (d) Amount of non-cash assistance accounting system and are reimbursed by the Foundation upon submission of the appropriate documentation (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

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

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

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service Name of the organization

University of Maryland College Pk Fdn Inc

Inspection Employer identification number

52-2197313

OMB No 1545-0047

Open to Public

Par	t I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel			ł
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			_
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		!	
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Χ
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			,
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		:	
	compensation contingent on the net earnings of			
a	The organization?	6a		<u> X</u>
b	Any related organization?	6b		X
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
,	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was	<u> </u>		
	subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Х
•	If "Vac" to line 0, did the expenses on also follow the rebuttable procures transposedure described			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		
	regulations section so tool o(c).	ן ס		

52-2197313

University of Maryland College Pk Fdn Inc Schedule J (Form 990) 2013

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Section A, line 1a, applicable column (D) and (E) amounts for that individual.

NOTE, I DE SUM OF COLUMNS 15 (I)—(III) FOR EACH INSECTION OF THE TOTAL STATE OF THE TOTAL	nase	/O Probability of	Valual must equal the total amount of Form 350, Part VII.	C composition	UII A, III IE 18, ADVIILA	חום רחווווו והז שווח ו	allitudills lui tilat ill	Jiviqual,
(A) Name and Title		o imponanti (a)	outcook & stand bit	(iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in
		compensation	compensation	reportable compensation	compensation			pnor Form 990
Peter Weiler	ε						0	
1 President	€	409,244				16,001	425,245	
Barbara Quinn	Θ						0	
2 VP / Secretary	(E)	188,593			13,238	13,520	215,351	
Michael King	ε						0	
3 VP / Treasurer	€	198,610				13,356	211,966	
	€	1			4 4 4 7 1			
4	€							
	€							
2	(E)							
	Θ							
9	€							
	€							
7	€							
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15	€							
4	€ €							
01	()					I		

Schedule J (Form 990) 2013

SCHEDULE M (Form 990)

Name of the organization

Noncash Contributions

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open To Public Inspection Employer identification number

University of Maryland College Pk Fdn Inc 52-2197313 Part I Types of Property (c) (a) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . Art—Historical treasures . 2 3 Art—Fractional interests . Books and publications Clothing and household 5 goods Cars and other vehicles . . 7 Boats and planes . 8 Intellectual property. 141 3,434,468 FAIR MARKET VALUE 9 Securities—Publicly traded . . . 10 Securities-Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities---Miscellaneous Qualified conservation 13 contribution—Historic structures . . . 14 Qualified conservation contribution-Other. . 15 Real estate—Residential 16 Real estate—Commercial . . 17 Real estate—Other . 18 Collectibles . . 19 Food inventory 20 Drugs and medical supplies. 21 Taxidermy. 22 Historical artifacts . . 23 Scientific specimens. 24 Archeological artifacts Other ▶ (_____) 25 26 Other ▶ (_____) 27 Other ► (_____) Other ▶ (28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? b If "Yes." describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is

checked, describe in Part II.

Schedule M (F	orm 990) (2013) University of Maryland College Pk Fdn Inc	52-2197313 Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b the organization is reporting in Part I, column (b), the number of contributions, the	, 32b, and 33, and whether
	or a combination of both. Also complete this part for any additional information.	
	•••••••••••••••••••••••••••••••••••••••	
	•	
		•
	•••••••••••••••••••••••••••••••••••••••	
**		

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.

Department of the Treasury Internal Revenue Service Name of the organization 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

Employer identification number 52-2197313 University of Maryland College Pk Fdn Inc Form 990, Part III, Line 4d Program Service Expenses 4,825,378, Grants and allocations 2,284,924, Revenue 11,094,045 Institutional Support - To provide support for activities that are concerned with long-range planning of the entire institution as well as activities concerned with community and alumni relations. Form 990, Part III, Line 4d Program Service Expenses 4,937,234, Grants and allocations 3,155,090, Revenue 6,318,603 Athletics & Student Support - To provide support for the operations of atheltic and student activities at the University of Maryland College Park Form 990, Part III, Line 4d Program Service Expenses. 2,161,261, Grants and allocations 1,991,388, Revenue 2,856,708 Research Support - To provide support to research activities and research facilities of the University Of Maryland College Park. Form 990, Part III, Line 4d Program Service Expenses 206,136, Grants and allocations 190,068, Revenue 325,769 Public Service Support - To provide support for activities that are mutually beneficial to the University of Maryland College Park and individuals and external groups external to the institution including community service programs. Form 990, Part VI, Section A, Line 2 Honorary Trustee Joseph M. Gildenhorn is the spouse of Trustee Alma G. Gildenhorn Form 990, Part VI, Section B, Line 11b Form 990 Review Process - The Foundation's Form 990 is prepared by the Foundation's Assistant Director of Financial Management and submitted to the Foundation's Director and CFO for initial review and then to the Board's Budget and Audit Committee Chair prior to being made available to the full Board of Trustees for review prior to formal approval at the Foundation's Board meeting. Form 990, Part VI, Section C, Line 19 The organization's governing documents, conflict of interest policy and financial statements are available to the public on request. The request can be made in writing to the CFO of the Foundation at the mailing address listed on the Foundation's Form 990 and on the Foundation's website.

Form 990, Part XI, Line 9 The net change in Valuation of Split Interest Trusts of (\$173.210)

Schedule O (Form aan or aau-EZ) (2013)	Page 4
	Employer identification number
University of Maryland College Pk Fdn Inc	52-2197313
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. See separate instructions. ► Attach to Form 990.

2013	Open to Public	Inspection

OMB No 1545-0047

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

Employer identification number

(f)
Direct controlling entity Identification of Related Tax-Exempt Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had 52-2197313 (e) End-of-year assets Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income (c) Legal domicile (state or foreign country) Primary activity one or more related tax-exempt organizations during the tax year. (a)Name, address, and EIN (if applicable) of disregarded entity University of Maryland College Pk Fdn Inc Name of the organization Part I Part II

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Section 512(b)(13) controlled entity? Š × 6 Yes (f)
Direct controlling entity ≨ (e)
Public chanty status
(if section 501(c)(3)) (d) Exempt Code section 170 (c) (1) (c)
Legal domicile (state
or foreign country) g (b) Primary activity Education (1) The University of Maryland College Park 52-6002033 (a)Name, address, and EIN of related organization 2119 Main Admin Bldg College park, MD 20742 (3) € 2 9 9

Schedule R (Form 990) 2013

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

Page 2

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University of Maryland College Pk Fdn Inc

Schedule R (Form 990) 2013

Percentage ownership (I) Section 512(b)(13) controlled ŝ Ξ Yes Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 Identification of Related Organizations Taxable as a Corporation or Trust Complete If the organization answered "Yes" on Form 990, Part (J) General or managing partner? Yes No (h) Percentage ownership Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of end-of-year assets (h)
Disproportionate
allocations? ž (f) Share of total Income Yes IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (g) Share of end-ofyear assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total because it had one or more related organizations treated as a partnership during the tax year. Income (d)
| Direct controlling | entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (c)
Legal domicile
(state or foreign country) (d) Direct controlling (b) Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Part III Part IV 2 8 E 3 Θ 5 € 9 **⊙** €. 9 9 ල 3

Schedule R (Form 990) 2013

Part V Transactions With Related Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b,	or 36.
d Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line	, 35b,
d Organizations Complete If the organization answered "Yes" on Form 990, P	line 34,
d Organizations Complete If the organization answered "Yes" on Form	Part IV,
d Organizations Complete If the organization answered "Ye	990,
d Organizations Complete If the organization answered "Ye	-orm
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Part V Transactions With Related	Org
Part V Transactions With Re	lated
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	Part V

Note	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	•	<u> </u>		Yes	Š
-		anizations listed in P	arts II-IV?			
a	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.			Ja		×
Ω	b Gift, grant, or capital contribution to related organization(s)			1b	×	
ပ		٠		10		×
ס				1d		×
				ţ	İ	,
0	B Loans or loan guarantees by related organization(s)			ם		<
	Dividends from related organization(s)			#		×
0				10		×
				Ę	l	×
: . -				Ę		×
	Lease of facilities equipment or other assets to related organization(s)			: ;=		×
-						:
_	k Lease of facilities equipment or other assets from related organization(s).	•		¥		×
: <u> </u>	Performance of services or membership or fundraising	· . · .	• .	=		×
. E				ξ.	T	×
		• . • . • .		ţ	T	×
=	כוומווויק כו ומכווונכט, כלמוףוויכווו, ווומוווין ווכני, כי כנווכן				†;	
0	o Sharing of paid employees with related organization(s)			10	×	
				,	,	
<u>α</u>				-	<u> </u>	
5	q Reimbursement paid by related organization(s) for expenses			19	×	
_	r Other transfer of cash or property to related organization(s)	•		7		\times
S	s Other transfer of cash or property from related organization(s).			1s		×
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	luding covered relati	onships and transaction	on thresho	lds.	
	(8)	(a)	[9]		 5	
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	determir involvec	gui. F
				Cash/FMV		
E	(1) The University of Maryland College Park	۵	33,667,856			
(2)		-				
(3)						
(4)						
(5)						
9						
			Schedi	Schedule R (Form 990) 2013	066 0	2013

Schedule R (Form 990) 2013

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through, which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d) (e) (f) (g) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under carding 512,514)	(e) Are all partners section 501(c)(3) organizations?	tners n (3) ons?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	nate Code V—UBI s? amount in box 20 of Schedule K-1 (Form 1065)	-UBI 30x 20 e K-1 i65)	(J) General or managing partner?		(k) Percentage ownership
			(10.71)	Yes	ę			Yes	ę.	1	Yes	ę	
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(2)							,						
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(8)													
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(14)												_	
(15)													
(16)	<u>.</u>				-								
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Schedule R (For		University of Maryland College Pk Fdn Inc	<u>52-2197313</u>	Page 5
Part VII	Supplem	ental Information		-
	Provide a	dditional information for responses to questions on Schedule R (see instruct	ions).	
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Part VI, Line 17 (990) - States with Which a Copy of this Form 990 is Required to be Filed

	7	_	1.	_	1
<u> </u>	Armed Forces the Americas		Louisiana	<u> </u>	Palau
	Armed Forces Europe	X	Massachusetts		Rhode Island
X	Alaska	X	Maryland	LX_	South Carolina
	Alabama	Х	Maine		South Dakota
	Armed Forces Pacific .		Marshall Islands		Tennessee
	Arkansas	X	Michigan		Texas
	American Samoa	Х	Minnesota		Utah
X	Arizona		Missouri		Virginia
Х	California		Commonwealth of the Northern Mariana Islands		U.S. Virgin Islands
Х	Colorado		Mississippi		Vermont
	Connecticut		Montana	Х	Washington
X	District of Columbia		North Carolina		Wisconsin
	Delaware		North Dakota		West Virginia
	Florida		Nebraska		Wyoming
	Federated States of Micronesia	X	New Hampshire		
	Georgia	Х	New Jersey		
	Guam		New Mexico		
X	Hawaii		Nevada		
	lowa	X	New York		
	Idaho	X	Ohio		
	Illinois	X	Oklahoma		
	Indiana	Х	Oregon		
	Kansas		Pennsylvania		
X	Kentucky		Puerto Rico		